

WORKERS' COMPENSATION APPEALS BOARD
STATE OF CALIFORNIA

JOANNA FONTENETTE, *Applicant*

vs.

**LOS ANGELES UNIFIED SCHOOL DISTRICT,
permissibly self-insured, administered by Sedgwick CMS, *Defendants***

**Adjudication Number: ADJ11286876; ADJ11286877
Van Nuys District Office**

**OPINION AND DECISION
AFTER RECONSIDERATION**

We previously granted reconsideration¹ in this matter to provide an opportunity to further study the legal and factual issues raised by the Petition for Reconsideration. Having completed our review, we now issue our Decision After Reconsideration.

Defendant seeks reconsideration of the October 1, 2021 Findings and Award, wherein the workers' compensation administrative law judge (WCJ) found that applicant, while employed as a Deputy Chief on December 5, 2017, sustained industrial injury to her neck (ADJ11286876). The WCJ found that applicant was temporarily totally disabled beginning on July 18, 2018 arising out of a January 3, 2018 lumbar spine injury (ADJ11286877) and received Labor Code section 4850² benefits for one year, and that she was temporarily totally disabled beginning on March 18, 2019 and continuing when she had cervical spine surgery and is entitled to a second period of section 4850 benefits beginning on March 18, 2019.

Defendant contends that the periods of temporary disability resulting from applicant's lumbar spine and cervical spine injuries ran concurrently, and that applicant's concomitant entitlement to benefits pursuant to section 4850 began on July 18, 2018, and ended on July 18, 2019.

¹ Commissioner Lowe, who was previously a member of this panel, no longer serves on the Workers' Compensation Appeals Board. Another panelist has been appointed in her place.

² Unless otherwise stated, all further statutory references are to the Labor Code.

We have received an Answer from applicant. The WCJ prepared a Report and Recommendation on Petition for Reconsideration (Report), recommending that the Petition be denied.

We have considered the Petition for Reconsideration, the Answer, and the contents of the Report, and we have reviewed the record in this matter. For the reasons discussed below, we will rescind the F&A and substitute new Findings of Fact and Award that applicant's injuries to both her cervical and lumbar spine resulted in a period of concurrent entitlement to section 4850 benefits from July 18, 2018 to July 18, 2019, and thereafter temporary total disability through the permanent and stationary date or an additional 52 weeks, whichever is earlier.

FACTS

Applicant has two pending cases. In Case No. ADJ11286876, applicant sustained injury to her neck, right upper extremity, and right hand while employed by defendant as a deputy chief on December 5, 2017. In Case No. ADJ11286877, applicant also sustained injury to her neck, upper extremity, hand, back, and bilateral feet while similarly employed on January 3, 2018.

Applicant has selected Jae Chon, M.D., as her primary treating physician (PTP) in orthopedic medicine, and the parties have selected Mitchell Silverman, M.D., as the Agreed Medical Evaluator (AME) in orthopedic medicine.

On June 1, 2018, applicant presented for initial evaluation with Dr. Chon and described a chief complaint of neck pain arising out of an injury occurring on December 5, 2017, wherein applicant was using the restroom when she lost feeling in her right arm and experienced sharp pain and numbness. (Ex. 15, Report of Jae Chon, M.D., dated June 1, 2018.) Dr. Chon discussed treatment options with applicant, including both operative and non-operative measures, and applicant indicated a desire to proceed with cervical spine surgery. Dr. Chon placed applicant on light duty. (*Id.* at p. 4.)

On June 5, 2018, Dr. Chon reevaluated applicant with respect to complaints of lower back pain, including sciatic symptoms radiating down the right leg and knee. (Ex. 14, Report of Jae Chon, M.D., dated June 5, 2018, at p. 1.) The physician discussed treatment options with applicant, including operative and non-operative measures and limited applicant to light duty. (*Id.* at p. at p. 3.)

On July 17, 2018, applicant was reevaluated in follow-up for her complaints of low back pain, noting no change since her prior visit. (Ex. 13, Report of Jae Chon, M.D., dated July 17, 2018, at p. 1.) Dr. Chon diagnosed cervical myelopathy and right sided sciatica, with the PTP noting the urgent need for cervical spine surgery. (*Id.* at p. 2.)

