BEFORE THE ARKANSAS WORKERS' COMPENSATION COMMISSION
CLAIM NO. H507288 & H504777

CHRISTOPHER D. HUNT,
EMPLOYEE **CLAIMANT**

MILLER COUNTY JUDGE,
EMPLOYER **RESPONDENT**

ASS'N OF ARK. COUNTIES WORKERS' COMP. TRUST/
AAC RISK MG'T. SERVICES, INC.,
INSURANCE CARRIER/TPA **RESPONDENT**

OPINION FILED OCTOBER 21, 2026

Hearing held before the Arkansas Workers' Compensation Commission (the Commission), Administrative Law Judge (ALJ) Mike Pickens, on July 23, 2026, in Texarkana, Miller County, Arkansas.

The claimant was represented by the Honorable Gregory R. Giles, Moore, Giles & Matteson, LLP, Texarkana, Miller County, Arkansas.

The respondents were represented by the Honorable Melissa Wood, Worley, Wood & Parrish, PA, Little Rock, Pulaski County, Arkansas.

INTRODUCTION

In the amended prehearing order filed May 15, 2026, the parties agreed to the following stipulations which they affirmed on the record at the hearing:

1. The Arkansas Workers' Compensation Commission (the Commission) has jurisdiction over this claim.

2. The employer/employee/carrier relationship existed at all relevant times including January 15, 2025, and April 11, 2025, the dates the claimant alleges he sustained a specific-incident "compensable injury" to his neck/cervical spine.

3. The claimant's average weekly wage (AWW) was $872.59, which corresponds to weekly indemnity rates of $582.00 for temporary total disability (TTD), and $437.00 for permanent partial disability (PPD) benefits.

4. The claimant's treating physician opined he reached maximum medical improvement (MMI) on January 19, 2026.

5. Miller County voluntarily paid the claimant TTD benefits from July 21, 2025, through August 17, 2025.

6. The respondents controvert this claim in its entirety.

7. The parties specifically reserve any and all other issues for future litigation and/or determination.

(Commission Exhibit 1 at 1-2; Reporter's Hearing Transcript at 5-6). Pursuant to the parties' mutual agreement the issues litigated at the hearing were:

1. Whether the claimant sustained a specific incident "compensable injury" to his neck/cervical spine on January 15, 2025, and/or April 11, 2025, within the meaning of the Arkansas Workers' Compensation Act (the Act).

2. If this injury is deemed compensable, whether and to what extent the claimant is entitled to medical, TTD, and PPD benefits.

3. Whether the claimant's attorney is entitled to a controverted fee based on these facts.

(Comms'n Ex. 1 at 2; T. at 5-6) (Bracketed material added).

The claimant contends he sustained a "compensable injury" to his neck as a result of a specific-incident(s) on January 15, 2025, and/or April 11, 2025, during the course and scope of his employment as a jailor for Miller County. The claimant contends he is entitled to payment of his related, reasonably necessary medical expenses; to TTD and/or temporary partial disability (TPD) benefits from August 19, 2025, through January 19, 2026, the date he reached maximum medical improvement (MMI). The claimant contends he is entitled to a permanent anatomical impairment rating of ten percent (10%) to the body-as-a-whole associated with his compensable neck/cervical spine injury. Finally, the claimant contends his attorney is entitled to the maximum

statutory attorney's fee. (Comms'n Ex. 1 at 2-3; T. 5-6; 72-75)

The respondents contend the claimant did not sustain a specific-incident compensable injury to his neck/cervical spine on either or both days of January 20, 2025, or April 11, 2025, and, therefore, he cannot meet his burden of proof pursuant to the Act. The respondents further contend the claimant did not provide them the statutorily required notice of the alleged January 20, 2025, incident, until his attorney filed a Form AR-C on November 11, 2025, almost ten (10) months after the specified date of the alleged injury. The respondents contend they initially accepted the April 11, 2025, alleged injury as compensable, but thereafter denied it on August 28, 2025. The respondents contend the claimant's neck/cervical spine problems are preexisting and not work-related. The respondents contend the claimant did not sustain and, therefore, cannot meet his burden of proof pursuant to the Act in demonstrating he sustained a specific-incident compensable injury to his neck/cervical spine on either or both days of January 20, 2025, and/or April 11, 2025. Finally, the respondents contend they continued to pay the claimant the full amount of his wages after both alleged injury dates; therefore, he is not entitled to any TTD benefits whatsoever regardless of whether or not the ALJ finds his alleged injury to be compensable. (Comms'n Ex. 1 at 2; T. 5-6; 74-75).

