NOT DESIGNATED FOR PUBLICATION

BEFORE THE ARKANSAS WORKERS' COMPENSATION COMMISSION
CLAIM NO. H402768

CALLIE CALDWELL, EMPLOYEE — CLAIMANT

LONOKE SCHOOL DISTRICT,
SELF-INSURED EMPLOYER — RESPONDENT

ARKANSAS SCHOOL BOARDS ASSOCIATION,
TPA — RESPONDENT

OPINION FILED JULY 15, 2026

Upon review before the FULL COMMISSION in Little Rock, Pulaski County, Arkansas.

Claimant represented by the HONORABLE GREGORY R. GILES, Attorney at Law, Texarkana, Arkansas.

Respondents represented by the HONORABLE CAROL LOCKARD WORLEY, Attorney at Law, Little Rock, Arkansas.

Decision of Administrative Law Judge: Affirmed and Adopted.

OPINION AND ORDER

Claimant appeals an opinion and order of the Administrative Law Judge filed February 19, 2026. In said order, the Administrative Law Judge made the following findings of fact and conclusions of law:

1. The Commission has jurisdiction over this claim.

2. The Stipulations as set forth above are reasonable and are hereby accepted.

3. The claimant has failed to prove by a preponderance of the evidence that she suffered compensable internal injuries by specific incident on or about 15 April 2024.

4. Because the claimant has failed to prove a compensable injury, the remaining issues are moot and will not be addressed in this Opinion.

We have carefully conducted a *de novo* review of the entire record herein, and it is our opinion the Administrative Law Judge's decision is supported by a preponderance of the credible evidence, correctly applies the law, and should be affirmed. Specifically, we find from a preponderance of the evidence that the findings of fact made by the Administrative Law Judge are correct and they are, therefore, adopted by the Full Commission.

Therefore, we affirm and adopt the February 19, 2026 decision of the Administrative Law Judge, including all findings and conclusions therein, as the decision of the Full Commission on appeal.

IT IS SO ORDERED.

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SCOTTY DALE DOUTHIT, Chairman

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MICHAEL R. MAYTON, Commissioner

Commissioner Willhite dissents

DISSENTING OPINION

The Administrative Law Judge (hereinafter referred to as “ALJ”) found that the Claimant failed to prove by a preponderance of the evidence that she

suffered compensable internal injuries by specific incident on or about April 15, 2024. The Claimant appeals this decision. After conducting a thorough review of the record, I find that the Claimant proved she sustained a compensable internal injury, and that she is entitled to reasonable and necessary medical treatment for her compensable injury.

1. The Claimant has proven by a preponderance of the evidence that she sustained a compensable internal injury by specific incident.

To establish a compensable injury by a preponderance of the evidence the Claimant must prove: (1) an injury arising out of and in the course of employment; (2) that the injury caused internal or external harm to the body which required medical services or resulted in disability or death; (3) medical evidence supported by objective findings, as defined in Ark. Code Ann. §11-9-102(16), establishing the injury; and (4) that the injury was caused by a specific and identifiable time and place of occurrence. Arkansas Code Annotated §11-9-102(4)(A) and (4)(E)(i). A compensable injury must be established by medical evidence supported by objective findings and medical opinions addressing compensability must be stated within a degree of medical certainty. *Smith-Blair, Inc. v. Jones*, 77 Ark. App. 273, 72 S.W.3d 560 (2002). Objective medical evidence is necessary to establish the existence and extent of an injury but not essential to establish the casual relationship between the injury and the work-related accident. *Wal-Mart Stores, Inc. v. Stotts*, 74 Ark. App. 428, S.W.3d 853 (2001). When deciding any issue, the Full Commission shall determine, on the

basis of the record as a whole, whether the party having the burden of proof of the issue has established it by a preponderance of the evidence. Ark. Code Ann. §11-9-702(c)(2)

