STATE OF ILLINOIS)
) SS.
COUNTY OF DUPAGE)

☒ Affirm and adopt (no changes)	☐ Injured Workers' Benefit Fund (§4(d))
☐ Affirm with changes	☐ Rate Adjustment Fund (§8(g))
☐ Reverse	☐ Second Injury Fund (§8(e)18)
	☐ PTD/Fatal denied
☐ Modify	☒ None of the above

BEFORE THE ILLINOIS WORKERS' COMPENSATION COMMISSION

Sidneya Bennett,

Petitioner,

13IWCC0542

vs. NO: 08 WC 51989

Laidlaw,

Respondent.

DECISION AND OPINION ON REVIEW

Timely Petition for Review having been filed by the Respondent herein and notice given to all parties, the Commission, after considering the issues of accident, temporary total disability, causal connection, medical expenses, prospective medical expenses, permanent partial 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.

The Commission corrects the clerical error found within the Arbitrator's Decision. The Petitioner's injury was to her left hand and left arm. The Arbitrator's decision erroneously references the right hand and right arm in the Order section and in the decision provision in regard to nature and extent. All else is affirmed and adopted.

IT IS THEREFORE ORDERED BY THE COMMISSION that the Decision of the Arbitrator filed October 23, 2012 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.

X

Bond for removal of this cause to the Circuit Court by Respondent is hereby fixed at the sum of $64,500.00. The probable cost of the record to be filed as return to Summons is the sum 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: MAY 2 0 2013

DLG/gal
O: 5/2/13
45

David L. Gore

Mario Basurto

Michael P. Latz

ILLINOIS WORKERS' COMPENSATION COMMISSION
NOTICE OF ARBITRATOR DECISION

BENNETT, SIDNEYA
Employee/Petitioner

Case# **08WC051989**

LAIDLAW
Employer/Respondent

13IWCC0542

On 10/23/2012, 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 0.15% 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:

2356 FOHRMAN, DONALD W & ASSOC
ADAM J SCHOLL
101 W GRAND AVE SUITE 500
CHICAGO, IL 60654

1120 BRADY CONNOLLY & MASUDA PC
LEO PLUCINSKY
ONE N LASALLE ST SUITE 1000
CHICAGO, IL 60602

STATE OF ILLINOIS)
)SS.
COUNTY OF DUPAGE)

- [ ] Injured Workers' Benefit Fund (§4(d))
- [ ] Rate Adjustment Fund (§8(g))
- [ ] Second Injury Fund (§8(e)18)
- [x] None of the above

ILLINOIS WORKERS' COMPENSATION COMMISSION
ARBITRATION DECISION

13IWCC0542

Sidneya Bennett,
Employee/Petitioner

Case # 08 WC 51989

v.

Consolidated cases: none

Laidlaw,
Employer/Respondent

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 **Peter M. O'Malley**, Arbitrator of the Commission, in the city of **Wheaton**, on **8/10/12**. After reviewing all of the evidence presented, the Arbitrator hereby makes findings on the disputed issues checked below, and attaches those findings to this document.

DISPUTED ISSUES

A. [ ] Was Respondent operating under and subject to the Illinois Workers' Compensation or Occupational Diseases Act?
B. [ ] Was there an employee-employer relationship?
C. [x] Did an accident occur that arose out of and in the course of Petitioner's employment by Respondent?
D. [ ] What was the date of the accident?
E. [ ] Was timely notice of the accident given to Respondent?
F. [x] Is Petitioner's current condition of ill-being causally related to the injury?
G. [ ] What were Petitioner's earnings?
H. [ ] What was Petitioner's age at the time of the accident?
I. [ ] What was Petitioner's marital status at the time of the accident?
J. [x] Were the medical services that were provided to Petitioner reasonable and necessary? Has Respondent paid all appropriate charges for all reasonable and necessary medical services?
K. [x] What temporary benefits are in dispute?
[ ] TPD [ ] Maintenance [x] TTD
L. [x] What is the nature and extent of the injury?
M. [ ] Should penalties or fees be imposed upon Respondent?
N. [ ] Is Respondent due any credit?
O. [ ] Other _____

13IWCC0542

FINDINGS

On **8/8/08**, Respondent ***was*** operating under and subject to the provisions of the Act.