The record herein consists of the reporter's hearing transcript and any and all exhibits contained therein or attached thereto.

STATEMENT OF THE CASE

The claimant, Mr. Christopher D. Hunt (the claimant), was 54 years old at the time of the hearing, and 53 and 54 years old at the time of his alleged neck/cervical spine injury(ies) of January

15, 2025, and/or April 11, 2025, respectively. He has been working as a Miller County jailer in the county's corrections department since May 16, 2022, just a little over four (4) year as of the date of the subject hearing. Before beginning his job with Miller County, he had worked as a jailer for some ten (10) years in the Bowie County, Texas jail. He left the Bowie County job because his employer had him working in the rec[reational] yard, a job he did not like. The claimant testified he had never had any injuries of any kind to his neck, had never seen a doctor complaining of neck problems of any kind, and that he had never filed any "significant" workers' compensation claim(s) before the alleged neck/cervical spine injury(ies) that are the subject of this litigation. The claimant testified he had been injured on the job when he worked at the IP [International Paper] mill where he injured his lower back while operating a wood chipper. He underwent some conservative treatment including physical therapy (PT) on his lower back and was able to return to full duty work with no further problems. (T. 11-15; 13) (Bracketed material added).

When he went to work at the Miller County jail, the claimant worked both the day and the night shifts. He first worked the day shift from 7 A.M. to 7 P.M. and later worked the night shift from 7 P.M. to 7 A.M. While the number of inmates varied from time to time, the claimant testified he had been responsible for the supervision of as many as 200 inmates. The claimant testified he knew he was supposed to report any alleged work-related injury(ies) to his supervisor, and it was not unusual for the jailers to complete use-of-force reports which he probably did two (2) to three (3) times per week. (T. 15-17: Respondents' Exhibit 3 at 1 – required posted notice to employees of injury reporting procedure, etc.).

The claimant testified that on January 15, 2025, he apparently already "had a crook" [sic] in

his "neck and like it was going down my arm or something." (T. 18) (Bracketed material added). He testified further he was involved in a work-related use-of-force incident at work that day, January 15, 2025, and he was sure that January 15, 2025, was the correct, accurate date of the alleged incident, but that he did not complain of any [neck] symptoms, nor did he report an injury of any kind on that date. He testified he developed a "crook" in his neck a couple of days after the subject January 15, 2025, work incident wherein he said he had to "wrestle" with an inmate who refused to get dressed upon intake to the jail, so the claimant had to physically subdue and help dress him. (T.17-18) (Bracketed material added). The claimant testified he neither reported any alleged injury on January 15, 2025, nor did he go to the doctor that day. (T. 17-22).

The claimant testified he developed a crook in his neck and radiating right arm pain and numbness two (2) days after the alleged January 15, 2025, work incident, but the medical records reveal the claimant did not go to the doctor at the Starling Clinic until January 20, 2025, some five (5) days after the alleged January 15, 2025, work incident, and three (3) days after the onset of his neck pain and radiating right arm pain and numbness. (Claimant's Exhibit 2 at 1-4; T. 18-22). The Starling Clinic medical report dated January 20, 2025 – which makes no mention of any alleged work-related incident of January 15, 2025 – states the claimant was complaining of a crook in the right side of his neck and pain and numbness radiating down his right arm causing numbness in his right hand. (CX2 at 4). The claimant told the examining and treating physician his neck pain and pain and numbness radiating down his right arm and into his hand first appeared "4-5 days ago onset upon awakening with cervical pain that radiates down into his right shoulder and into his right hand." (CX2 at 4). The claimant was diagnosed with cervalgia; parathesia of skin, and

treated conservatively with medication and physical therapy (PT). (CX2 at 4-31).

