# BEFORE THE INDUSTRIAL COMMISSION OF THE STATE OF IDAHO

ABDI AHMED ABDI,

Claimant,

v.

PEOPLE READY INC.,

Employer,

and

NEW HAMPSHIRE INSURANCE COMPANY,

Surety, Defendants. IC 2017-008322

FINDINGS OF FACT, CONCLUSIONS OF LAW, AND RECOMMENDATION

FILED
JUL 1 2 2021

INDUSTRIAL COMMISSION

## INTRODUCTION

Pursuant to Idaho Code § 72-506, the Idaho Industrial Commission assigned the aboveentitled matter to Referee John Hummel, who conducted a hearing in Boise on May 21, 2021.

Claimant, Abdi Ahmed Abdi, did not appear at the hearing and did not provide any reasons for
his non-appearance. Mark C. Peterson, of Boise, represented Defendant Employer, People Ready
Inc., and Defendant Surety, New Hampshire Insurance Company. Defendants submitted
documentary evidence. The parties did not hold post-hearing depositions and did not submit
briefs. The matter came under advisement on May 28, 2021.

## **ISSUES**

The issues to be decided by the Commission as the result of the hearing are:

- Whether the condition for which Claimant seeks benefits was caused by the industrial accident;
- 2.) Whether and to what extent Claimant is entitled to medical benefits; and

FINDINGS OF FACT, CONCLUSIONS OF LAW, AND RECOMMENDATION - 1

3.) Whether any benefits Claimant may be entitled to, or a portion thereof, should be barred based upon Idaho Code § 72-433(1) or § 72-435.

### CONTENTIONS OF THE PARTIES

It is unknown what the contentions of Claimant are, as he did not appear at the hearing to make any argument or otherwise submit an argument in writing. It appears that he feels that he requires additional medical treatment for his injured left hand, although it is unclear what specific medical treatment he desires beyond that which has already been provided to him.

Defendants contend that they have provided Claimant all of the medical and income benefits to which he is entitled, and that he is entitled to no further benefits.

## **EVIDENCE CONSIDERED**

The record in this matter consists of the following:

- 1. The Commission's legal file in this matter;
- 2. The transcript of hearing; and
- 3. Defendants' Exhibits 1 through 15.1

After having considered the above evidence, the Referee submits the following findings of fact and conclusion of law for review by the Commission.

### FINDINGS OF FACT

1. **Hearing**. Pursuant to due Notice of Hearing dated March 3, 2021, a hearing was held on May 21, 2021. Tr., 2:1-6. Claimant did not appear at the hearing. *Id.* at 3:21-25. The Commission's legal file further reflects that Claimant did not contact the Commission either before or after to offer any reasons why he did not appear at the hearing.

<sup>&</sup>lt;sup>1</sup> The Referee did not formally admit the exhibits on the record at the hearing, however Defendants appropriately notified Claimant of the exhibits in a J.R.P. § 10 notice prior to the hearing. Again, Claimant was not present at the hearing to object to or agree with the exhibits. Defendants' counsel presented the exhibits to the Referee, who lodged them with the Commission. Defendants' Exhibits 1 through 15 are hereby deemed admitted.

- 2. **Industrial Accident**. Claimant was performing his regular duties as a sanitation worker on December 14, 2016. He was washing a machine with a hose when a coworker sprayed hot liquid on him, burning/lacerating his left hand. Ex. 1 (first report of injury or illness); Ex. 2 (workers' compensation complaint).
- 3. Defendants admitted that the accident actually occurred on or about the time that Claimant claimed. They further admitted that an employer/employee relationship existed, that the parties were subject to the provisions of the Idaho Workers' Compensation Act, that the condition for which benefits were claimed was caused partly by an accident arising out of and in the course of Claimant's employment, and that the alleged Employer was insured under the Act. Ex. 3 (answer to complaint). Defendants denied each and every allegation of the complaint not specifically admitted, and further denied that claimant was entitled to medical benefits that were denied by Surety. *Id.* at 7.
- 4. Claim Status Notices. On January 5, 2017, Surety, through its third-party administrator ESIS, notified Claimant that his "claim for second degree burn left hand has been accepted for benefits." Claimant received an award of Total Temporary Disability (TTD) benefits from 12/27/2016, the date he was hospitalized, in the amount of \$324.25 per week. Ex. 7:21.
- 5. On February 16, 2017, ESIS notified Claimant that his benefits had been stopped effective February 1, 2017, because Employer offered him a light duty position as of February 1, 2017, at his regular wage. *Id.* at 22.
- 6. On March 17, 2017, ESIS notified Claimant that his claim would be closed unless he advised whether he was still seeking medical treatment with Dustin Judd, M.D. Claimant replied that he had an appointment scheduled with Dr. Judd. *Id.* at 23.