On this date, an employee-employer relationship ***did*** exist between Petitioner and Respondent.

On this date, Petitioner ***did*** sustain an accident that arose out of and in the course of employment.

Timely notice of this accident ***was*** given to Respondent.

Petitioner's current condition of ill-being ***is*** causally related to the accident.

In the year preceding the injury, Petitioner earned **$28,999.88**; the average weekly wage was **$557.69**.

On the date of accident, Petitioner was **51** years of age, ***single*** with **1** dependent child.

Petitioner ***has*** received all reasonable and necessary medical services.

Respondent ***has not*** paid all appropriate charges for all reasonable and necessary medical services.

Respondent shall be given a credit of **$0.00** for TTD, **$0.00** for TPD, **$0.00** for maintenance, and **$0.00** for other benefits, for a total credit of **$0.00**.

Respondent is entitled to a credit of **$0.00** under Section 8(j) of the Act.

ORDER

Respondent shall pay Petitioner temporary total disability benefits of $371.79 per week for 43-5/7 weeks, commencing 8/28/08 through 11/16/08 and from 12/9/08 through 7/21/09, as provided in §8(b) of the Act.

Respondent shall pay Petitioner the temporary total disability benefits that have accrued from 8/9/08 through 8/10/12, and shall pay the remainder of the award, if any, in weekly payments.

Respondent shall pay reasonable and necessary medical services of $8,753.96 to Edward Hospital and $12,148.41 to DuPage Medical Group, as provided in Sections 8(a) and 8.2 of the Act. (See Arb.Ex.#2).

Respondent shall pay Petitioner permanent partial disability benefits of $334.61 per week for 81.35 weeks, because the injuries sustained caused 15% loss of use the right hand (30.75 weeks) and 20% loss of use of the right arm (50.6 weeks), as provided in §§ 8(e)9 and 8(e)10 of the Act, respectively.

RULES REGARDING APPEALS Unless a party files a *Petition for Review* within 30 days after receipt of this decision, and perfects a review 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

10/18/12
Date

pay Petitioner permanent partial disability benefits of $334.61 per week for ... injuries sustained caused 15% loss of use the right hand (30.75 weeks) and ...

OCT 23 2012

STATEMENT OF FACTS:

13IWCC0542

Petitioner, a 51 year old bus driver, testified that she was hired by the respondent on October 17, 2003. She described herself at the time at the time of the alleged accident as being 5' 2" inches in height and weighing 120 pounds. As a bus driver, she drove school routes and commuter routes for Pace. Petitioner also noted that she is right hand dominant.

Petitioner prepared a timeline and summary of her job duties which was introduced as PX1. According to petitioner, she has worked as a driver operating a 219 series bus from October of 2004 through July of 2007. She operated that type of bus while driving a Pace route in the morning and afternoon. In the time between her morning and afternoon routes, she drove the same type of buses to transport school children. Petitioner stated that it was a company rule that whenever a stop was made to pick up or drop off a passenger, the emergency brake needed to be engaged. Petitioner stated that on the 219 series bus, the emergency brake knob was on the front dashboard on the right side of the driver. In order to engage the brake, she would reach forward with her right arm and pulled the knob upward. To disengage the emergency brake, she would push the knob inward. A video of the operations of the 219 series bus was submitted by respondent. (RX8). Petitioner testified that during the time span she operated the 219 series bus she never had any medical issues associated with the operation of the bus.

In July of 2007, petitioner's 219 series bus was replaced by a new blue Pace bus. Petitioner testified that buses were new and that the instruments, including the emergency brake knob, were on the left side. A picture of the left console was included on the second page of PX1. On the pictured console is a lever to operate the door of the bus and the emergency brake knob. Petitioner testified that when she made a stop to pick up or drop off a passenger, she would reach to her left and grab the emergency brake knob from its top with four fingers. She would then lift the knob. Petitioner stated that it took force and strength to lift the knob. She indicated that sometimes she would incur a jolt up her arm from pulling on the knob. Petitioner stated that the number of passenger stops that she made varied, but stated that there were 30-40 passengers that commuted every day and that she drove 3 runs of the new Pace bus in the morning and two runs in the afternoon. (PX1).