On July 24, 2018, applicant returned for a follow-up evaluation with a chief complaint of low back pain. The PTP's report noted that physical therapy had been approved but that actual treatment had not yet begun. (Ex. 12, Report of Jae Chon, M.D., dated July 24, 2018, at p. 1.) Applicant's diagnoses remained unchanged, and the treatment plan included light duty and provision of physical therapy. (*Id.* at p. 2.)

On August 28, 2018, applicant returned for a follow-up evaluation with a chief complaint of neck pain, noted to be worsening. Applicant reported that her request for neck fusion surgery had been denied, and the PTP recommended activity modification and gentle mobilization. Applicant's diagnoses continued to reflect cervical myelopathy and now included spondylolistheses in the cervical spine region. Applicant was limited to light duty. (Ex. 11, Report of Jae Chon, M.D., dated August 28, 2018, at p. 2.)

On October 23, 2018, applicant returned for a follow-up evaluation with Dr. Chon, noting chief complaints of both neck and lower back pain. Applicant's diagnoses remained unchanged from August 28, 2018, and applicant was noted to be awaiting an AME evaluation. (Ex. 10, Report of Jae Chon, M.D., dated October 23, 2018, at p. 2.) Applicant was continued on light duty.

On November 6, 2018, AME Dr. Silverman evaluated applicant, and reported current complaints of pain and numbness to the neck, back, bilateral upper extremities, bilateral hands and feet. (Ex. 1, Report of Mitchell Silverman, M.D., dated November 6, 2018, at p. 20.) Dr. Silverman diagnosed a cervical spine sprain with bilateral radicular symptoms and positive MRI findings including canal and foraminal narrowing. (*Id.* at p. 29.) The AME also diagnosed a lumbar spine strain, lit up on January 3, 2018, and corresponding positive MRI findings. Dr. Silverman identified industrial injury to both the neck and low back, with related radicular complaints. (*Id.* at p. 33.)

On December 11, 2018, applicant returned for a follow-up evaluation with Dr. Chon, again noting chief complaints to the low back and neck and noted that her symptoms were progressively worsening. Dr. Chon discussed various treatment options with applicant and continued to diagnose cervical myelopathy. Applicant's work restrictions included a limitation to light duty for her low

back pain, a lifting limit to 10 pounds, no field work, no duty work, no duty belt, and no altercations. (Ex. 9, Report of Jae Chon, M.D., dated December 11, 2018, at p. 2.)

On December 28, 2018, AME Dr. Silverman issued a supplemental report following a record review, wherein he agreed that applicant required further treatment for her cervical spine condition to include possible neck surgery. (Ex. 2, Report of Mitchell Silverman, M.D., dated December 28, 2018, at p. 8.) With respect to applicant's lumbar spine complaints, applicant was noted to be "not acutely problematic," but also in need of physical therapy and medications, with options for more aggressive treatment including surgery or epidurals left open in the future. (*Ibid.*)

On January 29, 2019, applicant returned to Dr. Chon for reevaluation and reported chief complaints of neck pain. Dr. Chon noted that surgery in the form of possible fusion from C5 through C7 had been authorized, and that applicant's work restrictions related to her low back pain remained unchanged from December 11, 2018. (Ex. 8, Report of Jae Chon, M.D., dated January 29, 2019, at p. 3.)

On March 18, 2019, applicant underwent cervical spine fusion at the C5-C6 levels. (Ex. 6, Report of Jae Chon, M.D., dated March 18, 2019, at p. 1.)

On April 9, 2019, applicant returned for reevaluation with Dr. Chon, who noted minimal sequelae from her surgery, and a treatment plan to include physical therapy and continued use of a neck brace. Applicant's diagnoses included being status post cervical spine surgery, cervical myelopathy, cervical spondylolistheses, and right-sided sciatica. (Ex. 4, Report of Jae Chon, M.D., dated April 9, 2019, at p. 3.)

On July 2, 2019, PTP Dr. Chon reevaluated applicant with respect to her cervical spine complaints, noting that symptom improvement and a continued diagnosis of being status post cervical spine fusion surgery. Applicant was continued on temporary total disability. (Ex. M, Report of Jae Chon, M.D., dated July 2, 2019, at p. 3.)

On July 9, 2019, Dr. Chon reevaluated applicant and noted that her musculoskeletal symptoms were positive for both back and neck pain. (Ex. L, Report of Jae Chon, M.D., dated July 9, 2019, at p. 2.) Applicant reported significant improvement to the low back following acupuncture and minimal pain. Dr. Chon placed applicant on fully duty relative to the lumbar spine injury. (*Id.* at p. 3.)