A cervical spine X-ray revealed degenerative changes at C5-6 and C6-7 and the claimant continued to have pain in his neck with radiculopathy in his bilateral arms, and elbow. (CX2 at 17-18). When the claimant returned to the Starling Clinic for his March 10, 2025, visit he reported his "pain, numbness and swelling in his right arm is getting worse… ." (CX2 at 20-22). The claimant underwent the first of two (2) cervical spine MRIs on March 31, 2025. The 3/31/2025 MRI revealed:

> **IMPRESSION:**
>
> 1. Moderate disc height loss at C5-6 with moderate right paracentral disc protrusion. Mild spondylosis. This combination of findings causes severe degree of right lateral recess narrowing. Mild left lateral recess narrowing. Mild spinal stenosis. Minimal bilateral foraminal narrowing.
> 2. Milder degenerative changes at C4-5 and C6-7 as discussed above.
> 3. Suspected left-sided thyroid nodules measure up to 11 mm and could further be characterized with ultrasound.

(CX2 at 33; RX2 at 10).

Concerning this alleged January 15, 2025, work incident the record reveals the claimant first filed a Form AR-C with the Commission for this alleged neck/cervical spine injury of January 15, 2025, on November 10, 2025, almost ten (10) full months later. (Respondents' Exhibit 4 at 1). The AR-C the claimant finally did file on 11/10/25 lists the date of the alleged neck/cervical spine injury as "1/20/25." (RX4 at 1; T. 17-18). Also, in a letter written some time after the claimant's second work incident of April 11, 2025, his supervisor, Sergeant Donald Adkinson, wrote that sometime around February of 2025 the claimant advised him that he had fallen and hurt his neck at home, which is why he had missed a few days of work…and that his doctors were having him

do physical therapy to try to resolve the issues." (RX4 at 8). The medical record reveals that as of April 4, 2025, the claimant was still experiencing pain in his right shoulder, elbow and numbness in his right hand but no pain or symptoms in his left arm and he was continuing to treat conservatively with medication and PT up until the date of the second work incident, April 11, 2025, although he still was performing his regular job duties. (T. CX2 at 34-37).

The second work-related incident occurred on April 11, 2025. On that day the claimant was cleaning out an inmate's cell when the inmate pushed him, the claimant pushed him back, and a fight ensued wherein the inmate hit the claimant in the nose and he slipped to his knees "at least three times" and hit the floor. (T. 30-33). The claimant signed a typewritten statement and signed a Form AR-N concerning the facts of this incident. (T. 33; 30; CX2 at 38-39; Claimant's Exhibit 4 at 4). In addition, the claimant's supervisor, Sergeant Donnie Adkinson, testified at the hearing concerning this 4/11/2025 work incident/altercation and prepared both a "Serious Incident/Report Form", related forms and a typewritten, signed statement concerning the incident (T. 59-71; CX4 at 1 & 2; 6-7), as did officers Jerry Bohn and Corporal Elizabeth Dallas all of the Miller County detention facility. (CX4 at 3 & 5).

After this April 11, 2025, work incident/altercation, the claimant reported an exacerbation of his neck pain and right-sided radiculopathy, pain and numbness. (CX2 at 41-80). This resulted in the claimant undergoing a second MRI of his cervical spine on June 3, 2025. (CX2 at 81). The relevant results of this 6/3/2025 cervical MRI were identical to and unchanged from the earlier 3/31/2025 MRI report. (CX2 at 81; 33; RX2 at 10; 15). Specifically, the relevant finding on the June 3, 2025, cervical MRI report revealed under the "**IMPRESSION**" section: "C5-6: Moderate

DDD [degenerative disc disease] with 7 mm right posterolateral disc extrusion allowing for severe right foraminal stenosis." (CX2 at 81; RX2 at 15) (Bracketed material added). The remainder of the 6/3/2025 MRI report relating to the other levels of the claimant's cervical spine also remained unchanged from the earlier and first MRI report of 3/31/2025. (CX2 at 33; 82; RX2 at 10; 15). Noting that both the exact nature of the claimant's symptoms and the 6/3/2025 and 6/3/2025 MRI results were the same, the AAC Risk Management Services (AAC) adjuster advised the claimant via letter dated August 28, 2025, that the workers' compensation Trust would no longer be paying any further medical and/or indemnity benefits. (CX2 at 129).

On August 15, 2025, Dr. Wayne Bruffett reviewed both the claimants March 2025 and June 2025 MRI reports and agreed they were "very similar" and recommended an anterior cervical discectomy and fusion at C5-6. Specifically, Dr. Bruffett stated:

> Although the MRI findings [of June 11. 2025] are very similar to what was present prior to the [4/11/25 work altercation/event] I would say that this is an *exacerbation* of a pre-existing problem.

(CX1 at 117) (Emphasis added).