Petitioner further testified that between her Pace routes she also drove a school bus for the respondent. She drove charters and drove an afternoon school route to take the school children home. Petitioner operated a different type of school bus that had a manual emergency brake on the left side and rose from the floor. In order to engage the parking brake, petitioner testified that she would grab the brake's knob and push forward on the lever towards the floor. Petitioner stated that it took some force to push the lever. In order to disengage the brake, she would have to lift the lever upwards. Petitioner estimated that she would have to stop the school bus 40 times along the school route.

Petitioner testified that over time she developed symptoms in her small and middle fingers that progressed upward to her elbow and into her shoulder and neck. Petitioner stated that at first she did not know what was going on with her and consulted with her family physician, Dr. Karla Dorsey-Johnson at DuPage Medical Group, about potential cardiac problems. Petitioner stated that Dr. Dorsey-Johnson performed a work-up on her to rule out a cardiac problem. (PX6).

On August 14, 2008, petitioner was seen chiropractor Dr. Jerry Christensen for complaints of mid-back pain, left shoulder pain and anterior rib pain. Petitioner reported that three weeks earlier her nephew had picked her up from behind with a big bear hug and injured her ribs. Petitioner was treated for a thoracic sprain/strain. (PX4) On a follow-up visits with Dr. Christensen on August 18, 2008 and August 20, 2008 petitioner made mention to Dr. Christensen of tingling that she was having in her left little finger. (PX4)

On August 28, 2008, petitioner was seen by Dr. Dorsey-Johnson. Petitioner related the injuries caused by her nephew and also informed Dr. Dorsey-Johnson about her left lateral hand pain in the 4th and 5th digits and left sided neck pain. Dr. Dorsey-Johnson ordered Petitioner off work and prescribed physical therapy, Flexeril and a cervical spine MRI. (PX6).

On September 10, 2008, petitioner underwent a cervical MRI which revealed degenerative osteoarthritis primarily in the C4-5 and C5-6 similar in appearance to a previous MRI performed on May 5, 2006. Petitioner followed up with Dr. Dorsey-Johnson on September 16, 2008 and complained of constant pain in her neck, fingers and shoulder. Petitioner reported left arm paraesthesia worsened by driving the bus, specifically numbness of the left forearm and partial left hand numbness. Dr. Dorsey-Johnson referred petitioner to a physiatrist and a pain specialist. (PX6).

On September 25, 2008, petitioner underwent an EMG of her left upper extremity which was interpreted as evidencing a mild ulnar neuropathy at the elbow. Petitioner was thereupon referred to Dr. Kevin Walsh for an orthopaedic evaluation. (PX6)

On October 2, 2008, petitioner was seen by Dr. Walsh. At that time, Dr. Walsh reviewed the EMG results and recommended surgery due to the persistent numbness of petitioner's left hand. Petitioner returned to Dr. Walsh on October 13, 2008 and requested a second opinion. Petitioner subsequently visited Dr. Kenneth Sanders in consultation on October 24, 2008. Dr. Sanders agreed with the recommendation of Dr. Walsh of an anterior transposition of the ulnar nerve at the left elbow. (PX6).

On October 27, 2008, petitioner visited Dr. M. Bryan Neal at the request of the Respondent for purposes of a §12 examining physician. Dr. Neal confirmed the diagnosis of cubital tunnel syndrome and the need for surgery. However, Dr. Neal was of the opinion that petitioner's job duties as a bus driver did not cause or accelerate an underlying condition. Instead, Dr. Neal noted that there was nothing different in her job in 4 years and pointed out that petitioner had a thyroid dysfunction which predisposed her to neuropathies. (RX9).

