BEFORE THE ARKANSAS WORKERS' COMPENSATION COMMISSION

WCC NO.: H503934

KARA SLATEN, EMPLOYEE — CLAIMANT

NIDEC MOTOR CORPORATION,
EMPLOYER — RESPONDENT

FARMINGTON CASUALTY COMPANY,
TRAVELERS, CARRIER/TPA — RESPONDENT

OPINION FILED SEPTEMBER 21, 2026

This opinion is rendered by Honorable Administrative Law Judge CHANDRA L. BLACK, in Little Rock, Pulaski County, Arkansas.

Hearing was held on June 1, 2026, before Honorable Administrative Law Judge JOSEPH C. SELF, in Fort Smith, Sebastin County, Arkansas.

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

Respondents represented by the Honorable GUY ALTON WADE, Attorney at Law, Little Rock, Arkansas.

STATEMENT OF THE CASE

On June 1, 2026, the above-captioned claim came on for a hearing in Fort Smith, Arkansas. Administrative Law Judge Self previously held a pre-hearing telephone conference in this matter on April 2, 2026. A Pre-hearing Order was entered that same day pursuant to the telephone conference. Said order was admitted into evidence along with the parties' pre-hearing information filings without objection from the parties as Commission's Exhibit 1.

Stipulations

During the pre-hearing telephone conference, and/or at the hearing, the parties agreed to the following stipulations:

1. The Arkansas Workers' Compensation Commission has jurisdiction of the within

claim.

2. The employee-employer-insurance carrier relationship existed among the parties on or about February 26, 2025.

3. The Claimant's average weekly wage on the day of her alleged injury was $760.00. Her weekly compensation rates are $506.00 temporary total disability/TTD benefits; and $380.00 for permanent partial disability/PPD compensation.

4. The Claimant drew unemployment benefits for twelve (12) weeks, for which the Respondents are entitled to an offset.

5. The Respondents have now controverted this claim in its entirety.

Issues

By agreement of the parties the issues to be litigated at the hearing include the following:

1. Whether the Claimant sustained compensable injuries to her lower back and pelvis.
2. If compensable, whether the Claimant is entitled to temporary total disability compensation from July 14, 2025, to a date yet to be determined.
3. If compensable, whether Claimant is entitled to medical benefits.
4. Respondents assert entitlement to offset unemployment benefits. Since this time, the parties have stipulated to this issue agreeing that the Respondents are entitled to an offset for any indemnity benefits awarded herein.
5. Whether the Claimant's attorney is entitled to a controverted attorney's fee.

Contentions

The Claimant's and the Respondents' contentions are listed below:

Claimant:

The Claimant contends that she sustained compensable injury to her lower back and contends that she has required medical treatment to her pelvis and back associated with her accident and injuries.

Claimant contends that the medical treatment she has had since the date of injury has been reasonable, necessary, and related and contends that she continues to need additional treatment and care.

Claimant contends entitlement to temporary total disability benefits from July 14, 2025, to a date yet to be determined. When Respondents advised that they had no work available for her with light duty restrictions. (Claimant concedes she had been paid unemployment benefits until those ended around the end of December 2025 and acknowledges Respondents' entitlement to offset associated with those benefits. The Claimant contends that Respondents' entitlement to offset associated with those payments.)

The Claimant contends that the Respondents should be ordered to pay attorney's fees as provided by law.

Respondents:

The Respondents contend that "The Claimant did not sustain a compensable injury with the course and scope of her employment. Claimant's complaints are the result of an unrelated pre-existing condition for which the Respondents are not responsible."

FINDINGS OF FACT AND CONCLUSIONS OF LAW

After reviewing the record as a whole, including the medical reports, the documentary evidence, and other matters properly before the Commission, I hereby make the following findings of fact and conclusions of law in accordance with Ark. Code Ann. §11-9-704 (Repl. 2012):

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

2. The proposed stipulations set forth above are reasonable and hereby accepted.

3. The Claimant failed to prove by a preponderance of the credible evidence she sustained compensable injuries to her lower back and pelvis on February 26, 2025. However, the evidence preponderates the Claimant sustained a minor injury in the form muscle spasms that resolved at the time the Respondents stopped paying benefits.