In September 2025 the claimant underwent an anterior cervical discectomy and fusion (ACDF) at the C5-6 level and reached MMI on January 19, 2026. (Stipulation 2, *supra*). Miller County voluntarily paid the claimant TTD benefits from July 21, 2025, through August 17, 2025. (Stipulation 5, *supra*). The claimant has health insurance that has paid his medical bills and related expenses other than those the respondents paid up until the time of the AAC claims adjuster's letter dated August 28, 2025.

Dr. Ryan T. Fitzgerald of Fitzgerald Medical Consulting, LLC, in Little Rock (Dr. Fitzgerald or FMC) prepared a peer review/independent medical report dated January 8, 2026. (CX2 at 180-184). In his four (4)-page report Dr. Fitzgerald lists all of the imaging studies he reviewed, particularly the 3/31/2025 and 6/3/2025 MRIs and provides a detailed description of his findings related to these reports in the conclusion portion of his report. Dr. Fitzgerald's independent peer review report concludes with the opinion stated within a reasonable degree of medical certainty:

> In summary, MR imaging of the cervical spine obtained on 6/3/25 subsequent to the subject event [of 4/11/2025] revealed no objective findings to indicate an acute traumatic injury. A disc extrusion at C5-6 showed no progression relative to the earlier MR exam [of 3/31/25].

(CX2 at 181; 180-184) (Bracketed material added).

DISCUSSION

The Burden of Proof

When deciding any issue, the ALJ and the Commission shall determine, on the basis of the record as a whole, whether the party having the burden of proof on the issue has established it by a preponderance of the evidence. ***Ark. Code Ann***. § 11-9-704(c)(2) (2026 LexisNexis Edition); ***Ark. Code Ann.*** § 11-9-705(a)(3) (2026 LexisNexis Ed.). This standard means the evidence having greater weight or convincing force. *Barre v. Hoffman*, 2009 Ark. 373, 326 S.W.3d 415 (citing *Smith v. Magnet Cove Barium Corp.*, 212 Ark. 491, 206 S.W.2d 442 (1947)); *Stone v. Patel*, 26 Ark. App. 54, 759 S.W.2d 579 (Ark. App. 1998).

Ark. Code Ann. Section 11-9-704(c)(3) (2026 LexisNexis Ed.) requires the ALJ, the Commission, and the courts "shall strictly construe" the Act, which also requires them to read and construe the Act in its entirety, and to harmonize its provisions when necessary. *Farmers Coop. v. Biles,* 77 Ark. App. 1, 69 S.W.2d 899 (Ark. App. 2002). In determining whether the claimant has met her burden of proof, the Commission is required to weigh the evidence impartially without giving the benefit of the doubt to either party**. *Ark. Code Ann***. § 11-9-704(c)(4) (2026 Lexis Ed.); *Gencorp Polymer Products v. Landers,* 36 Ark. App. 190, 820 S.W.2d 475 (Ark. App. 1991); *Fowler v. McHenry*, 22 Ark. App. 196, 737 S.W.2d 633 (Ark. App. 1987).

All claims for workers' compensation benefits must be based on proof. Speculation and conjecture, even if plausible, cannot take the place of proof. *Ark. Dep't of Corrections v. Glover,* 35 Ark. App. 32, 812 S.W.2d 692 (Ark. App. 1991); *Deana Constr. Co. v. Herndon*, 264 Ark. 791, 595 S.W.2d 155 (1979). It is the Commission's exclusive responsibility to determine the credibility of the witnesses and the weight to give their testimony. *Whaley v. Hardees***,** 51 Ark. App. 116, 912 S.W.2d 14 (Ark. App. 1995). The Commission is not required to believe either a claimant's or any other witness's testimony but may accept and translate into findings of fact those portions of the testimony it deems believable. *McClain v. Texaco, Inc*., 29 Ark. App. 218, 780 S.W.2d 34 (Ark. App. 1989); *Farmers Coop. v. Biles, supra*.

The Commission has the duty to weigh the medical evidence just as it does any other evidence, and its resolution of the medical evidence has the force and effect of a jury verdict. *Williams v. Pro Staff Temps***.**, 336 Ark. 510, 988 S.W.2d 1 (1999). It is within the Commission's province to weigh the totality of the medical evidence and to determine what evidence is most

credible given the totality of the credible evidence of record. *Minnesota Mining & Mfg'ing v. Baker*, 337 Ark. 94, 989 S.W.2d 151 (1999). Medical opinions must be stated within a reasonable degree of medical certainty. *Smith-Blair, Inc., v. Jones,* 77 Ark. App. 273, 72 S.W.3d 560 (Ark. App. 2002).

