BEFORE THE ARKANSAS WORKERS' COMPENSATION COMMISSION CLAIM NO. H505703

LORERTTA KOCKA, EMPLOYEE	**CLAIMANT**
CARE MANOR NURSING, EMPLOYER	**RESPONDENT**
CCMSI, CARRIER/TPA	**RESPONDENT**

OPINION FILED SEPTEMBER 9, 2026

Hearing before Administrative Law Judge, James D. Kennedy, on the 19TH day of August 2026, in Mountain Home, Arkansas.

Claimant is represented by Frederick S. Spencer, Attorney at Law, Mountain Home, Arkansas.

Respondents are represented by Melissa Wood, Attorney at Law, Little Rock, Arkansas.

STATEMENT OF THE CASE

A hearing was conducted on the 19th day of August 2026. The claimant did not attend the hearing but the parties agreed to substitute her deposition in place of her testimony. It was further agreed that immediately following the claimant's deposition, she suffered another heart attack and consequently did not attend the hearing. The Claimant contended she sustained a compensable injury in the form of a heart attacks on or about January 29th, 2024, and on December 3rd, 2025, and is entitled to medical treatment for the heart attacks and attorney fees. All other issues were reserved. The Respondents controverted the claim in its entirety and also raised a lack of notice as a defense in that June 25, 2025, was the first notice of the alleged work-related injury sustained on or about January 29, 2024 and also raised lack of notice as a defense in that May 20, 2026, was the first notice of the alleged work-related injury on or about December 3, 2025.

A copy of the Pre-Hearing Order filed on May 27, 2026, and the Pre-hearing Questionnaires of both parties were made part of the record. The parties stipulated that the Arkansas Workers' Compensation Commission has jurisdiction of the claim, the relationship of employee-employer-carrier existed between the parties on January 29th, 2024, and on December 3, 2025, and that respondents controverted the claim in its entirety.

From a review of the record as a whole, to include medical reports and other matters properly before the Commission and having had an opportunity to observe the testimony and demeanor of the witness, the following findings of fact and conclusions of law are made in accordance with Ark. Code Ann. §11-9-704.

FINDINGS OF FACT AND CONCLUSSIONS OF LAW

1. The Arkansas Workers' Compensation Commission has jurisdiction over this claim.
2. That the relationship of employee-employer-carrier existed between the parties on January 29th, 2024, and December 3, 2025.
3. That the claimant has failed to satisfy the required burden of proof to prove by a preponderance of the evidence that she suffered a work-related cardiovascular event that was compensable under A.C.A. §11-9-114, on the dates of January 29th, 2024, and December 3, 2025.
4. That all other issues are moot.
5. If not already paid, the respondents are ordered to pay for the cost of the transcript forthwith.

REVIEW OF TESTIMONY AND EVIDENCE

The Pre-hearing Order along with the Pre-hearing questionnaires of the parties were admitted into the record without objection. The parties submitted two joint exhibits that consisted of medical exhibits and the deposition of the claimant. The Respondents also submitted an exhibit that consisted of non-medical that was admitted without objection.

Th deposition of the claimant will be reviewed initially. The deposition was taken on December 3, 2025, and the claimant was 58 years old at the time of her deposition, with her birthday on May 14, 1967. The claimant testified that she had graduated the eleventh grade, never taken the GED exam, but had obtained her CNA license in March of 1991, which was still current. The claimant testified that she had worked for the Area Agency on Aging and had also worked for the Respondent multiple times, with the first time being from 2004 to 2010. She was terminated and had also worked for Gassville nursing home. She stated she returned to working for the Respondent in March of 2025. (Dep. 5 – 9) The claimant remembered a work-related injury to her lower back and on another date, an injury to her foot, but that she continued to work both times. (Dep. 10 - 12)

The claimant went on to testify that she suffered her first heart attack on Christmas Eve of 2020 while at her home and which occurred at 2:30 in the morning. Prior to that, she was not aware of any heart issues. She suffered “real bad chest pain” from her chest to her armpits and sought treatment right away at Calico Rock hospital. She went on to state that she stayed in the hospital until Saturday and started taking blood pressure medicine. (Dep. 14) She admitted to being seen by a cardiologist, Dr. Camp, in 2016 or

probably 2017, and that there was no treatment except medication. She admitted that there was a history of heart problems in her family. Her father had open heart surgery twice and then died from complications of the second open heart surgery. Additionally, her mother suffered a major heart attack and passed away due to it. She went on to testify that she had two brothers and two sisters and that none of them had heart issues. (Tr. 15 -17)

In regard to working for the Respondent, the claimant stated that she could work on the floor but usually worked in the shower room as a CNA. (Dep. 19) In regard to her work, she testified that if she worked the day shift, her job consisted of getting the occupants up for breakfast and taking them to the dining room. After the dining room, you will take them, change them, and lay them down. If it's shower day, you'll have the shower team get them on the gurney or in the wheelchair, or you take them to the shower room yourself. After that, you will give them a snack, and make sure they're dry before lunchtime, and the ones laying down, get them up for lunch. After lunch, you lay them down and change them. Claimant also testified that she worked the night shift, which involved getting vitals, passing ice, keeping them dry, answering call lights, and getting them up in the morning. This could involve lifting people between 70 to 240 pounds. If it was a larger patient, the lifting would occur with someone else or the use of a Hoyer lift. She also admitted that she worked overtime but not a lot, probably four hours every two weeks.