On September 10, 2019, Dr. Chon reevaluated applicant and noted chief complaints of neck pain, but also applicant reporting that she was managing her symptoms well. (Ex. J, Report

of Jae Chon, M.D., dated September 10, 2019, at p. 2.) Applicant was noted to be permanent and stationary and capable of a return to full duties with respect to the lumbar spine. (*Id.* at p. 3.)

On February 11, 2020, orthopedic AME Dr. Silverman reevaluated applicant, noting the interim cervical spine surgery. (Ex. Y, Report of Mitchell Silverman, M.D., dated February 11, 2020, at p. 1.) Following a clinical reevaluation of applicant and review of interim medical reporting, the AME reiterated his opinion finding industrial causation of a neck injury on December 5, 2017, and a lumbar spine injury arising out of injury through January 3, 2018. (*Id.* at p. 18.) Applicant was referred for a CT scan in order to complete the evaluation, but was also noted to have reached maximum medical improvement.

On March 26, 2020, Dr. Silverman issued a report following a record review in which he addressed issues of causation and apportionment and affirmed that all periods of temporary partial and temporary total disability were per applicant's treating physicians and appeared to be medically appropriate and necessary. (Ex. X, Report of Mitchell Silverman, M.D., dated March 26, 2020, at p. 9.)

On August 19, 2020, the parties undertook the deposition of Dr. Silverman, who acknowledged the work restrictions provided by Dr. Chon in mid-2018. (Ex. W, Transcript of the Deposition of Mitchell Silverman, M.D., dated August 19, 2020, at p. 7:8.) Dr. Silverman testified to his estimate of cervical spine restrictions that would have been operative simultaneously with the low back restrictions. (*Id.* at p. 11:21; 12:3; 26:15.) The AME also opined that if applicant was unable to perform light duties, she would have been temporarily totally disabled as a result of both the cervical and lumbar spine injuries. (*Id.* at p. 16:8.)

On December 18, 2020, the parties undertook the deposition of PTP Dr. Chon. Therein, the PTP agreed that applicant was a cervical spine surgery candidate from the time of his initial evaluation on June 1, 2018. (Ex. N, Transcript of the Deposition Jae Chon, M.D., dated December 18, 2020, at p. 12:23.) Dr. Chon further confirmed that applicant's complaints in June, 2018 included both cervical and lumbar spine discomfort and limitations, and that the work restrictions provided by Dr. Chon were "probably equally applicable" to both the lumbar and cervical spine injuries, notwithstanding the physician's primary concern at the time with respect to applicant's cervical spine condition. (*Id.* at p. 15:16.) Dr. Chon further opined that with respect to his July, 2018, reporting, applicant's light duty restrictions were necessary as a result of both applicant's cervical and lumbar spine diagnoses. (*Id.* at p. 19:24.) Finally, Dr. Chon confirmed that

applicant was permanent and stationary with respect to the lumbar spine as of September 10, 2019. (*Id.* at p. 23:15.)

On May 12, 2021, the parties proceeded to trial with applicant alleging entitlement to temporary total disability from March 18, 2019 to present and continuing. (Minutes of Hearing, dated May 12, 2021, at p. 2:11.) The parties also placed in issue whether applicant's injuries resulted in periods of concurrent temporary disability, and whether applicant's entitlement to section 4850 benefits ended on July 16, 2019.

On October 1, 2021, the WCJ issued Findings of Fact determining that applicant sustained two separate periods of disability, one to the lumbar spine commencing July 18, 2018, and the second commencing with applicant's cervical spine surgery on March 18, 2019. The WCJ awarded section 4850 benefits commencing on July 18, 2018 corresponding to the lumbar spine injury, and another period of section 4850 benefits commencing March 18, 2019, corresponding to the cervical spine injury. (Findings of Fact Nos. 3 & 4.)

Defendant's Petition observes that “[t]here is no dispute as to Applicant's TTD status for the neck as of the date of her surgery on [March 18, 2019] ... [w]hat is in dispute is whether Applicant was placed off work on [July 17, 2018] with no further offer of modified work for the neck injury, the back injury, or both injuries.” (Petition, at p. 13:3.) Defendant contends that the medical evidence supports concurrently running periods of temporary disability commencing July 18, 2018, for both the cervical and lumbar spine injuries.