Compensability

For any specific-incident injury to be compensable, the claimant must prove by a preponderance of the evidence that his injury: (1) arose out of and in course of her employment; (2) caused internal or external harm to the body that required medical services; (3) is supported by by medical evidence and objective findings; and (4) was caused by a specific incident identifiable by time and place of occurrence. ***Ark. Code Ann***. § 11-9-102(4) (2026 LexisNexis Ed.); *Cossey v. Gary A. Thomas Racing Stable*, 2009 Ark. App. 666, at 5, 344 S.W.3d 684, 687 (Ark. App. 2009). The claimant bears the burden of proving the compensable injury by a preponderance of the credible evidence. ***Ark. Code Ann.*** § 11-9-102(4)(E)(i) (2026 LexisNexis Ed.); and *Cossey, supra*.

The claimant must prove a causal relationship exists between her employment and the alleged injury. *Wal-Mart Stores, Inc., v. Westbrook,* 77 Ark. App. 167, 171, 72 S.W.3d 889, 892 (Ark. App. 2002) (citing *McMillan v. U.S. Motors,* 59 Ark. App. 85, 90, 953 S.w.2d 907, 909 (Ark. App. 1997). Objective medical evidence is not essential to establish a causal relationship between the work-related accident and the injury where objective medical evidence establishes the existence and extent of the injury, and a preponderance of other nonmedical evidence establishes a causal relationship between the objective injury and the work-related incident. *Flynn v. Southwest Catering Co.*, 2010 Ark. App. 766, 379 S.W.3d 670 (Ark. App. 2010).

"Objective findings" are those findings which cannot come under the voluntary control of the patient. ***Ark. Code Ann***. § 11-9-102(16)(A); *Long v. Wal-Mart Stores, Inc*., 98 Ark. App. 70, at 80 250 S.W.3d 263, at 272 (Ark. App. 2007). Objective findings "specifically exclude pain, straight-leg-raising tests, and range-of-motion tests." *Burks v. RIC, Inc*., 2010 Ark. App. 862, at 3 (Ark. App. 2010).

Concerning the proof required to demonstrate the aggravation of a preexisting condition, our appellate courts have consistently held that since an aggravation is a new injury, it must be proved by new objective evidence of a new injury different than the preexisting condition. *Vaughn v. Midland School Dist*., 2012 Ark. App. 344, at 2-3 (Ark. App. 2012) (citing *Barber v. Pork Grp., Inc*., 2012 Ark. App. 138 (Ark. App. 2012); *Grothaus v. Vista Health, LLC*, 2011 Ark. App. 130, 382 S.W.3d 1 (Ark. App. 2011); *Mooney v. AT & T*, 2010 Ark. App. 600, 378 S.W.3d 162 (Ark. App. 2010). Where the only objective findings present are consistent with prior objective findings *or consistent with a long-term degenerative condition rather than an acute injury, this does not satisfy the objective findings requirement for a compensable aggravation of a preexisting condition injury. Vaughn*, 2012 Ark. App. 344, at 6 (holding that Arkansas courts have interpreted the Act to require "new objective medical findings to establish a new injury when the claimant seeks benefits for the aggravation of a preexisting condition"); *Barber*, 2012 Ark. App. 138, at 6 (Ark. App. 2012) (affirming the Commission's denial of an aggravation of a preexisting condition claim *where the MRI findings revealed a degenerative condition, with no evidence of, and which could not be explained by, an acute injury*). In *Mooney*, 2010 Ark. App. 600 at 4-6, 378 S.W.3d at 165-66 (Ark. App. 2010), the court affirmed the Commission's decision denying a back injury

claim where the objective evidence of an injury - including muscle spasms, positive EMG test results, and spinal stenosis revealed on an MRI - were all present *both before and after the date of the alleged aggravation injury*.

This is not a close case. Based on the applicable law as applied to the facts of this claim, the preponderance of the evidence compels and, indeed, mandates only one (1) reasonable conclusion: the claimant has failed to meet the Act's burden of proof in demonstrating he sustained a specific-incident compensable injury to his neck/cervical spine on either January 15, 2025, or April 11, 2025.