The employer takes the employee as he finds him. *Conway Convalescent Center v. Murphree*, 266 Ark. 985, 585 S.W.2d 462 (Ark. App. 1979). A pre-existing disease or infirmity does not disqualify a claim if the employment aggravated, accelerated, or combined with the disease or infirmity to produce the disability for which compensation is sought. *See, Nashville Livestock Commission v. Cox*, 302 Ark. 69, 787 S.W.2d 664 (1990); *Conway Convalescent Center v. Murphree*, 266 Ark. 985, 585 S.W.2d 462 (Ark. App. 1979); *St. Vincent Medical Center v. Brown*, 53 Ark. App. 30, 917 S.W.2d 550 (1996). An increase in symptoms of a pre-existing degenerative condition is sufficient to establish a compensable injury. *Parker v. Atlantic Research Corp.*, 87 Ark. App. 145, 189 S.W.3d 449 (2004).

Claimant has been employed by the Respondent as a speech language pathologist for twenty-seven years. Claimant was diagnosed with multiple sclerosis in 2008 and has had ongoing “relapses” of optic neuritis and foot drop over the course of the last eighteen years. Claimant has continued to perform her employment duties with the Respondent despite her multiple sclerosis diagnosis and the effects such a degenerative disease produces. On April 15, 2024, Claimant was walking down Respondent’s hallway on her way to the bathroom

and then to a parent-teacher meeting. The Claimant was using “two walking sticks” due to her multiple sclerosis diagnosis. As she made her way down the hallway she tripped and fell on a mat. The Claimant landed on her chest and abdomen and was unable to right herself after the fall. Claimant then crawled into a handicap bathroom and attempted to use a stability bar to again try and right herself. Claimant then called her sons for assistance. While waiting on her sons, Claimant’s coworkers attempted to help her up from the floor but were unable to lift her. Claimant’s sons arrived and then helped lift Claimant off of the floor and assisted her to the school nurse. Claimant was then seen by a school nurse and completed a Form AR-N within thirty minutes of her fall. Claimant stated in her AR-N that she fell and did not injure herself.

On April 17,2024, Claimant was at work when she began feeling nauseated and inevitably started passing blood. Claimant was then taken to the emergency department at Baptist Health Medical Center by her husband. Dr. Patrick Richard Kennedy stated:

> 52-year-old female presents with blood in the stool and some left lower quadrant pain. She also has some aches and pains from the fall yesterday but does not have any obvious deformity and is more concerned about the blood in the stool. Differential diagnosis includes GI bleed, diverticulosis, diverticulitis, internal hemorrhoid, anemia.
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> CBC shows normal white blood cell count of 7.9. Hemoglobin is at 9 and I do not have a previous [one] to compare that to[,] to know if this is lower

> than normal but she does complain of some generalized weakness and fatigue it could be due to acute blood loss anemia. BMP shows a BUN of 26 with normal creatinine which should be consistent with an upper GI bleed as well. Potassium is normal. INR is normal. CT of the abdomen and pelvis ordered.
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> CT of the abdomen pelvis shows diverticulosis without evidence of diverticulitis. No evidence of colitis. CT otherwise negative. We discussed admission for further workup and management versus outpatient follow-up with primary care doctor and gastroenterology. At this time she would prefer to go home. I think that is reasonable since she has normal vital signs and hemoglobin of 9 with no evidence of active bleed on CT and no signs of colitis or other acute abnormality. I have given her the phone number for gastroenterology clinic. I instructed her to follow-up with her primary care doctor in the next day or [two] for recheck of her H&H. Have also recommended she start iron supplementation. Instructed to return to the emergency department for bright red blood per rectum or worsening of her condition.
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> Addendum: The patient stood up to leave after discharge and became very lightheaded and then had a syncopal event causing her to hit her head on the ground. She is back to normal baseline mental status now. Have ordered a head CT. We will recheck her H&H but she will need to be admitted to the hospital for further management.
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> Claimant was then admitted into the hospital and received a blood transfusion.

