

**WORKERS' COMPENSATION APPEALS BOARD
STATE OF CALIFORNIA**

HOUTAN PEZESHKAN, *Applicant*

vs.

**CITY OF FOSTER CITY, Permissibly Self-Insured,
administered by THE CITIES GROUP, *Defendants***

**Adjudication Number: ADJ18355035
San Francisco District Office**

**OPINION AND ORDER
GRANTING PETITION FOR
RECONSIDERATION
AND DECISION AFTER
RECONSIDERATION**

Defendant City of Foster City seeks reconsideration of the “Findings of Fact” (Findings) issued on June 11, 2025. The workers’ compensation law judge (WCJ) found in pertinent part that applicant sustained a cumulative trauma injury to his left index finger, arising out of and in the course of his employment while working for defendant through August 14, 2023. Issues pertaining to the period of injurious exposure and date of injury were deferred.

Defendant contends that the WCJ erred in finding that applicant sustained cumulative injury to the left index finger where the agreed medical evaluator (AME) concluded that the current symptoms were the expected progression of an original specific injury and not a separate cumulative injury.

WCJ filed a Report and Recommendation (Report) recommending denial of defendant’s Petition. We did not receive an answer from applicant.

We have considered the allegations of the Petition for Reconsideration and the contents of the Report. Based on our review of the record, we will grant reconsideration, rescind the Findings, and return the matter for further proceedings consistent with this decision. When the WCJ issues a new decision, any aggrieved person may timely seek reconsideration.

FACTS

Applicant filed an application for adjudication on October 16, 2023 alleging injury to the left hand and left index finger as the result of a cumulative injury while employed as a police officer for defendant up to August 14, 2023.¹ Applicant also has alleged a specific injury of May 17, 2017 to the left hand while working as a police officer apparently for defendant.²

At trial on March 25, 2025, applicant did not testify but did make an offer of proof as follows:

That he had an original injury to his left hand on May 17, 2017. That he had surgery on May 23, 2017, performed by Dr. Schwartz. Surgery was an open reduction internal fixation using a plate for the second metacarpal of the left hand. Successful surgery and Officer Pezeshkan returned to work in 2017. He successfully maintained his full duties as a police officer.

He began to have increasing symptoms in 2022. He returned to Dr. Schwartz, who took him off work approximately August 14, 2023, who recommended surgery after conservative therapy.

Applicant's job duties as a police officer include having to subdue suspects, having to maintain control of suspects while cuffing, defensive tactics, baton training and use of the baton, firing weapons, and that includes practice to qualify. All of these aspects of the job require forceful gripping of the left hand and repeated use of the left hand. The applicant is right hand dominant.

Officer Pezeshkan is having the plate removed from his hand and has a surgery date of April 3, 2025.

(Minutes Of Hearing and Offer of Proof (MOH/OOP), 03/25/2025, 4:5-27)

In addition to the offer of proof, medical records from AME Dr. Leonard Gordon as well as two reports from Dr. J. Theodore Schwartz³ were admitted into the record. We incorporate WCJ's summary of Dr. Gordon's records as follows:

The applicant was evaluated by Agreed Medical Evaluator (AME) Leonard Gordon, M.D. on March 25, 2024. (Defendant's Exhibit A, p. 1.) Dr. Gordon noted that while the applicant was right-hand dominant, he was "largely ambidextrous." (Id. at p. 2.) At the time of the examination the applicant was not working, having

¹ Applicant has six open claims. Three claims, ADJ18355498, ADJ18052395, and this claim, involve injury to the left hand and fingers. Only this claim was set for trial on March 25, 2025.

² Though the employer for the specific injury is not detailed in the stipulations for the current record, we take judicial notice of the employer as listed in the application for the specific injury, ADJ18052395.