- 7. On September 18, 2017, ESIS notified Claimant that his claim would be closed unless he advised whether he was still seeking medical treatment with Dr. Judd. Claimant replied that he had an appointment scheduled with Dr. Judd. Ex. 7:24.
- 8. On February 23, 2018, ESIS notified Claimant that he was at maximum medical improvement (MMI) with an upper left extremity impairment of 5%, per the report of Kevin Krafft, M.D., which was attached to the notice. *Id.* at 25. This was equal to 300 weeks x 5% = 15 weeks @ \$396.55 per week = \$5,948.25, which was paid out to Claimant in installments. *Id.*
- 9. **Medical Treatment**. On December 23, 2016, Claimant sought treatment in the emergency department of St. Luke's Regional Medical Center in Meridian, Idaho. Heather A. Crane, M.D., examined him. Dr. Crane observed in pertinent part as follows:

Abdi Ahmed Abdi is a 41 y.o. male who presents with a chief complaint of burn to the hand. The patient reports that last Wednesday while he was at work he spilled hot water on his left hand. The patient has a burn on the top of his left hand. The patient reports that there is swelling on his left hand now and reports that it is painful. He currently rates his symptoms as 9/10 in severity. He reports that he has tried Tylenol with minimal relief. He otherwise does not report headache, fevers, nausea, vomiting, numbness, tingling, or any other acute concerns.

Ex. 15:127. Dr. Crane diagnosed Claimant with a second degree burn of his left hand. *Id.* at 130. She further noted that Claimant appeared to have an infection of the second-degree burn. Claimant received administration of an antibiotic shot and Dr. Crane discharged him to home with Augmentin for further antibiotic relief, as well as Hydrocodone for pain. She also referred him to Dr. Judd, a hand surgeon. *Id.* 

10. Dr. Judd first examined Claimant on December 27, 2016 at the St. Luke's Orthopedic Clinic West in Meridian. Ex. 14:73. Dr. Judd noted that Claimant presented with a "chief complaint of a left hand burn he sustained while at work. The patient reports that he was

working with hot water and chemicals when his left hand was inadvertently burned along the radial border of the left hand at the base of the index finger on the dorsal side." Ex. 14:73. Claimant reported no improvement in his symptoms and significant pain in his left hand since his visit with Dr. Crane. *Id.* Dr. Judd was concerned that Claimant presented with "profound left-hand cellulitis" and recommended an MRI to "rule out any type of drainable abscess that would require surgical intervention. *Id.* at 75.