In regard to her heart attack on January 29th, the claimant was asked what time it occurred and responded that she did not know, but was told that it happened that day, and she had been to work most of the day. She was made aware of it while she was in

the ER. She was then asked if she remembered anything about that day and responded, “Normal day for me. Come in, work the hall, get them up in the morning, do the dining room, then to start showers.” She went on to testify that she got to the part where she started the showers and felt pain more like indigestion, but kept on performing her regular duties, and at about 4:00, while at her home, decided that she needed to go get checked out, and drover herself to the hospital. She drove to Baxter Regional and was placed in a room where they performed a blood test, a urine test, and an EKG, and came back and told her that she had suffered a heart attack, which surprised her. (Dep. 19 – 24)

They told her that they were going to perform a heart cath, which resulted in the finding of three blockages, and she then saw Dr. Munns to talk about open heart surgery, who later performed surgery to resolve the blockages. She was placed on a different blood pressure medication, a cholesterol medicine, and a baby aspirin. She went on to testify that she would go to the doctor every six months, and that the only issue she was having was that when she moved her arms, she could feel her chest move, and that this started occurring right after her surgery. She felt that stress for her work caused her heart attack due to being short-staffed, which probably started happening in 2023. If everyone does not show up, she and her partner could be pulled from the showers to the floor. (Dep. 25 - 27) The claimant felt that they were short staffed at least three days a week since 2023, and it is getting worse. The claimant then added that they were short staffed between three and four days a week if not more and on weekends for sure, but that she did not work weekends very often. (Dep. 30) The claimant also admitted that another stress factor in her life was that her husband was suffering from stage-four prostate cancer with a broken hip in September of 2023, and that he was diagnosed with the

prostate cancer in 2020. (Dep. 31) The claimant was specifically asked if any doctor had given an opinion that what happened at work caused her attack and she responded, “The only thing they said was it happened during the day.” The claimant also admitted that she did not tell anyone at the Respondents about her second heart attack on the day that it happened but just complained about indigestion. (Dep. 32) Claimant testified that she decided to retire in May or June of 24, and now works PRN, on Sundays, and also works for Gassville when needed, where she has the same job duties. Prior to the heart attack, Claimant admitted she did not complain to anybody about the stress. She also stated her heart was keeping her from working due to her not being able to do a lot of heavy lifting. She has gone to the night shift where you don’t have to get them up as much. (Dep. 33 - 36)

The sole witness to testify at the time of the actual hearing was Tracy Barkley, the director of HR for the Respondent, who testified that she takes care of all the personal records, hiring, terminations, work comp claims, and injuries, and has worked for the Respondent since October of 2024. Prior to September 5th, 2025, when the first Form C was filed, she testified that she was not aware that the claimant was claiming a work-related heart attack. She also testified that the claimant had returned to work on a PRN basis after her heart attack, and that she would on occasion see her and Claimant never mentioned that her heart attack was related to work. Ms. Barkley was shown a copy of a workers’ compensation poster and testified that the poster was on a bulletin board in the break room of the Respondent, in a location where the claimant would go on a regular basis to clock in and out. She also testified that she had reviewed documentation to

determine whether or not there was short staffing and stated, “There was no short staffing.” (Tr. 7 – 9)

Under cross examination, Ms. Barkley admitted that the Respondent had been investigated by the state nursing home inspector from time to time, and that the job of a CNA is a lot of work and could be stressful. (Tr. 10, 11)

On redirect, Ms. Barkley was asked if the job of a CNA was stressful, would that be true across the whole-time frame when she worked for Respondent and she replied, “Yes.” (Tr. 11)

The Respondent submitted 5 pages of non-medical records without objection. An Arkansas C Form was filed on September 5, 2025, which provided that due to the extreme pressure and anxiety caused by the employer being short staffed, and the claimant’s responsibility to take care of more patients, the claimant suffered a heart attack. (Resp. Ex. 1, P. 4) In addition a copy of the Arkansas P Form that was on a bulletin board in the break room explaining what the employee should do in case of an injury was made part of the record. (Resp. Ex. 1, P 5)