³ There is no reference in the record as to Dr. Schwartz's role in this claim or any other.

last worked on September 16, 2024. (*Ibid.*) He had been working for the police department of the City of Foster City since about August of 2016. (*Ibid.*) The applicant disclosed to Dr. Gordon that he had a left hand injury as a child and then a left hand industrial injury from a fall on May 17, 2017. (*Ibid.*) After open reduction surgery on his left hand on May 23, 2017, the applicant returned to full duty on September 14, 2017 despite some pain and decreased range of motion in the left index finger. (*Id.* at p. 3.) The pain became more persistent in 2022 and then became worse and more constant in July of 2023. (*Ibid.*) The applicant was taken off work by treating physician Dr. Schwartz on September 16, 2023. (*Ibid.*)

The applicant had tingling in the tip of the left index finger and a loss of strength in the left hand. (Defendant's Exhibit A, p. 4.) The applicant complained of difficulty holding his gun and in apprehending people. (*Ibid.*) There was no muscle atrophy observed on examination, but there was some limitation in range of motion for the left index finger. (*Id.* at pp. 4-5.) There was reduced grip strength in the left hand. (*Id.* at p. 14.)

Dr. Gordon reviewed medical records from 2017 through February 5, 2024. (Defendant's Exhibit A, p. 6.) Among the records was one from Dr. Schwartz dated December 6, 2017, described as a final disability report. (*Id.* at p. 9.) Dr. Gordon's summary does not indicate if there was any disability but notes that Dr. Schwartz indicated the applicant could return to his usual work and there should be a provision for future medical care. (*Ibid.*) The next treatment report that is summarized is from February 21, 2023, which includes a diagnosis of a left-hand injury.² (*Ibid.*) Dr. Gordon then summarizes an August 18, 2023 report which includes that, "The patient was being bothered by pain in the left hand and near the area of the retained plate in the index finger. He noted that his left hand felt stiff. He had difficulty with some activities such as typing; even holding dishes was sometimes bothersome for him." (*Ibid.*)

After his review of the medical record and examination of the applicant, Dr. Gordon concluded that the left hand problems the applicant was experiencing were the result of the May 17, 2017 injury. (Defendant's Exhibit A, p. 11.) The applicant had extrinsic tightness of the extensor tendon as a result of the plate which was a result of the 2017 injury. (*Ibid.*) This tightness limits range of motion in the left index finger and causes pain. (*Ibid.*)

Dr. Gordon recommended removal of the plate and opined that such removal should provide significant improvement in the applicant's complaints. (Defendant's Exhibit A, p. 12.) At the time of the evaluation, the applicant was not able to do his work as a police officer because of his inability to forcefully grip, and he was given work restrictions. (*Ibid.*)

In a supplemental report, Dr. Gordon confirmed his earlier opinion. (Defendant's Exhibit B, p. 3.) He clarified that the plate on the applicant's finger is causing irritation resulting in inflammation and that, "... adherence of the tendons

which is an ongoing problem resulting from the 2017 injury, and flare-ups of this nature with ongoing use can be expected over time.” (*Ibid.*) He went on to state that:

“I remain of the opinion that this is an exacerbation of the original problem and not a new injury or aggravation and that treatment is needed for this in order to prevent further episodes of such symptoms. Use of the hand over time would cause such periods of symptoms and exacerbation with forceful gripping and manipulating and within reasonable medical probability results from the plate and the adherence of the tendons.

I recognize it has been a considerable period of time, and the patient has had symptoms on and off in the intervening period. He likely has had a waxing and waning of symptoms increasing at this time with indication for further surgery because of these ongoing episodes.” (Defendant’s Exhibit B, p. 3.)

The parties took Dr. Gordon’s deposition on October 7, 2024. (Defendant’s Exhibit C.) After discussing the mechanics of the use of the left index finger, Dr. Gordon explained that the only reason for the applicant’s pain was the interaction between the plate, the tendon and the applicant’s use of the finger. (*Id.* at p. 13, lines 3-12.) He also confirmed that it was his opinion that this discomfort was a result of implanting the plate in the surgery for the 2017 injury. (*Id.* at p. 15, lines 9-22.) Therefore, he did not find a separate cumulative trauma injury but instead found the applicant’s complaints to be “part and parcel” of the 2017 injury. (*Id.* at p. 16, lines 11-16.) However, Dr. Gordon also stated that the ongoing need for forceful gripping due to the applicant’s profession **contributed to the current need for surgery** to remove the plate and relieve the pain. (*Id.* at p. 15, line 23 - p. 16, line 4, emphasis added.)

Dr. Gordon stated that the applicant “probably had some ongoing symptoms through the time [from surgery in 2017 through 2021] of a minor complaint” and his pain progressed from the time of the original injury. (Defendant’s Exhibit C, p. 7, lines 4-7; p. 9, line 25 - p. 10, line 6; p. 17, lines 14-18; p. 18, lines 18-21.) However, Dr. Gordon also conceded that he was not aware of evidence of ongoing hand problems for the applicant between 2017 and 2020 or 2021. (*Id.* at p. 18, line 25 - p. 19, line 21.)