- 11. The MRI, taken on December 27, 2016, showed a "large dorsal abscess with associated cellulitis involving the dorsum of the left hand." *Id.* Claimant also had concerning, elevated blood tests associated with the presence of an infection. *Id.* Dr. Judd admitted Claimant to the hospital at St. Luke's Regional Medical Center, Meridian, and scheduled him for surgery the following day. *Id.* Claimant began a course of IV antibiotics while in hospital. *Id.*
- 12. Dr. Judd performed surgery on Claimant's left hand on December 28, 2016. The procedure performed was a "left hand incision and drainage of dorsal abscess." Upon opening the abscess, Dr. Judd found no evidence of drainable fluid, however there was consolidated phlegmon that he debrided and sent for cultures. Dr. Judd readmitted Claimant to the hospital for further IV antibiotics and follow-up on his cultures. *Id.* at 77-80.
- 13. Dr. Judd continued to follow Claimant while he remained in hospital and thereafter. On January 3, 2017, Dr. Judd wrote a "To Whom It May Concern" letter advising that Claimant should remain off work currently due to his condition. *Id.* at 88.
- 14. Claimant returned to Dr. Judd on January 9, 2017 for follow-up of his left-hand dorsal incision and associated burn. Dr. Judd instructed Claimant to take his Bactrim prescription as prescribed, which it appeared that he was not doing because he had two nearly full bottles left.

There was currently no sign of obvious infection. He further instructed Claimant to continue with Betadine soaks of his left hand. Dr. Judd removed Claimant's sutures. Ex. 14:89-90.

- 15. Dr. Judd followed up with Claimant on January 16, 2017 and January 27, 2017. On January 27, 2017 Dr. Judd signed a letter to Claimant's employer advising that Claimant could return to light duty, with no use of the left upper extremity. Ex. 14:91-96.
- On April 3, 2017, Dr. Judd signed a letter to Claimant's employer advising that he may return to full duty immediately with no restrictions. *Id.* at 97. At their office visit on the same date, Dr. Judd observed that Claimant's "edema continues to improve and his wound continues to get smaller." Claimant was able to make a fist but lacked full flexion of the left index finger. Dr. Judd advised Claimant to continue with his wound therapy until the wound was fully healed. Claimant had made "significant improvement" and was interested in a full release to return to work. Dr. Judd anticipated more improvement, and that Claimant would reach maximum medical improvement within the next three months. *Id.* at 98-99.
- 17. On May 16, 2017, Dr. Judd noted that Claimant's "left hand is stable in its exam and in its overall appearance. The patient will always have some mild limitations with use of his left hand especially at the level of his left index finger, but this should not preclude him from being able to find employment." *Id.* at 101. In a subsequent questionnaire he filled out for the Surety, Dr. Judd stated that Claimant had reached MMI on May 16, 2017. Dr. Judd advised further that he does not perform impairment ratings, which would need to be done by an independent physician. *Id.* at 102.
- 18. Claimant returned to Dr. Judd on August 1, 2017. He complained of severe left-hand pain with significant left index finger stiffness. Dr. Judd noted that Claimant's traumatic and surgical wounds were stable. Claimant was very reluctant to move his left index finger at all.

There were no signs of an infection. Dr. Judd discussed with Claimant that prior to being discharged from his clinic, Claimant was able to make a full fist with the left hand without significant issues. Dr. Judd noted that "I am not sure what is happening to cause symptoms to regress in his overall function of his left hand." Claimant received a referral back to hand therapy. Ex. 14:103-104.

- 19. On September 26, 2017, Dr. Judd met with Claimant again. He noted in pertinent part as follows: "Today, I discussed with Abdi that at this point I think he has reached a point of maximum medical improvement. He does have some residual stiffness in the left-hand index finger mainly at the level of his MCP joint where his soft tissue injury/burn was. However, I do not think there is any further treatment necessary for this given the fact that he can make a functional fist and extend his fingers. In the past, he has actually had a better range of motion arc with the index finger and I would think that in time as he continues to use his left hand more that should progressively improve." *Id.* at 109.
- 20. On January 19, 2018, Claimant returned to Dr. Judd with continued complaints of residual symptoms in his left hand, "including pain along the dorsum of his hand extending from the index finger into his dorsal hand and into his forearm and left upper extremity.<sup>2</sup> He reports numbness along the dorsum of his left hand. He also reports cold intolerance as it relates to his left hand. He also reports difficulties lifting heavy objects." Dr. Judd had another extensive discussion with Claimant concerning his left hand. Claimant exhibited stiffness in his left index finger as before. Dr. Judd advised Claimant that no further surgery was warranted, and the main issue appeared to be Claimant's difficulty in obtaining employment. Dr. Judd referred Claimant to Kevin Krafft, M.D., a physical medicine and rehabilitation specialist with St. Luke's, for an

<sup>&</sup>lt;sup>2</sup> Note that this is the first time that Claimant reported involvement of the rest of his upper left extremity.

impairment rating. Dr. Judd's office transferred his notes on Claimant to Dr. Krafft. Ex. 14:110-112.