On November 20, 2008, petitioner was seen by Dr. Dorsey-Johnson. Petitioner informed Dr. Dorsey-Johnson at that time that respondent's physician had said that her condition was not work related. Dr. Dorsey-Johnson recorded that Petitioner had gone back to work and had to repeatedly pull up and down on the air pressure knob when she drove the bus, causing a return of her left wrist and elbow pain. Petitioner reported that as a result she began using her right hand to pull and push the air gauge due to the pain in her left hand. Petitioner estimated that she pulled the brake up and down 75 times in two hours of work. She also said that the emergency break popped up and hit her 4th and 5th fingers while operating the bus. (PX6).

On January 6, 2009, petitioner underwent a second EMG which once again revealed mild left ulnar neuropathy at the elbow and a very mild median mononeuropathy at the left wrist. She was prescribed a wrist splint for night time use at that time. (PX6).

On April 25, 2009, petitioner underwent surgery with Dr. Walsh. The surgery consisted of a left carpal tunnel release and an anterior subcutaneous transposition of the left ulnar nerve. (PX5). S

Petitioner followed-up with Dr. Walsh on May 4, 2009. At that time, Petitioner reported radial nerve symptoms which Dr. Walsh could not account for. Dr. Walsh suggested that she return in 4 weeks and indicated at that time she could return to work on May 19, 2009. On May 18, 2009, Dr. Walsh continued her off for 1-2 weeks. On June 18, 2009, he continued her off work for one month. On July 21, 2009, Dr. Walsh indicated that

petitioner could return to work full duty. (PX6) Petitioner testified that she has had no further follow-ups with Dr. Walsh.

On July 19, 2012, Dr. Neal wrote an addendum report to his pervious report of October 27, 2008. Dr. Neal performed a medical record review and opined that his opinions regarding causation of the left cubital tunnel syndrome remained the same. Dr. Neal further opined that the carpal tunnel syndrome diagnosis was not causally related to petitioner's job duties. (RX10, Dep. Exhibit #3).

Petitioner testified that she still has ongoing numbness and pain with her hand and arm as of the date of hearing. She has not sought any further medical care.

Petitioner presented Rochelle Grossley as a witness. Ms. Grossley testified that she was hired by the respondent in September of 2006 as a bus driver. Her job involved driving the Pace route for the respondent. Ms. Grossley stated that she operated the new blue Pace bus beginning in 2007. Ms. Grossley identified the emergency brake knob on the Pace bus and testified as to the difficultness of lifting the knob with each stop. Ms. Grossley stated that in lifting the emergency brake knob, she felt pain in her left hand and elbow. Ms. Grossley indicated that she has never sought medical treatment nor made a claim for workers' compensation benefits. Mr. Grossley also testified that she was familiar with the 42 foot school buses that have the manual brake rising from the floor on the left side of the driver. She testified that the emergency brake on that vehicle was difficult to engage and required force to do so.

Mary Adams also testified on behalf of the petitioner. Ms. Adams described herself as being 5' 2" in height. She indicated that she exclusively drove school routes for the respondent. From 2007 to 2008 she operated a 42 foot bus that had a manual brake on the left side rising from the floor. Ms. Adams testified that it was very difficult for her to engage the manual brake and that she developed symptoms in her left arm from her hand up to her elbow. Ms. Adams stated that she never sought medical treatment for her left arm and never filed a workers' compensation claim.

Respondent presented Thomas Harris, III as a witness. Mr. Harris indicated he had been employed with respondent for 10 years and worked as a stand-by Pace driver and an assistant P.M. dispatcher. Mr. Harris described himself as being 6' 5" in height and weighing approximately 220 pounds. Mr. Harris indicated that he was familiar with all of respondent's buses and had driven all of them multiple times. Mr. Harris stated that he was very familiar with the new blue Pace buses. Mr. Harris indicated that the emergency brake knob is pulled upward with the left arm about an inch to an inch and one-half to engage. In his experience, he has never had any difficulty lifting the emergency brake knob. Mr. Harris also stated that he was unaware of any drivers reporting or complaining of issues with their left arm or hand as a result of driving the new Pace buses.

Mr. Harris also testified that he had observed petitioner several times as an operator of the new Pace bus in his capacity as a supervisor. Driver's Ride Reports were filled out as to his observations. (RX1, RX6, RX7). The reports were filled out by him and were signed by petitioner. Petitioner had no input in the information placed on the form. Mr. Harris acknowledged that there is nothing on the form requesting the bus driver's input as to the operation of the vehicle. Mr. Harris stated that in the few times he observed petitioner, he never noticed her having any pain behavior in the operation of the vehicle.