(Opinion, 07/18/2025, p. 2-5.)

DISCUSSION

I

Former Labor Code section 5909⁴ provided that a petition for reconsideration was deemed denied unless the Appeals Board acted on the petition within 60 days from the date of filing. (Lab. Code, § 5909.) Effective July 2, 2024, section 5909 was amended to state in relevant part that:

- (2) A petition for reconsideration is deemed to have been denied by the appeals board unless it is acted upon within 60 days from the date a trial judge transmits a case to the appeals board.

- (b)
 - (1) When a trial judge transmits a case to the appeals board, the trial judge shall provide notice to the parties of the case and the appeals board.

 - (2) For purposes of paragraph (1), service of the accompanying report, pursuant to subdivision (b) of Section 5900, shall constitute providing notice.

Under section 5909(a), the Appeals Board must act on a petition for reconsideration within 60 days of transmission of the case to the Appeals Board. Transmission is reflected in Events in the Electronic Adjudication Management System (EAMS). Specifically, in Case Events, under Event Description is the phrase “Sent to Recon” and under Additional Information is the phrase “The case is sent to the Recon board.”

Here, according to Events, the case was transmitted to the Appeals Board on July 18, 2025 and 60 days from the date of transmission is September 16, 2025. This decision is issued by or on September 16, 2025 so that we have timely acted on the petition as required by section 5909(a).

Here, according to the proof of service for the Report and Recommendation by the workers’ compensation administrative law judge, the Report was served on July 18, 2025 and the case was transmitted to the Appeals Board on July 18, 2025. Service of the Report and transmission of the case to the Appeals Board occurred on the same day. Thus, we conclude that the parties were provided with the notice of transmission required by section 5909(b)(1) because service of the Report in compliance with section 5909(b)(2) provided them with actual notice as to the commencement of the 60-day period on July 18, 2025.

⁴ All further statutory references will be to the Labor Code unless otherwise indicated.

II

It is well established that decisions and awards by the Appeals Board must be supported by substantial evidence. (Lab. Code, §§ 5903, 5952(d); *Lamb v. Workmen's Comp. Appeals Bd.* (1974) 11 Cal.3d 274 [39 Cal.Comp.Cases 310]; *Garza v. Workmen's Comp. Appeals Bd.* (1970) 3 Cal.3d 312 [35 Cal.Comp.Cases 500]; *LeVesque v. Workmen's Comp. Appeals Bd.* (1970) 1 Cal.3d 627 [35 Cal.Comp.Cases 16].) “The term ‘substantial evidence’ means evidence which, if true, has probative force on the issues. It is more than a mere scintilla, and means such relevant evidence as a reasonable mind might accept as adequate to support a conclusion...It must be reasonable in nature, credible, and of solid value.” (*Braewood Convalescent Hospital v. Workers' Comp. Appeals Bd. (Bolton)* (1983) 34 Cal.3d 159, 164 [48 Cal.Comp.Cases 566], emphasis removed and citations omitted.)

Decisions of the Appeals Board “must be based on admitted evidence in the record.” (*Hamilton v. Lockheed Corporation (Hamilton)* (2001) 66 Cal.Comp.Cases 473, 476 (Appeals Board en banc).) An adequate and complete record is necessary to understand the basis for the WCJ's decision. (Lab. Code, § 5313; see also Cal. Code Regs., tit. 8, § 10787.)

An agreed medical examiner is presumed to have been chosen by the parties because of his expertise and neutrality, and therefore his opinion should ordinarily be followed unless there is good reason to find that opinion unpersuasive. (*Power v. Workers' Comp. Appeals Bd.* (1986) 179 Cal.App.3d 775 [51 Cal.Comp.Cases 114].) However, The Appeals Board has the discretionary authority to develop the record when the record does not contain substantial evidence or when appropriate to provide due process or fully adjudicate the issues. (Lab. Code, §§ 5701, 5906; *Nunes v. State of California, Dept. of Motor Vehicles* (2023) 88 Cal.Comp.Cases 741, 752 (Appeals Board en banc); *McClune v. Workers' Comp. Appeals Bd.* (1998) 62 Cal.App.4th 1117, 1121-1122 [63 Cal.Comp.Cases 261]; *Tyler v. Workers' Comp. Appeals Bd.* (1997) 56 Cal.App.4th 389, 392-394 [62 Cal.Comp.Cases 924].)