21. Dr. Krafft's impression, after reviewing records from Dr. Judd and examining Claimant on January 31, 2018, was as follows:

Mr. Abdi Ahmed [sic] suffered a burn to the dorsum of his left hand with subsequent development of an abscess. He underwent incision and drainage of the dorsal abscess with non-operative management of a concomitant second degree burn. He has healed well. He exhibits non-physiologic extension contracture of all his digits. He was noted on exam to have flexible tendons including in his index finger. Dr. Judd noted his ability to make a fist with some contracture of his index finger at the level of the MCP. He was able to reach 60 degrees of flexion. I concur there are likely other factors at play affecting his presentation. He is medically stable at this time and has reached MMI.

Ex. 13:71.

- 22. For an impairment rating, Dr. Krafft consulted the 6<sup>th</sup> edition of the *Guides to the Evaluation of Permanent Impairment*. He assigned Claimant a 5% impairment of the upper extremity, which was "considered reasonable in light of his presentation." *Id.* at 71-72.
- 23. Dr. Krafft assigned no permanent work restrictions to Claimant, however he did recommend "use of a glove if the cold bothers him." No further diagnostic testing was indicated. He recommended that Claimant maintain his range of motion (ROM) daily and follow up with ICRD for possible job recommendations. *Id.* at 72.
- 24. Claimant returned to Dr. Judd after being examined by Dr. Krafft. This office consultation took place on February 20, 2018. Dr. Judd observed that Claimant's burn and incision were well healed. Claimant was very reluctant to be examined and reluctant to do any kind of active motion of his fingers during the examination. Dr. Judd noted that Claimant's presentation was "dramatically different" than his last examination in January 2018. He again

noted that Claimant had reached MMI. Dr. Judd's office arranged for Claimant to see a vocational counselor. Ex. 14:113-114.

- 25. Claimant received a referral to Rodde D. Cox, M.D., of Boise Physical Medicine and Rehabilitation Clinic, for a second opinion on September 25, 2019. Dr. Cox took Claimant's medical history and reviewed relevant records. Ex. 12:63-67. Claimant reported to Dr. Cox that his current symptoms in the left upper extremity were that of a burning, aching, stabbing pain throughout the entire left hand that went all the way up to his left shoulder area. Claimant asserted that the pain had been in his shoulder "the whole time." Claimant's pain was worse with lifting, using his arm, sneezing, and sleeping, and was sensitive to cold. The pain was improved with medication. Claimant rated the pain at 6/10. *Id.* at 67.
- 26. Claimant's physical examination was normal for no acute distress, and a well healed incision over the dorsum of the left hand. He did not have any skin, nail, or hair changes on his left hand. His hand temperature was normal. He had no obvious edema. Manual muscle testing revealed diffuse, give-way weakness throughout the entire left upper extremity. Claimant had diminished sensation to pinprick throughout the entire left upper extremity. These symptoms did not fit an anatomic or dermatomal distribution, in Dr. Cox's opinion. Claimant carried his arm in a very guarded manner. He declined any actual grip activity. *Id.* at 68.

## 27. Dr. Cox's impression was as follows:

Left hand pain. It appears that he suffered a burn to the hand and developed an abscess. This was treated surgically. He does have marked pain behaviors and numerous yellow flags for chronicity including the diffuse giveaway weakness, the nonatomic sensory loss. He does not have objective findings beyond the scarring on the back of the hand. He has had extensive attempts at treatment with several courses of physical therapy which has not provided any additional improved function. I do not feel that any additional surgical intervention is indicated. I do not feel that any additional therapy is indicated. I would agree with his previously rendered impairment rating by Dr. Krafft. I do not feel that there is any additional impairment indicated. I would also agree with the previous work

release by Dr. Judd. I feel that he is capable of returning back to work in a full duty capacity. There is no objective basis to warrant any restrictions on the left hand.