The Alleged January 11, 2025 Work Incident

First, it is significant to note there exists notably insufficient evidence establishing the claimant was even involved in a specific-incident at work on January 15, 2025, that could have resulted in the herniated cervical disc at C5-6 for which he eventually underwent surgery. The preponderance of the evidence conclusively demonstrates the claimant was unable to credibly identify a January 15, 2025, work incident that would explain the obviously degenerative findings the March 31, 2025, MRI revealed which included the herniated cervical disc at C5-6. Consequently, since he was unable to identify a January 15, 2025, work incident that would account for the 3/31/2026 MRI findings – findings that remained unchanged and were in fact identical to the findings revealed in the second MRI of June 3, 2025, which he underwent after the April 11, 2025, work altercation/event – he has failed to meet his burden of proof that either the alleged January 2026 or the April 2026 incidents caused the herniated disc at C5-6 for which he underwent surgery.

Although the claimant testified he was involved in a use-of-force incident on 1/15/2026, this uncorroborated, self-serving testimony is contradicted by other evidence that is factual and beyond reasonable dispute. For example, although the claimant admitted he knew how and to whom to report an alleged work-related injury, he admitted he did not contemporaneously report a work incident or injury that occurred on 1/15/2026, and the evidence is devoid of any use-of-force or any other report whatsoever that any such incident ever even occurred. At the hearing the claimant agreed with the respondents' attorney and admitted that in his deposition he testified he may have hurt his neck "by maybe falling or something" at work sometime shortly before his birthday, which was on January 20, 2025, when he was "tussling" with an inmate during intake. (T. 51-52). In his deposition he was unclear as to either the exact date of the alleged incident or exactly how it occurred. Also, the claimant's supervisor, Sergeant Adkinson, testified he could not find any reports of physical incidents or altercations in which the claimant was involved in January 2025.

The claimant also testified in his deposition that sometime after the fact he had mentioned to his supervisor, Sergeant Adkinson, that he was hurting and had gone to his doctor at the Starling Clinic on his own on January 20, 2025 (T. 52-53). Sergeant Adkinson contradicted the claimant in this regard when he wrote and signed a statement, as well as when he credibly testified at the hearing that sometime in February of 2025 the claimant told him he had fallen out of his bed at home and his neck had been hurting ever since then and this is why he had missed some work while he was undergoing PT. (RX4 at 8; T. 61-62).

When the claimant finally went to the Starling Clinic on January 20, 2025 – some five (5) days after the alleged phantom work-related incident of January 15, 2025, and some three (3) days

after he said his neck pain and numbness that radiated down his right arm and into his hand began – he never gave any history of a work-related incident. He simply told his health care providers at the Starling Clinic that he woke up with a "crook" in his neck and the radiating right arm pain and numbness. (CX2 at 1-4; T. 18-22).

It is also significant to note the claimant never even reported an alleged work incident of January 15, 2025, until November 10, 2025, which was almost ten (10) full months after the date of the alleged 1/15/2025 incident and that this was: after he had been advised the respondents were controverting his claim and why they were controverting it; after he had undergone two (2) separate MRIs with identical findings – one (1) in March 2025 before the second incident of April 11, 2025, and a second one in June 2025; after the April 2025 work incident/altercation; after he underwent the ACDF at C5-6; and after he had retained an attorney to represent him in this claim. (RX4 at 1; T. 17-18). These undisputed facts demonstrate that, with respect to the alleged January 15, 2025, work incident the claimant has failed to meet his burden of proof in establishing he sustained a specific-incident neck/cervical spine injury identifiable by time and place of occurrence as the Act requires. *See, Kimble v. Labor Force, Inc*., 2013 Ark. App. 601, 430 S.W. 3d 156 (Ark. App. 2013).

The April 11, 2025, Work Incident/Altercation

Unlike the alleged January 15, 2025, work incident, there is no question the claimant was involved in a work incident/altercation on April 11, 2025. The only question is whether this 4/11/2025 incident constitutes the aggravation of the demonstrably preexisting degenerative condition of the claimant's neck/cervical spine so as to constitute a "compensable injury" within

the Act's meaning. The evidence makes it abundantly clear the 4/11/2025 incident does not constitute an aggravation of the claimant's preexisting cervical spine condition, including the herniated disc at C5-6 for which the claimant underwent the ACDF procedure and, therefore, the claimant's alleged neck/cervical spine injury is not compensable. *See, e.g., Vaughan, supra*.