Applicant's Answer observes that Dr. Chon's reporting between July, 2018, and January, 2019, imposes work restrictions relative to the low back only, and as such, temporary disability flowed from applicant's lumbar spine restrictions until applicant's cervical spine surgery in March, 2019. (Answer, at p. 2:6; 4:19.)

The WCJ's Report reviews the medical record but identifies no periods of temporary disability regarding the cervical spine prior to the March 18, 2019 cervical spine surgery. (Report, at p. 3.)

DISCUSSION

Applicant sustained a December 5, 2017 injury which includes injury to the cervical spine. Applicant has further sustained a January 3, 2018 injury which includes injury to the low back. The parties have stipulated that applicant was off work effective July 18, 2018 with no further

offer of modified work received thereafter, and that applicant received section 4850 benefits for 52 weeks thereafter. (Minutes of Hearing, dated July 24, 2019, at p. 2:17.) The WCJ has determined that applicant's entitlement to section 4850/TTD benefits began on July 18, 2018, and was solely attributable to applicant low back injury of January 3, 2018. The WCJ further determined that applicant is entitled to a separate period of section 4850/TTD time commencing with her cervical spine surgery on March 18, 2019, attributable solely to applicant' cervical spine surgery of December 5, 2017.

Defendant's Petition contends the medical evidence establishes that the periods of TTD ran concurrently for both injuries commencing July 18, 2018. We agree.

Temporary disability indemnity is a workers' compensation benefit which is paid during the time an injured worker is unable to work because of a work-related injury and is primarily intended to substitute for lost wages. (*Gonzales v. Workers' Comp. Appeals Board* (1998) 68 Cal.App.4th 843 [63 Cal.Comp.Cases 1477]; *J. T. Thorp, Inc. v. Workers' Comp. Appeals Bd. (Butler)* (1984) 153 Cal.App.3d 327, 333 [49 Cal.Comp.Cases 224].) The purpose of temporary disability indemnity is to provide a steady source of income during the time the injured worker is off work. (*Gonzales, supra*, at p. 847.)

Section 4656(c)(2) provides that, “[a]ggregate disability payments for a single injury occurring on or after January 1, 2008, causing temporary disability shall not extend for more than 104 compensable weeks within a period of five years from the date of injury.” (Lab. Code, § 4656(c)(2).)

Section 4850 provides that certain public safety employees may receive their full salary “in lieu of temporary disability payments ... for the period of the disability, but not exceeding one year....” Salary continuation payments provided in section 4850 constitute aggregate disability payments that are subject to the 104-week limit in section 4656(c)(2). (*County of Alameda v. Workers' Comp. Appeals Bd. (Knittel)* (2013) 213 Cal.App.4th 278 [78 Cal.Comp.Cases 81].)

In *Foster v. Workers Comp. Appeals Bd.* (2008) 161 Cal.App.4th 1505 [73 Cal.Comp.Cases 466] (*Foster*), the Court of Appeal considered whether the statutory cap for temporary disability payments subject to section 4656(c)(1) runs concurrently for two injuries:

There is nothing in the language of section 4656(c)(1) suggesting the limitations period for a single injury causing temporary disability should be tolled for any period during which a worker is entitled to temporary disability benefits based on another injury. There is no language in the statute suggesting the limitations

period will not run concurrently where multiple injuries cause an overlap, either partial or complete, during periods of temporary disability.

Nor have we found anything in the context of section 4656(c)(1) that suggests a different interpretation is required where multiple injuries result in temporary disability.

(*Id.* at pp. 1511-1512.)

The Court then detailed the legislative history and intent of statutory caps on temporary disability, concluding that, “[w]here independent injuries result in concurrent periods of temporary disability, the 104[-]week/two[-]year limitation likewise runs concurrently.” (*Id.* at p. 1513.)

Although the *Foster* decision analyzed section 4656(c)(1), the analysis of overlapping temporary disability outlined in *Foster* also applies to applicant’s cases, which are subject to section 4656(c)(2). Pursuant to *Foster*, when temporary disability is concurrently caused by two or more injuries, the statutory cap under section 4656(c)(2) for those injuries runs concurrently. Thus, if applicant’s need for temporary disability arose out of both the specific and cumulative injuries, the 104-week limitation for the injuries runs concurrently.