Ex. 12:68.

#### DISCUSSION AND FURTHER FINDINGS

- 28. The provisions of the Idaho Workers' Compensation Law are to be liberally construed in favor of the employee. *Haldiman v. American Fine Foods*, 117 Idaho 955, 956, 793 P.2d 187, 188 (1990). The humane purposes which it serves leave no room for narrow, technical construction. *Ogden v. Thompson*, 128 Idaho 87, 88, 910 P.2d 759, 760 (1996). Facts, however, need not be construed liberally in favor of the worker when evidence is conflicting. *Aldrich v. Lamb-Weston, Inc.*, 122 Idaho 361, 363, 834 P.2d 878, 880 (1992).
- 29. Causation. A claimant must prove that he was injured as the result of an accident arising out of and in the course of employment. Seamans v. Maaco Auto Painting, 128 Idaho 747, 751, 918 P.2d 1192, 1196 (1996). Proof of a possible causal link is not sufficient to satisfy this burden. Beardsley v. Idaho Forest Industries, 127 Idaho 404, 406, 901 P.2d 511, 513 (1995). A claimant must provide medical testimony that supports a claim for compensation to a reasonable degree of medical probability. Langley v. State, Industrial Special Indemnity Fund, 126 Idaho 781, 785, 890 P.2d 732, 736 (1995). Magic words are not necessary to show a doctor's opinion is held to a reasonable degree of medical probability; only their plain and unequivocal testimony conveying a conviction that events are causally related. Jensen v. City of Pocatello, 135 Idaho 406, 412-13, 18 P.3d 211, 217-18 (2001).
- 30. Claimant carried the burden of proving causation. Serrano v. Four Seasons Framing, 157 Idaho 309, 317, 336 P.3d 242, 250 (2014) (quoting Duncan v. Navajo Trucking, 134 Idaho 202, 203, 998 P.2d 1115, 1116 (2000)). "The proof required is 'a reasonable degree of

medical probability' that the claimant's 'injury was caused by an industrial accident." *Id.* (quoting Anderson v. Harper's Inc., 143 Idaho 193, 196, 141 P.3d 1062, 1065 (2006)). Put another way, the "claimant has the burden of proving a probable, not merely a possible, causal connection between the employment and the injury or disease." *Stevens-McAtee v. Potlatch Corp.*, 145 Idaho 325, 332, 179 P.3d 288, 295 (2008) (quoting Beardsley v. Idaho Forest Indus., 127 Idaho 404, 406, 901 P.2d 511, 513 (1995)). "In this regard, 'probable' is defined as 'having more evidence for than against." *Estate of Aikele v. City of Blackfoot*, 160 Idaho, 903, 911, 382 P.3d, 352, 360 (2016) (quoting Jensen v. City of Pocatello, 135 Idaho 406, 412, 18 P.3d 211, 217 (2000)). "The Commission may not decide causation without opinion evidence from a medical expert." *Serrano*, 157 Idaho at 317, 336 P.3d at 250 (quoting Anderson, 143 Idaho at 196, 141 P.3d at 1065).

- 31. Based upon the record, which consists primarily of the exhibits submitted by Defendants, there is no actual dispute that Claimant suffered an injury to his left hand in the form of a second degree burn in the industrial accident of December 16, 2016. This was an accepted claim, and a causal link has been established between the injury and the medical treatment Claimant received, including his surgery and hospitalization, up until being found at MMI by Dr. Judd, Dr. Krafft, and Dr. Cox. As Dr. Cox observed, "It appears that he [Claimant] suffered a burn to the hand and developed an abscess." Ex. 12:68.
- 32. Due in part to his nonappearance at the hearing or failure to present any other evidence, such as exhibits or expert depositions, Claimant has failed to establish a causal connection between his industrial accident and injury and any further medical treatment he may wish to receive. The nature of such treatment is unclear, which will be discussed in further detail

below. Furthermore, all physicians involved in his case, including Dr. Judd, Dr. Krafft, and Dr. Cox, agreed that Claimant was at MMI and no further treatment was necessary.