Section 3208.2 states, “When disability, need for medical treatment, or death results from the combined effects of two or more injuries, either specific, cumulative, or both, all questions of fact and law shall be separately determined with respect to each such injury, including, but not limited to, the apportionment between such injuries of liability for disability benefits, the cost of medical treatment, and any death benefit.”

At the outset, we note that applicant has six open cases with the same employer, three of which involve injury to the same body part. Most importantly, there is no information in the record

regarding the initial specific injury of May 17, 2017 (ADJ18052395), which is central to adjudicating this case. We note that there is no stipulation to injury, impairment, or temporary disability upon which to begin consideration of whether applicant actually sustained a separate cumulative injury. Perhaps less central, but nonetheless relevant, is the allegation in ADJ18355498 of a specific injury to the same body parts on August 10, 2023. Given the complexity of this case and the overlapping issues in applicant's other cases, and because the question of whether there is a separate injury cannot be determined without understanding applicant's impairment resulting from the first injury, review of the medical evidence concerning injury to applicant's left hand and fingers from applicant's specific injury of May 17, 2017 is necessary.

III

The employee bears the burden of proving injury AOE/COE by a preponderance of the evidence. (*South Coast Framing v. Workers' Comp. Appeals Bd. (Clark)* (2015) 61 Cal.4th 291, 297-298, 302 [80 Cal.Comp.Cases 489]; Lab. Code, §§ 3600(a) & 3202.5.) An injury must be proximately caused by the employment in order to be compensable. (Lab. Code, § 3600(a)(3); see also *Clark, supra*, 61 Cal.4th at pp. 297-298.) Proximate cause in workers' compensation requires the employment be a contributing cause of the injury. (*Clark, supra*, 61 Cal.4th at pp. 297-298 [outlining this standard and analyzing the difference between causation in tort law and causation in workers' compensation].)

Section 3208.1 defines a "cumulative" injury as one "occurring as repetitive mentally or physically traumatic activities extending over a period of time, the combined effect of which causes any disability or need for medical treatment.

In any given situation, there can be more than one injury, either specific or cumulative or a combination of both, arising from the same event or from separate events. (*Chevron U.S.A., Inc. v. Workers' Comp. Appeals Bd.* (1990) 219 Cal.App.3d 1265, 1271 [55 Cal.Comp.Cases 107].) Cumulative injury occurs from repetitive mental or physical activities at work over a period of time, which causes any disability or need for medical treatment. (§ 3208.1; *Western Growers Ins. Co., v. Workers' Comp. Appeals Bd. (Austin)* (1993) 16 Cal.App.4th 227, 234 [58 Cal.Comp.Cases 323]; *J.T. Thorp, Inc., v. Workers' Comp. Appeals Bd. (Butler)* (1984) 153 Cal.App.3d 327, 332-333 [49 Cal.Comp.Cases 224].) Findings regarding cumulative injury and the date of injury must be based on substantial evidence such as medical opinion and testimony considering the entire record. (*Garza v. Workmen's Comp. App. Bd. (Garza)* (1970) 3 Cal.3d 312, 317-319 [33

Cal.Comp.Cases 500]; *Austin, supra*, 16 Cal.App.4th at pp. 233- 241; *City of Fresno v. Workers' Comp. Appeals Bd. (Johnson)* (1985) 163 Cal.App.3d 467, 470-473 [50 Cal.Comp.Cases 53].)

“The number and nature of the injuries suffered are questions of fact for the WCJ or the WCAB.” (*Austin, supra*, 16 Cal.App.4th at p. 234.) “[I]f an employee becomes disabled, is off work and then returns to work only to again become disabled, there is a question of fact as to whether the new disability is due to the old injury or whether it is due to a new and separate injury.” (*Id.* at p. 234.) However, “[t]he general rule is that where an employee suffers contemporaneous injury to different body parts over an extended period of employment, the employee has suffered one cumulative injury.” (*Gravlin v. City of Vista* (Sept. 22, 2017, ADJ513626) 2017 Cal.Wrk.Comp. P.D. LEXIS 413, *16.)⁵ “If, however, the employee's occupational activities after returning to work from a period of industrially-caused disability are *not* injurious—i.e., if any new period of temporary disability, new or increased level of permanent disability, or new or increased need for medical treatment result solely from an *exacerbation* of the *original* injury—then there is only a *single* cumulative injury.” (*Austin, supra*, at p. 24.)