Currently, petitioner notices numbness and tingling from her left elbow to her left wrist, as well as "nerve pain" up her left hand. She indicated she feels it more in her fingers, and notices it all the time. She also noted that she feels a "shock" when she grabs or pulls something the wrong way. However, although she claims to have

spoken about these complaints to Dr. Lombardi, with whom she is currently treating for an unrelated condition, she has not recently sought treatment for her claimed workers' compensation injuries.

WITH RESPECT TO ISSUES (C), DID AN ACCIDENT OCCUR THAT AROSE OUT OF AND IN THE COURSE OF THE PETITIONER'S EMPLOYMENT BY THE RESPONDENT, AND (F), IS THE PETITIONER'S PRESENT CONDITION OF ILL-BEING CAUSALLY RELATED TO THE INJURY, THE ARBITRATOR FINDS AS FOLLOWS:

Petitioner is claiming that she injured her left arm and hand as a result of the repetitive activities associated with her job duties as a bus driver. The evidence shows that Petitioner began working for respondent as a bus driver in 2003. Petitioner related that during the first four years of her employment with respondent she primarily drove a series 219 bus. She noted that during that entire time span she had no medical issues concerning her left upper extremity. Indeed, this would be expected, since the testimony of the various witnesses as well as the job video (RX8) show that the emergency brake on the 219 series bus involved reaching forward and using the right arm/hand to pull the knob out, and not the left arm/hand.

That, however, would appear to have changed in June or July of 2007. At that time, petitioner began operating the new blue Pace bus which had the console on the left side of the driver's seat. Petitioner credibly testified as to the process of engaging the emergency brake knob on the left sided console and the difficulty for her to perform that operation. Petitioner stated that it was very hard for her to lift the knob and required both strength and force to do so. Petitioner's testimony was corroborated by Rochelle Grossley who provided similar testimony as to her experiences driving the new Pace buses and indicated that she had also experienced pain in her wrist and arm from lifting the emergency brake knob.

Petitioner testified that she also drove a school bus for the respondent between the times she drove her Pace Bus route. Petitioner stated that the school bus had a manual brake on the left side rising from the floor that required effort and strength to push down. Fellow bus driver Mary Adams provided supporting testimony regarding her experiences operating the same type of school bus with the manual brake on the left side. Ms. Adams testified that she incurred similar symptoms as petitioner while pushing and lifting the manual brake.

Respondent's witness, Mr. Harris testified that he operated the Pace bus and never experienced problems lifting the emergency brake knob. However, Mr. Harris is also 6' 5" in height and weighs 220 pounds compared to petitioner (5' 2", 120 pounds) and the other female witnesses in this matter who are all decidedly smaller in stature. Along these lines, Petitioner also credibly testified that the emergency brake knob in this particular bus series was not easy to engage, requiring a lot of pressure to grab and lift the button up, and that she was forced to use her left upper extremity to perform this task each time she opened the bus door given the fact that operating rules required her to keep her opposite hand on the steering wheel at all times. Based on this testimony, and the frequency with which she was required to engage in this activity, the Arbitrator is persuaded that the lifting of the emergency brake knob on the new Pace buses and the pushing down of the manual brake on the school bus were a strenuous and forceful repetitive actions performed by the petitioner while operating the school bus.

The question that remains is whether the strenuous and forceful actions described caused the diagnosed medical condition. In reviewing the medical records, it does not appear that petitioner related any type of symptoms associated with cubital tunnel syndrome until August 18, 2008 when she reported tingling in her left finger to her chiropractor, Dr. Christensen. (PX4). Petitioner testified that the main purpose for her treatment with Dr. Christensen was that she was treating for an injury to her ribs and mid-back due to her nephew squeezing her from behind at a family function three weeks earlier. Petitioner testified that prior to that event happening she

had been having issues with her left hand and up her arm for quite a while. She testified that she had visited her family physician, Dr. Dorsey-Johnson, before she had seen the chiropractor. (PX6)