- 33. **Medical Treatment**. An employer shall provide reasonable medical care for a reasonable time after an injury. Idaho Code § 72-432(1). A "reasonable time" includes the period of recovery before medical stability but may include a longer period. *Jarvis v. Rexburg Nursing Center*, 136 Idaho 579, 38 P.3d 617 (2001). "[N]othing in the plain language of Idaho Code Section 72-432(1) suggests MMI is relevant as to whether continued medical care is reasonable." *Rish v. Home Depot, Inc.*, 161 Idaho 702, 705, 390 P.3d 428, 431 (2017). Reasonable medical treatment benefits may continue for life; there is no statute of limitation on the duration of medical benefits under Idaho Workers' Compensation Law.
- 34. A claimant bears the burden of showing that medical treatment required by a physician is reasonable. Idaho Code § 72-432(1). A claimant must support his or her workers' compensation claim with medical testimony that has a reasonable degree of medical probability. Hope v. ISIF, 157 Idaho 567, 572, 338 P.3d 546, 552 (2014), citing Sykes v. CP Clare & Co., 100 Idaho 761, 764, 605 P.2d 939, 942 (1980). The reasonableness of treatment is dependent upon the totality of the facts and circumstances of the individual being treated. Harris v. Independent School District No. 1, 154 Idaho 917, 303 P.3d 605 (2013). Totality of the facts and circumstances is a factual determination, but not a retrospective analysis with the benefit of hindsight. Chavez v. Stokes, 158 Idaho 793, 353 P.3d 414 (2015).
- 35. Due to his nonappearance at the hearing and failure to submit any evidence in the form of exhibits and/or expert depositions, Claimant has failed to prove his entitlement to medical treatment beyond that which was provided by Defendants between his industrial accident and the determination of MMI. Although Claimant was found to be at MMI, this has no

bearing on whether he is entitled to future medical care. MMI is irrelevant to continued medical care. *Rish*, 161 Idaho at 706, 390 P.3d at 432. However, Claimant has failed to establish a causal connection between his industrial accident and injury and any further medical treatment he may wish to receive. It is unclear, what, if any, additional medical care Claimant is seeking, as again, he did not appear at the hearing and has not otherwise made an argument for specific medical care.

- 36. **Failure to Submit to Medical Examination**. One of the issues for hearing was whether any benefits Claimant may be entitled to, or a portion thereof, should be barred based upon Idaho Code § 72-433(1). That code provision reads as follows:
  - 72-433. SUBMISSION OFINJURED EMPLOYEE TO MEDICAL EXAMINATION OR PHYSICAL REHABILITATION. (1) After an injury or contraction of an occupational disease and during the period of disability the employee, if requested by the employer or ordered by the commission, shall submit himself for examination at reasonable times and places to a duly qualified physician or surgeon. The employee shall be reimbursed for his expenses of necessary travel and subsistence in submitting himself for any such examination and for loss of wages, if any. For purposes of this section, the reimbursement for loss of wages shall be at the employee's then current rate of pay if the employee is then working; otherwise, such reimbursement shall be at the total temporary disability rate. Reimbursement for travel expenses, if the employee utilizes a private vehicle, shall be at the mileage rate allowed by the state board of examiners for state employees; provided, however, that the employee shall not be reimbursed for the first fifteen (15) miles of any round trip, nor for traveling any round-trip distance of fifteen (15) miles or less. Such distance shall be calculated by the shortest practical route of travel.
- 37. There is no evidence in the record that Claimant failed to comply with Idaho Code § 72-433(1). Rather, the evidence shows that Claimant attended examinations scheduled with both Dr. Krafft and Dr. Cox.
- 38. Injurious Practices. Idaho Code Idaho Code § 72-435 provides as follows: "INJURIOUS PRACTICES SUSPENSION OR REDUCTION OF COMPENSATION. If an

injured employee persists in unsanitary or unreasonable practices which tend to imperil or retard his recovery the commission may order the compensation of such employee to be suspended or reduced."