A doctor is not required to be absolute in an opinion nor are the magic words “within a reasonable degree of medical certainty” even required to be used

by the doctor for an injury to be related to the work accident. *Freeman v. Con-Agra Frozen Foods*, 344 Ark. 296 (2001). Rather, the medical opinion must simply be more than speculation. *Id*. If a doctor renders an opinion about causation of a workers' compensation injury with language that goes beyond possibilities and establishes that work was the reasonable cause of the injury, this should pass muster. *Id*.

The medical records in evidence include a history of a fall at work resulting in left shoulder, chest and left lower quadrant pain. Between the date of the fall and the initial medical evaluation Claimant experienced "lightheadedness," as well as "bright red blood in her stool." During her evaluation the Claimant became "lightheaded" which caused her to fall and hit her head on the ground. Additional medical records from this evaluation refer to the Claimant's condition as "acute lower gastrointestinal bleeding with syncopal episode," "acute blood loss anemia" and "complicated acute illness." The medical evidence in the record shows that the Claimant's symptoms were caused by her fall on April 15, 2024. Where a condition is objectively aggravated or accelerated by a work accident, the result is a compensable injury. Based on this evidence, I find that the Claimant sustained an objective internal injury as the result of her April 15, 2024, work-related fall.

Additionally, there is no credible evidence in the record to suggest that the Claimant's acute condition was caused by any event other than her fall on April

15, 2024. Further, Claimant's pre-existing diagnosis of anemia and low hemoglobin are not a barrier for her to establish a compensable injury as the work-related fall could have aggravated, accelerated, or combined with her pre-existing conditions to cause the diverticular bleed. Therefore, I find that the Claimant suffered a compensable injury as a result of her work-related fall on April 15, 2024.

2. The Claimant is entitled to reasonable and necessary medical treatment for her compensable injuries incurred on and resulting from her April 15, 2024, work-related fall.

An employer shall promptly provide for an injured employee such medical treatment as may be reasonably necessary in connection with the injury received by the employee. Ark. Code Ann. §11-9-508(a). The claimant bears the burden of proving that she is entitled to additional medical treatment. *Dalton v. Allen Eng'g Co.,* 66 Ark. App. 201, 989 S.W.2d 543 (1999). What constitutes reasonable and necessary medical treatment is a question of fact for the Commission. *White Consolidated Indus. v. Galloway*, 74 Ark. App. 13, 45 S.W.3d 396 (2001); *Wackenhut Corp. v. Jones*, 73 Ark. App. 158, 40 S.W.3d 333 (2001).

The Arkansas Court of Appeals has held a claimant may be entitled to additional medical treatment even after the healing period has ended, if said treatment is geared toward management of the injury. *See Patchell v. Wal-Mart Stores, Inc*., 86 Ark. App. 230, 184 S.W.3d 31 (2004); *Artex Hydrophonics, Inc. v. Pippin*, 8 Ark. App. 200, 649 S.W.2d 845 (1983). Such services can include

those for the purpose of diagnosing the nature and extent of the compensable injury; reducing or alleviating symptoms resulting from the compensable injury; maintaining the level of healing achieved; or preventing further deterioration of the damage produced by the compensable injury. *Jordan v. Tyson Foods, Inc*., 51 Ark. App. 100, 911 S.W.2d 593 (1995); *Artex*, supra.

Claimant suffered a compensable internal injury as a result of her April 15, 2024, fall. Claimant sought care at the Baptist Health Medical Center on April 17, 2024. The Claimant continued receiving medical treatment aimed at diagnosing and alleviating her condition through September 14, 2024, at her last treatment with Dr. Michael Hussey. Therefore, Claimant is entitled to reasonable and necessary medical treatment for her compensable injury. I would find all the medical treatment that Claimant received thus far is reasonable and necessary.

Accordingly, for the reasons set forth above, I must dissent with the majority.

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M. Scott Willhite, Commissioner