4. All issues not litigated herein or addressed in this Opinion are reserved under the Arkansas Workers' Compensation Act.

Summary of Evidence

The witnesses were Mr. James Ellsworth (appeared telephonically), and the Claimant, Ms. Kara Slaten.

The record consists of the hearing transcript of June 1, 2026, and the exhibits held therein. In addition to the Pre-hearing Order discussed above, the exhibits admitted into evidence in this case were Claimant's Exhibit 1consisting of 13 numbered pages an Abstract of Tables of Contents, a two-page Description the Claimant's medical records, and 175 numbered pages; and Respondents' Exhibit 1 includes one index and 21 pages of Medical Providers Documents.

BACKGROUND

Testimony

James Ellsworth (appeared telephonically)

Mr. Ellsworth was 40 years of age at the time of the hearing. Currently, Mr. Ellsworth is employed by Ameritech Facility Services out of Ball Ground Georgia. He works installing kitchen equipment for Panda Express, a fast-food chain. Mr. Ellsworth has worked for Ameritech for a little over four months. Prior to that, he worked for Nidec Motor Corporation, which is located in Mena, Arkansas. His employment ended with Nidec in July 2025.

While working for Nidec, Mr. Ellsworth's job title was lamination technician. During his employment with Nidec, Mr. Ellsworth was familiar with the Claimant. Mr. Ellsworth testified that the Claimant ran the forklift and was becoming the lead person for the lamination department.

The following exchange took place:

> Q. Ms. Slaten alleged a work-related injury on February the 26th of 2025. Can you tell us what, if anything, you know about that?
>
> A. Yes, sir. Me and her were in the back of the warehouse offloading

lamination from one stack to another and she reached down and was lifting from one pallet to another and heard a loud pop in her lower back and we immediately went and got help.

Q. Can you tell us in the lamination area what was the material specifically there off the pallets? Do you recall that?

A. They are various sizes of metal disk made for stators and rotors and electric motors.

Q. And so, if I understood you right, they were on a pallet, and she was moving it from one pallet to the next.

A. Yes.

Q. And where was she at the time that she indicated that something had happened?

A. Right directly in front of me.

Mr. Ellsworth testified that they were advised to go back and move the "*lam"* from one stack to another and that is what they did. He testified that he observed that the Claimant was tensed up in pain really bad and was in severe pain. Mr. Ellsworth testified that the Claimant reported to their lead, Teresa Hartley. He confirmed that "Teresa came to the location where the Claimant alleged she had been injured." The Claimant was transported to the front office.

On cross-examination, Mr. Ellsworth confirmed that he worked for the respondent-employer/Nidec more than four months because his hire date was January 27, 2025. He maintained that he heard a pop when the Claimant's incident occurred. Mr. Ellsworth confirmed that they were lifting some lam. These are circular pieces of aluminum, which are 10 to 30 inches. He agreed that these pieces are paper thin, but "it varies."

Specifically, Mr. Ellsworth testified:

Q. Okay. But the ones you were lifting on this particular day were not; were they?

A. *That is false. Some of them can get super heavy.*

Q. *Okay. But the one you were lifting on this particular day were not; were they?*

A. Not so much.

Q. *Okay. In fact, they were extremely thin and she has described them as being paper thin. Would you agree with that?*

A. Sure.

Q. Okay. Now, you had your own work-related claim at Nidec; is that right?

A. Yes.

Q. You smashed your finger and had some sutures.

A. It was more than that. It was broken bones and it was pretty severe.

He confirmed that his claim was treated as compensable. Mr. Ellsworth admitted that he received medical treatment. According to Mr. Ellsworth he was still receiving medical care for his injury by the time he ended up voluntarily leaving Nidec. He agreed that he has not been back or tried to return to work there since he left. *Mr. Ellsworth denied that he was aware she had at least two or more injuries to her lower back or pelvis in the past. He asked if the Claimant shared this with him, and Mr. Ellsworth's response was, "Not to my knowledge, no."*

Ms. Kara Slaten/the Claimant

The Claimant was aged 42 at the time of the hearing. She graduated from high school in 2002, in Norman, Arkansas. Also, the Claimant has some college, an EMT certification, a mine foreman certification, and phlebotomy certification. These are from past work experiences before her employment with Nidec. She confirmed that she is not currently employed. The Claimant admitted that she has not worked anywhere else since her job ended with Nidec. According to the Claimant, before she began working for Nidec, she worked at Peabody Energy, in Gillette,

Wyoming. The Claimant worked there for seven years. Her employment duties included dispatch, that of foreman and sometimes she ran equipment as foreman. She left Peabody because she wanted to move back home, to be closer to her family.