In *Brum v. DPIX* (October 22, 2007, OAK 0318210, OAK 0318211 [2007 Cal. Wrk. Comp. P.D. LEXIS 199]), we explained:

Where separate injuries result in concurrent periods of temporary disability, the 104-week/two-year limitation likewise runs concurrently. To determine the impact of section 4656, in a case involving multiple injuries, the evidence needs to be examined to determine whether any periods of temporary disability are distinct and independent, staggered, or entirely overlapping. (*Cf. City of Montclair v. Workers’ Comp. Appeals Bd. (Leone)* (2001) 66 Cal.Comp.Cases 899, writ denied; *City of Lompoc v. Workers’ Comp. Appeals Bd. (Coday)* (1984) 49 Cal.Comp.Cases 248, writ denied (entitlement to multiple periods of section 4850 benefits for separate periods of temporary disability due to separate injuries).) If there is total overlap, the applicant will be entitled to only one period of temporary disability indemnity consisting of 104 weeks within two years of the first payment. If separate periods of temporary disability are not completely overlapping, the applicant may be entitled to additional temporary disability indemnity; however, the applicant is not entitled to double recovery for overlapping periods.

Here, the issue is whether applicant's cervical spine injury of December 5, 2017 and lumbar spine injury of January 3, 2018 resulted in separate or overlapping periods of temporary total disability beginning July 18, 2018.

The record reflects ongoing treatment with PTP Dr. Chon beginning June 1, 2018, at which time applicant described a chief complaint of neck pain arising out of an injury occurring on December 5, 2017. (Ex. 15, Report of Jae Chon, M.D., dated June 1, 2018.) Dr. Chon discussed both operative and non-operative treatment modalities and placed applicant on light duty. (*Id.* at p. 4.)

Four days later, on June 5, 2018, Dr. Chon evaluated applicant with respect to complaints of lower back pain and again discussed both operative and non-operative measures to treat the low back, and limited applicant to light duty. (*Id.* at p. at p. 3.)

Eleven days later, on July 17, 2018, Dr. Chon evaluated applicant and diagnosed *both* cervical myelopathy and right sided sciatica, noting the urgent need for cervical spine surgery. (*Id.* at p. 2.)

On July 24, 2018, applicant returned for follow-up, with a chief complaint of low back pain, and again was diagnosed with both cervical myelopathy and right-side sciatica. (Ex. 12, Report of Jae Chon, M.D., dated July 24, 2018, at p. 1.) Dr. Chon addressed applicant's work status by noting, "Light duty per back pain (10 lb. lifting limit, no field work, no duty work, no duty belt, and no altercations)." (*Id.* at p. 2.)

Dr. Chon's attribution of the work restrictions "per back pain" was reiterated verbatim in subsequent interim reports dated August 28, 2018, October 23, 2018, December 11, 2018, and January 29, 2019. (Exs. 8 through 11.)

Thus, applicant contends that the period of temporary total disability and concomitant entitlement to section 4850 benefits beginning on July 18, 2018 was solely the result of the low back injury of 3, 2018. (Answer, at p. 5:21.) There is no disagreement that applicant's March 18, 2019 cervical spine surgery resulted in a period of compensable TTD/4850 benefits (see Answer, at p. 5:24), thus the question presented is whether the period of temporary disability between July 18, 2018 and applicant's cervical spine surgery on March 18, 2019 was attributable to one injury or both.

In this respect, we observe that AME Dr. Silverman has testified that applicant's cervical spine work restrictions would have been operative simultaneously with her low back restrictions.

(Ex. W, Transcript of the Deposition of Mitchell Silverman, M.D., dated August 19, 2020, at pp. 11:21; 12:3; 26:15.) The AME also opined that if applicant was unable to perform light duties, she would have been temporarily totally disabled as a result of both the cervical and lumbar spine injuries. (*Id.* at p. 16:8.)

We also note that Dr. Silverman has opined that all periods of temporary partial and temporary total disability identified by the PTP are medically appropriate and necessary. (Ex. X, Report of Mitchell Silverman, M.D., dated March 26, 2020, at p. 9.) And in this respect, the testimony of Dr. Chon is germane. In his deposition of December 18, 2020, the PTP agreed that applicant was a cervical spine surgery candidate from the time of his initial evaluation on June 1, 2018. (Ex. N, Transcript of the Deposition Jae Chon, M.D., dated December 18, 2020, at p. 12:23.) Dr. Chon further confirmed that applicant's complaints in June, 2018 included both cervical and lumbar spine discomfort and limitations, and that the corresponding work restrictions provided by the PTP were "probably equally applicable" to both the lumbar and cervical spine injuries, notwithstanding the physician's primary concern at the time with respect to applicant's cervical spine condition. (*Id.* at p. 15:16.) Dr. Chon further opined that with respect to his July, 2018 reporting, applicant's light duty restrictions were necessary as a result of both applicant's cervical and lumbar spine diagnoses. (*Id.* at p. 19:24.)