First, again, there is no reasonable dispute that both the objective findings – specifically, the degenerative findings of the claimant's cervical spine including the C5-6 disc herniation – as well as the claimant's symptoms of severe, increasing and eventually constant neck pain which radiated down his right arm and into his hand – preexisted the 4/11/2025 work incident. The findings revealed by the 3/31/2025 and 6/3/2025 MRIs are *identical*. Of course, the 3/31/2025 MRI was performed *before* the 4/11/2025 work incident/altercation and the 6/3/2025 MRI was performed *after* it. The before and after MRI results are the same, they are identical. Therefore, it is beyond reasonable dispute that whatever happened in the 4/31/2026 work incident/altercation, there exists no evidence whatsoever this incident *had any effect whatsoever on, much less aggravated, the underlying degenerative condition of the claimant's neck/cervical spine including the C5-6 disc protrusion*. It is black letter law that an "aggravation" is a new injury and must meet all of the statutory requirements of a compensable injury. *See, Vaughan, Grothaus, Barber and Mooney, supra*. While the 4/11/2025 work incident may have *exacerbated* the claimant's already existing neck pain and right-sided cervical radiculopathy, the overwhelming preponderance of the evidence proves it most certainly did not *aggravate* the underlying preexisting, symptomatic condition of his cervical spine including but not limited to the C5-6 disc protrusion.

Second, the medical evidence reveals that although the claimant returned to work after he

first sought treatment for his neck pain and right-sided radiculopathy on January 20, 2025, his symptoms of neck pain and numbness radiating down his right arm and into his hand persisted from that time on. While the severity of his symptoms may have waxed and waned, the claimant still had severe neck pain and painful right-sided radiculopathy from mid-January 2025 up until and after the April 11, 2025, work incident. (CX2 at 4-115; RX2 at 1-18).

Third, the respective opinions of Dr. Bruffett and Dr. Fitzgerald provide additional evidence the claimant has failed to meet his burden of proof in demonstrating he sustained a "compensable injury" to his neck/cervical spine within the Act's definition on April 11, 2025. Indeed, in his August 15, 2025, clinic note Dr. Bruffett specifically states the 4/11/2025 incident "is an *exacerbation* of a pre-existing problem", not an "aggravation" of the preexisting, symptomatic underlying condition of the claimant's neck/cervical spine. (CX1 at 117) (Emphasis added).

While the claimant may seek to argue that by using the word "exacerbation" Dr. Bruffett actually meant "aggravation", the Act does not allow us to put words in a doctor's or any other witness's mouth. If there was any legitimate question as to what Dr. Bruffett meant in this regard he could have been asked to clarify. He was not. And the words "exacerbate" and "exacerbation" have significantly different meanings in the law than the words "aggravate" and "aggravation". In any event, Dr. Fitzgerald's report – not to mention a simple reading of the 3/31/2025 and 6/3/2025 MRI reports – conclusively reveals the two (2) MRIs show *no change in the C5-6 disc protrusion after the 4/11/2026 incident* and neither MRI shows objective evidence of an acute/specific-incident traumatic injury. (CX2 at 181; 180-184). Consequently, on these facts, based on the medical and other relevant evidence of record it would constitute sheer speculation and conjecture

to find the claimant has met his burden of proof in establishing a compensable neck/cervical spine injury herein. *See, Deana, supra*. The facts of this case lend themselves to a health insurance claim, not a workers' compensation insurance claim.

Therefore, for all the aforementioned reasons I hereby make the following:

FINDINGS OF FACT AND CONCLUSIONS OF LAW

1. The stipulations set forth in the amended prehearing order filed May 15, 2026, which the parties affirmed on the record at the hearing, hereby are accepted as facts.

2. The claimant has failed to meet his burden of proof in demonstrating he sustained a specific-incident "compensable injury" to his neck/cervical spine pursuant to the Act's definition on either January 15, 2025, or April 11, 2025.

3. The claimant's attorney is not entitled to a controverted fee on these facts.

WHEREFORE, this claim is denied and dismissed subject to the parties' statutory appeal rights. If they have not already done so, the respondents shall pay the court reporter's invoice immediately upon receipt of this opinion.

IT IS SO ORDERED.

Mike Pickens
Administrative Law Judge

MP/mp