The joint medical exhibit consisted of 23 pages. The first document was a chart note from Dr. Kam Lie which consisted of six pages and was dated February 16, 2026. The chart note provided that the claimant was an everyday smoker, a new patient, with no doctor, and had a history of a heart attack in 2015 at 48 years of age along with additional issues. (Jt. Ex. P. 1 – 6) The claimant returned to Dr. Lie on March 17, 2016, and the chart note provided that the claimant was doing “good” and her blood pressure was “better.” (Jt. Ex. P. 7 – 12)

The next medical record provided that the claimant presented to Baxter Regional ER on January 29, 2024, and the Claimant was a 56-year-old female with chest pain. A heart catheterization was performed which showed two significant blockages. The diagnosis plan provided for a non-ST elevated myocardial infarction. The claimant stated the pain was similar to her heart attack in 2015. She added that she was supposed to be on blood pressure medication but stopped taking it long ago. (Jt. Ex. P. 13 – 17) The claimant then returned to Baxter Regional the following day for a left heart catheterization, a coronary angiography, and a left ventriculography, from a right femoral approach. The report provided under impression that there was two-vessel coronary artery disease primarily involving the mid left anterior descending and mid right coronary artery. The report was from Dr. Otis Warr. (Jt. Ex. P. 18, 19)

On May 28, 2024, a chart-note from Dr. Sharon Pritchard provided that the claimant had stopped atorvastatin, a commonly used medication to lower cholesterol, due to side effects. The report went on to provide that Cholestyramine light powder was started in its place. (Jt. Ex. P. 20-23)

DISCUSSION AND ADJUDICATION OF ISSUES

When the primary injury is shown to have arisen out of and in the course of employment, the employer is responsible for any natural consequence that flows from that injury. *Nichols v. Omaha Sch. Dist.*, 2010 Ark. App. 194, 374 S.W.3d 148. The basic test is whether there is a casual connection between the injury and the consequences of such. The burden of proof is on the claimant to establish the necessary causal connection. Whether there is a causal connection is a question of fact for the Commission. *Jeter v. B.R. McGinty Mechanical*, 62 Ark. App. 53, 968 S.W.2d 645 (1998). In determining

whether the claimant has sustained her burden of proof, the Commission shall weigh the evidence impartially, without giving the benefit of the doubt to either party. A.C.A. §11-9-704. *Wade v. Mr. Cavenaugh's*, 298 Ark. 364, 768 S.W. 2d 521 (1989). Further, the Commission has the duty to translate evidence on all issues before it into findings of fact. *Weldon v. Pierce Brothers Construction Co.*, 54 Ark. App. 344, 925 S.W.2d 179 (1996).

In the present matter, the claimant contends that work related stress due to understaffing was the cause of two of her heart attacks. The issue of compensability in regard to the claimant's claim is controlled by the provisions of A.C.A §11-9-114. The standard of proof in heart attack cases is high and is spelled out as follows: (a) A cardiovascular, coronary, pulmonary, respiratory, or cerebrovascular accident or myocardial infarction causing injury, illness, or death is a compensable injury only if, in relation to other factors contributing to the physical harm, an accident is the major cause of the physical harm. (b) (1) An injury or disease included in subsection (a) of this section shall not be deemed to be a compensable injury unless it is shown that the exertion of work necessary to precipitate the disability or death was extraordinary and unusual in comparison to the employee's regular employment or alternatively, that some unusual and unpredicted incident occurred which is found to have been the major cause of the physical harm. (2) Stress, physical or mental, shall not be considered in determining whether the employee or claimant has met his or her burden of proof.

In the present matter, the claimant had previously suffered a heart attack and had a family history of cardiovascular events. The medical evidence provided that the claimant was a smoker and had stopped taking a common cholesterol reducing drug due to side effects before returning to a physician and starting another cholesterol lowering

pharmaceutical. Although the claimant testified that the stress of her job was the cause of her work-related heart attacks, she also admitted that January 29th, the day of her first heart attack claimed as work related was a normal day for her. No doctor issued an opinion stating or even referring to her job as the cause of her heart attacks. No unusual or unpredicted event of record was shown to have occurred.

Here the claimant works a job that is not easy, but she herself admitted her workday on January the 29th was normal. Although she claimed that her stress at work was the cause of her heart attacks, she also suffered with a spouse fighting cancer. A causal connection was not established between the claimant's work and her claimed work-related heart attacks and no substantial evidence was found to support the connection. Without giving the benefit of the doubt to either party, it is found that the claimant has failed to satisfy the required burden of proof to prove by a preponderance of the evidence that she suffered a work-related cardiovascular event compensable under A.C.A. §11-9-114. Consequently, all remaining issues are moot. If not already paid, the respondents are ordered to pay for the cost of the transcript forthwith.

IT IS SO ORDERED.

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JAMES D. KENNEDY
Administrative Law Judge