Here, we agree with WCJ’s legal analysis as to the methods of determining whether there are multiple injuries. However, once the AME report was deemed not substantial, the other admitted medical evidence does not support the finding of a separate cumulative injury. The WCJ’s analysis in this claim is similar to *Aetna Casualty & Surety Co. v. Workmen’s Comp. Appeals Bd. (Coltharp)* (1973) 35 Cal.App.3d 329, 341 [38 Cal.Comp.Cases 720]), wherein the court found that there were separate cumulative trauma injuries separated by a return to work following a back surgery. In that case, a physician stated that applicant’s post return cumulative work activities were the “immediate precipitating factor that necessitated” another surgery. Ultimately, the distinction between whether there is one injury and/or multiple injuries is reconciled by reviewing *Austin* and *Coltharp* together:

(1) If, after returning to work from a period of industrially-caused disability and a need for medical treatment, the employee’s repetitive work activities again result in injurious trauma - i.e., if the employee’s occupational activities after returning to work from a period of temporary

⁵ Unlike en banc decisions, panel decisions are not binding precedent on other Appeals Board panels and WCJs. (See *Gee v. Workers’ Comp. Appeals Bd.* (2002) 96 Cal.App.4th 1418, 1425 fn. 6 [67 Cal.Comp.Cases 236].) However, panel decisions are citable authority and we consider these decisions to the extent that we find their reasoning persuasive, particularly on issues of contemporaneous administrative construction of statutory language. (See *Guitron v. Santa Fe Extruders* (2011) 76 Cal.Comp.Cases 228, fn. 7 (Appeals Board en banc); *Griffith v. Workers’ Comp. Appeals Bd.* (1989) 209 Cal.App.3d 1260, 1264, fn. 2, [54 Cal.Comp.Cases 145].)

disability cause or contribute to a new period of temporary disability, to a new or an increased level of permanent disability, or to a new or increased need for medical treatment - then there are two separate and distinct cumulative injuries that cannot be merged into a single injury (Lab. Code, §§ 3208.1, 3208.2, 5303; *Coltharp, supra*, 35 Cal.App.3d at p. 342)

(2) If, however, the employee's occupational activities after returning to work from a period of industrially-caused disability are not injurious - i.e., if any new period of temporary disability, new or increased level of permanent disability, or new or increased need for medical treatment result solely from an exacerbation of the original injury - then there is only a single cumulative injury. (Lab. Code, §§ 3208.1, 3208.2; *Austin, supra*, 16 Cal.App.4th at p. 235) This can be demonstrated by continued medical treatment for treatment of the initial injury.

Here, there is no medical opinion finding a cumulative trauma injury. It does appear that Dr. Gordon may have a misunderstanding of exacerbation and aggravation. A medical opinion is not substantial medical evidence if it is based on facts no longer germane, on inadequate medical histories or examinations, on incorrect legal theories, or on surmise, speculation, conjecture, or guess. (*Hegglin v. Workmen's Comp. Appeals Bd.* (1971) 4 Cal.3d 162, 169 [36 Cal.Comp.Cases 93, 97]; *Place v. Workmen's Comp. Appeals Bd.* (1970) 3 Cal.3d 372, 378-379 [35 Cal.Comp.Cases 525]; *Zemke v. Workmen's Comp. Appeals Bd.* (1968) 68 Cal.2d 794, 798 [33 Cal.Comp.Cases 358].) The function of the court on review is to determine whether the evidence, if believed, is substantial and supports the findings. (*Le Vesque v. Workers' Comp. Appeals Bd.* (1970) 1 Cal. 3d 627 [35 Cal.Comp.Cases 16]; *Foster v. Ind. Acci. Com.* (1955) 136 Cal. App. 2d 812, 816.) In particular, Dr. Gordon does note the contribution of the ongoing use of the hand for nearly five years as a police officer and general use. (Defendant's Exhibit B at 15: 23 – 16:4.) As noted by the WCJ, his testimony and reporting is contradictory at moments, but Dr. Gordon still concludes that the current condition is the natural progression of the treatment for the original injury. As a result, the WCJ found the reporting not substantial. We too agree that the report is not substantial. This results in a lack of substantial medical evidence of causation for the current symptoms, which must be addressed before any findings can be made.