After bringing the numbness in her left hand to the attention of Dr. Christensen, Petitioner visited Dr. Dorsey Johnson on August 28, 2008 regarding hand pain in her 4th and 5th digits and neck. Thereafter, she underwent a course of treatment at DuPage Medical Group. On October 10, 2008, Dr. Walsh noted the petitioner's operation of the steering wheel as part of her job with gripping, reaching and pulling of the arms. The history recorded by Dr. Dorsey-Johnson on November 20, 2008 references the repeated pulling up and down the air pressure gauge while driving and operating the bus. (PX6).

Dr. Kevin Walsh, the treating orthopaedic, issued a narrative report on January 11, 2009 and submitted to a deposition on September 8, 2009. Dr. Walsh first saw petitioner on October 2, 2008. Following his examination and review of the diagnostic study, Dr. Walsh opined that petitioner had left cubital tunnel syndrome which was moderately severe and which required surgery. (PX7,p.8,9). Dr. Walsh indicated that he was familiar with the history of petitioner's work as a bus driver and had looked over the picture of the left console of the new Pace bus. (PX7,p.24,25). It was his opinion that petitioner's job duties could have caused the cubital tunnel syndrome of the left arm. (PX7,p.26). Dr. Walsh further opined that petitioner's job duties could have aggravated or accelerated an underlying condition. (PX7,p.27). Dr. Walsh was questioned as to whether petitioner's thyroid dysfunction could have a possible causation to cubital tunnel syndrome and he responded that there was no causal relationship between thyroid disease and cubital tunnel syndrome. (PX7,p.27). Dr. Walsh also testified that the condition of carpal tunnel syndrome which was diagnosed in January of 2009 and evidenced by EMG may or could have been caused by petitioner's work duties. (PX7,p.28). Dr. Walsh acknowledged that the petitioner's thyroid dysfunction could have increased the likelihood of carpal tunnel syndrome, but the fact that petitioner had the condition did not effect his opinion as to causation. (PX7,p.28, 29).

Respondent's examiner, M. Bryan Neal, M.D. first saw petitioner on October 27, 2008. After examining petitioner and performing a record review, it was Dr. Neal's impression that petitioner had performed the same job for 4 years and that there was nothing different about the job in terms of equipment, performance, and timing. (RX10,p.17). As a result, Dr. Neal indicated that the diagnosis of cubital tunnel syndrome was not causally related to the petitioner's employment. (RX10,p.17). Dr. Neal further indicated that petitioner's age, sex and thyroid dysfunction predisposed her to neuropathies. (RX10,p.17). On cross-examination, it was apparent that Dr. Neal never inquired or delved into the job tasks performed by petitioner with her left arm. (RX10,p.42-50). Dr. Neal also indicated that if one does have a metabolic disease such as thyroid dysfunction, exposure to a repetitive trauma could cause a neuropathy to develop quicker. (RX10,p.53).

Dr. Neal performed a second medical record review on July 19, 2012 and reviewed a job analysis and a video job analysis submitted by the respondent. Dr. Neal again stated that he did not believe that the cubital tunnel was related and further opined that the carpal tunnel syndrome diagnosis was not related to petitioner's occupational duties. Dr. Neal indicated that carpal tunnel syndrome is an idiopathic disease and that the diagnosis came about after petitioner had been off work. (RX10).

The Arbitrator finds the opinions of Dr. Neal along these lines to be unpersuasive. More to the point, the Arbitrator questions how Dr. Neal can so easily discount petitioner's job activities as a possible source, or at least an aggravating factor, in the development of both her left cubital tunnel and left carpal tunnel syndrome conditions. Once again, this would be based on petitioner's credible testimony as to the nature and frequency of the repetitive trauma she was experienced as a result of her job activities for respondent, particularly after she began driving the new Pace bus in 2007.