Based on the opinions and deposition testimony of both AME Dr. Silverman and PTP Dr. Chon, we are persuaded that applicant's December 5, 2017 and January 3, 2018 injuries each resulted in a period of temporary total disability and corresponding entitlement to section 4850 benefits beginning July 18, 2018, and running through the date of applicant's cervical spine surgery on March 18, 2019. Because both injuries caused overlapping periods of temporary total disability, applicant's entitlement to section 4850 benefits would end one year from the initial start date of July 18, 2018. (*Foster, supra*, 161 Cal.App.4th 1505.) Following the expiration of the one year of section 4850 benefits on July 18, 2019, applicant would thereafter be entitled to ongoing temporary total disability for the December 5, 2017 injury to the neck through the earlier of the permanent and stationary date or the expiration of an additional 52 weeks of temporary total disability. (Lab. Code, § 4656(c)(2).)

Accordingly, as our decision after reconsideration, we will rescind the F&A and substitute new findings of fact that applicant's injuries of December 5, 2017 and January 3, 2018 resulted in a period of overlapping temporary total disability and concomitant entitlement to section 4850

benefits commencing July 18, 2019 for a period of one year, and that applicant was entitled thereafter to temporary total disability through the earlier of the permanent and stationary date or an additional 52 weeks of TTD.

We acknowledge that the parties have filed pending Stipulations with Requests for Awards in both matters that resolve each case in chief with the exception of the instant issue of temporary disability and overlap. Accordingly, we will defer adjustment of the section 4850 and TTD benefits to the parties, with jurisdiction reserved to the WCJ in the event of further dispute. Following the return of this matter to the trial level, the WCJ may review the proposed settlements for adequacy along with any supplemental agreement reached by the parties with respect to periods of temporary disability and section 4850 benefits.

For the foregoing reasons,

IT IS ORDERED, as the Decision After Reconsideration of the Workers' Compensation Appeals Board, that the October 21, 2021 Findings and Award is **RESCINDED** with the following **SUBSTITUTED** therefor:

FINDINGS OF FACT

1. In ADJ11286876, Joanna Fontenette, while employed on December 5, 2017 as a Deputy Chief, Occupational Group 490, at Los Angeles, California, by the Los Angeles School Police Department, sustained injury arising out of and in the course of employment to the neck. At the time of injury, the employer was permissibly self-insured and administered by Sedgwick CMS.
2. In ADJ11286877, Joanna Fontenette, while employed on January 3, 2018 as a Deputy Chief, Occupational Group 490, at Los Angeles, California, by the Los Angeles School Police Department, sustained injury arising out of and in the course of employment to the back. At the time of injury, the employer was permissibly self-insured and administered by Sedgwick CMS.
3. Applicant's injuries resulted in a period of entitlement to Labor Code section 4850 benefits commencing July 18, 2018 for one year. Thereafter, applicant is entitled to temporary total disability benefits until the permanent and stationary date or an additional 52 weeks of temporary disability, whichever is earlier.

4. Applicant's entitlement to Labor Code section 4850/temporary total disability benefits in ADJ11286876 and ADJ11286877 completely overlap. Applicant is entitled to one period of section 4850 benefits for one year beginning on July 18, 2018, and thereafter is entitled to temporary total disability benefits according to proof up to 104 weeks.

WORKERS' COMPENSATION APPEALS BOARD

/s/ JOSEPH V. CAPURRO, COMMISSIONER

I CONCUR,

/s/ KATHERINE A. ZALEWSKI, CHAIR

/s/ KATHERINE WILLIAMS DODD, COMMISSIONER



DATED AND FILED AT SAN FRANCISCO, CALIFORNIA

January 13, 2026

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

**JOANNA FONTENETTE
FERRONE LAW GROUP
HANNA, BROPHY, MACLEAN, MCALLEER & JENSEN**

SAR/abs

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