The Appeals Board has the discretionary authority to develop the record when the medical record is not substantial evidence or when appropriate to provide due process or fully adjudicate the issues. (*McClune v. Workers' Comp. Appeals Bd.* (1998) 62 Cal.App.4th 1117, 1121-1122 [72 Cal. Rptr. 2d 898, 63 Cal.Comp.Cases 261]; see also *Tyler v. Workers' Comp. Appeals Bd.* (1997) 56

Cal.App.4th 389, 394 [65 Cal. Rptr. 2d 431, 62 Cal.Comp.Cases 924]; §§ 5701, 5906.) The Appeals Board also has a constitutional mandate to "ensure substantial justice in all cases" and may not leave matters undeveloped where it is clear that additional discovery is needed. (*Kuykendall v. Workers' Comp. Appeals Bd.* (2000) 79 Cal.App.4th 396, 403-404 [94 Cal. Rptr. 2d 130, 65 Cal.Comp.Cases 264].) The "Board may act to develop the record with new evidence if, for example, it concludes that neither side has presented substantial evidence on which a decision could be based, and even that this principle may be appropriately applied in favor of the employee." (*San Bernardino Cmty. Hosp. v. Workers' Comp. Appeals Bd. (McKernan)* (1999) 74 Cal. App. 4th 928, 937-938 [88 Cal. Rptr. 2d 516, 64 Cal.Comp.Cases 986].) The preferred procedure to develop a deficient record is to allow supplementation of the medical record by the physicians who have already reported in the case. (*McDuffie v. Los Angeles County Metropolitan Transit Authority* (2002) 67 Cal.Comp.Cases 138 (Appeals Board en banc).)

Moreover, we observe that it is somewhat problematic to have a finding of cumulative injury without determining injurious exposure, period of injurious exposure, or date of injury. Integral to the finding of cumulative trauma injury is determining whether there is disability or the need for medical treatment. Specifically, in this case, there needs to be a discussion of whether there is *new* impairment or an *increased* need for medical treatment. As outlined above, we do not have evidence to support a baseline essential to determining new impairment or an increased need for medical treatment. In order to properly conclude whether there is a cumulative injury, the medical evidence from the prior specific injury must also be considered by the medical evaluators and admitted into evidence.

Upon return, it may be prudent for the WCJ to consider consolidating some or all of applicant's cases, given the common issues of fact and the risk of inconsistent results. (See Cal. Code Regs., tit. 8, § 10396.)

Accordingly, we grant defendant's Petition for Reconsideration, rescind the Findings, and return the matter to the WCJ for further proceedings consistent with this decision. When the WCJ issues a new decision, any aggrieved person may timely seek reconsideration.

For the foregoing reasons,

IT IS ORDERED that defendant's Petition for Reconsideration of the Findings of Fact issued by the WCJ on June 11, 2025 is **GRANTED**.

IT IS FURTHER ORDERED as the Decision After Reconsideration of the Workers' Compensation Appeals Board that the Findings of Fact issued by the WCJ on June 11, 2025 is **RESCINDED** and the matter is **RETURNED** to the WCJ for further proceedings consistent with this opinion.

WORKERS' COMPENSATION APPEALS BOARD

/s/ JOSEPH V. CAPURRO, COMMISSIONER

I CONCUR,

/s/ KATHERINE WILLIAMS DODD, COMMISSIONER

/s/ CRAIG SNELLINGS, COMMISSIONER



DATED AND FILED AT SAN FRANCISCO, CALIFORNIA

SEPTEMBER 16, 2025

SERVICE MADE ON THE ABOVE DATE ON THE PERSONS LISTED BELOW AT THEIR ADDRESSES SHOWN ON THE CURRENT OFFICIAL ADDRESS RECORD.

**HOUTAN PEZESHKAN
JONES CLIFFORD
LITTLER MENDELSON**

TF/md

I certify that I affixed the official seal of
the Workers' Compensation Appeals
Board to this original decision on this date.
CS