39. There is no evidence in the record that Claimant engaged in any injurious practices prohibited by Idaho Code § 72-435. The medical records in the record do not establish that Claimant engaged in such practices.

## **CONCLUSIONS OF LAW**

- 1. A causal connection exists between the industrial accident and injury and the medical treatment that Claimant received up until being declared at MMI. Nevertheless, Claimant has failed to establish causation for any further medical care he may wish to receive.
  - 2. Claimant has failed to prove his entitlement to any additional medical benefits.
- 3. There is insufficient evidence to show that Claimant failed to attend any medical examinations as required by Idaho Code § 72-433(1).
- 4. There is insufficient evidence to show that Claimant engaged in any injurious practices as prohibited by Idaho Code § 72-435.

### RECOMMENDATION

Based upon the foregoing Findings of Fact and Conclusions of Law, the Referee recommends that the Commission adopt such findings and conclusions as its own and issue an appropriate final order.

DATED this 12th day of July, 2021.

INDUSTRIAL COMMISSION

ohn C. Hummel, Referee



# CERTIFICATE OF SERVICE

I hereby certify that on the <u>12</u> day of <u>500</u>, 2021, a true and correct copy of the foregoing FINDINGS OF FACT, CONCLUSIONS OF LAW, AND RECOMMENDATION was served by regular United States Mail upon each of the following:

ABDI AHMED ABDI

MARK C PETERSON PO BOX 1617 BOISE ID 83701-1617 mpeterson@hawleytroxell.com

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# BEFORE THE INDUSTRIAL COMMISSION OF THE STATE OF IDAHO

ABDI AHMED ABDI.

Claimant,

v.

PEOPLE READY INC.,

Employer,

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NEW HAMPSHIRE INSURANCE COMPANY, Surety, Defendants. IC 2017-008322

ORDER

FILED

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INDUSTRIAL COMMISSION

Pursuant to Idaho Code § 72-717, Referee John Hummel submitted the record in the above-entitled matter, together with his recommended findings of fact and conclusions of law, to the members of the Idaho Industrial Commission for their review. Each of the undersigned Commissioners has reviewed the record and the recommendations of the Referee. The Commission concurs with these recommendations. Therefore, the Commission approves, confirms, and adopts the Referee's proposed findings of fact and conclusions of law as its own.

Based upon the foregoing reasons, IT IS HEREBY ORDERED that:

- A casual connection exists between the industrial accident and injury and the medical treatment that Claimant received up until being declared at MMI. Nevertheless, Claimant has failed to establish causation for further medical care he may wish to receive.
- 2. Claimant has failed to prove his entitlement to any additional medical benefits.
- 3. There is insufficient evidence to show that Claimant failed to attend any medical examinations as required by Idaho Code § 72-433(1).

- There is insufficient evidence to show that Claimant engaged in any injurious practices as prohibited by Idaho Code § 72-435.
- 5. Pursuant to Idaho Code § 72-718, this decision is final and conclusive as to all matters adjudicated.

DATED this 9th day of July, 2021.



INDUSTRIAL COMMISSION

Aaron White, Chairman

Thomas E. Linkbaugh, Commissioner

Thomas P. Baskin, Commissioner

ATTEST:

Kamerron Slay
Commission Secretary

# CERTIFICATE OF SERVICE

I hereby certify that on the 12th day of July, 2021, a true and correct copy of the foregoing ORDER was served by regular United States mail upon each of the following:

m. non

ABDI AHMED ABDI

MARK C PETERSON PO BOX 1617 BOISE ID 83701-1617 mpeterson@hawleytroxell.com

SC