Based on the above, and the record taken as a whole, including the credible testimony of Petitioner, the Arbitrator finds that Petitioner sustained accidental repetitive trauma type injuries – specifically left cubital tunnel and left carpal tunnel syndromes -- arising out of and in the course of her employment on or about August 8, 2008 and that a causal relationship exists between said accidental injuries and petitioner's current condition of ill-being. Along these lines, the Arbitrator finds the opinions of treating physician Dr. Walsh to be more persuasive and worthy of weight than those offered by Respondent's §12 examining physician, Dr. Neal.

WITH RESPECT TO ISSUE (J), WERE THE MEDICAL SERVICES THAT WERE PROVIDED TO PETITIONER REASONABLE AND NECESSARY AND HAS RESPONDENT PAID ALL APPROPRIATE CHARGES FOR ALL REASONABLE AND NECESSARY MEDICAL SERVICES, THE ARBITRATOR FINDS AS FOLLOWS:

The parties submitted into evidence an agreed stipulation outlining the fee schedule amounts that would be due and owing in the event this matter was found to be compensable. (Arb.Ex.#2).

In addition, Petitioner submitted the medical bills of DuPage Medical Group and Edwards Hospital into evidence. The DuPage Medical Group bill has several redacted charges contained within that petitioner testified were not related and, thus, not included. After reviewing the medical charges and the corresponding medical records, the Arbitrator finds that the charges of both DuPage Medical Group and Edwards Hospital were reasonable and necessary to treat petitioner's work related injuries.

Based on the above, and the record taken as a whole, including the aforementioned agreed stipulation (Arb.Ex.#2) and in light of the Arbitrator's determination as to accident and causation (issues "C" and "F", supra), the Arbitrator finds that Petitioner is entitled to reasonable and necessary medical expenses incurred through Edward Hospital in the amount of $8,753.96 and expenses incurred through the DuPage Medical Group in the amount of $12,148.41, pursuant to §8(a) and the fee schedule provisions of §8.2 of the Act.

WITH RESPECT TO ISSUE (K), WHAT AMOUNT OF COMPENSATION IS DUE FOR TEMPORARY TOTAL DISABILITY, THE ARBITRATOR FINDS AS FOLLOWS:

Petitioner was taken off work initially by her family physician, Dr. Dorsey-Johnson, on August 28, 2008. It appears from the medical records that she remained off of work until November 16, 2008. Petitioner testified that she wanted to return to work and that she did so at full duty at that time. Petitioner then worked through December 8, 2008 and was taken back off of work by Dr. Dorsey-Johnson on December 9, 2008. She remained off of work per her physicians, Dr. Dorsey-Johnson and Dr. Walsh, through July 21, 2009, the day Dr. Walsh released her to return to work full duty. (PX7,p.23).

Based on the above, and the record taken as a whole, and in light of the Arbitrator's determination as to accident and causation (issues "C" and "F", supra), the Arbitrator finds that Petitioner is entitled to temporary total disability benefits from August 28, 2008 through November 16, 2008 and from December 9, 2008 through July 21, 2009, for a period of 43-5/7 weeks pursuant to §8(b) of the Act.

WITH RESPECT TO ISSUE (L), WHAT IS THE NATURE AND EXTENT OF THE INJURY, THE ARBITRATOR FINDS AS FOLLOWS:

On April 25, 2009, petitioner underwent surgery at the hands of Dr. Walsh consisting of a left carpal tunnel release and an anterior subcutaneous transposition of the left ulnar nerve. (PX5). Petitioner followed up with Dr. Walsh thereafter and was eventually released to return to full duty on July 21, 2009.

Currently, petitioner notices numbness and tingling from her left elbow to her left wrist, as well as "nerve pain" up her left hand. She indicated she feels it more in her fingers, and notices it all the time. She also noted that she feels a "shock" when she grabs or pulls something the wrong way. However, although she claims to have spoken about these complaints to Dr. Lombardi, with whom she is currently treating for an unrelated condition, she has not recently sought treatment for her claimed workers' compensation injuries.

Based on the above, and the record taken as a whole, and in light of the Arbitrator's determination as to accident and causation (issues "C" and "F", supra), the Arbitrator finds that Petitioner suffered permanent partial disability to the extent of 15% loss of use of the right hand and 20% lose of use of the right arm pursuant to §§ 8(e)9 and 8(e)10 of the Act, respectively.