According to the Claimant, her overall health condition when she began working for Nedic was "excellent." However, the Claimant denied having to undergo a physical examination through the company prior to going to work for them. She confirmed that she underwent a company physical examination before going to work at Peabody. Prior to going to work at Nidec, the Claimant underwent a gastric bypass in May of 2024 and in 2015 she had a c-section. The Claimant specifically denied having had any prior problems with her back or hips when she went to work at Nidec.

The Claimant testified that she worked as a lamination technician. She confirmed that Nidec has a number of different shifts. The Claimant confirmed that at the time her accident occurred, she was working first shift, which was from 7:00 a.m. to 5:00 p.m. or from 5:00 a.m. to 3:30 p.m. The Claimant testified that her typical job tasks in lamination included: "My duties were to clear the racks so the machines, the notching machines, the operators would put the lam on a rack and I would clear those racks." According to the Claimant, Nidec builds electric motors. In terms of the part of the Claimant's particular employment duties, she testified that she was punching metal pieces, round places for stators and the inside of the motors.

Under further questioning, the Claimant gave the following description of her alleged injury of February 26, 2025:

> A. I was towards the back. We were moving some lam. I was moving it off of one of the pallets to another because it was overfull. And I was crouched down and picked up some pallets – some lam and felt the pop, heard the pop. I lost control of my hands and lam went everywhere.

According to the Claimant, the lam that she was in the process of moving from one pallet to the other, weighed around twenty pounds. The Claimant confirmed that when her injury occurred, she was crouched over with both knees bent over like a baseball catcher. Per the Claimant, when she picked up the lam off of the stack she experienced a pop in her back. She confirmed that there was more than one pallet. The Claimant explained:

> A. There is [sic] two pallets. They are only about an inch thick, just enough to get forklift tips underneath them. And there was [sic] two right next to each other and I was transferring from one pallet to the next pallet so it wouldn't dump on the forklift.

She testified that they were disposing of the pallets because they had been in storage for a very long time and they did not want them anymore. The Claimant testified that her work incident occurred around lunchtime. She testified that she felt "*extreme pain across her lower back and down her legs*." The Claimant explained that her muscles were going up and down and she felt tightness all over her back. Although the Claimant had pain down both sides, she testified that the *left side was worse*. She confirmed that James Ellsworth was working with her at that time. According to the Claimant, Mr. Ellsworth was standing right in front of her when the incident happened. She admitted that she did not report her incident to her supervisor, Shane Harder, because he was at lunch. However, the Claimant testified that she reported it to Teresa Hartley, the next person in line. She further testified that Ms. Hartley helped her to walk from the back of the plant to the front of the building. The Claimant confirmed that Ms. Hartley went with her to the first aid office. Once they arrived there, Sarah Townsend and Sam Norman came out of his office to see what was going on. According to the Claimant, Ms. Townsend put an Icy Hot patch on her back to see if that would help. The Claimant guessed that she was at the first aid station for an hour.

According to the Claimant, while at the nurse's station, there was some discussion about her seeing a doctor. Per the Claimant, she previously had a scheduled doctor's appointment to establish primary care to get blood work for her gastric bypass. The Claimant let management know about her appointment, which was later that day at 5 o'clock after work. Per the Claimant, they asked her if she wanted to leave work early and go home and see if that would help her. They also asked if she could see if her primary care physician would help her with the back pain and spasms.

The Claimant confirmed that she did see her primary care physician that afternoon. She denied that her doctor addressed any of her workers' compensation issues. According to the Claimant, the next morning, she went to the health and safety office and asked to see a doctor. They set her up to see a doctor at the clinic of Mena Medical Associates, under the care of Lori Fortner.

Next, the Claimant's attorney showed her a copy of Claimant's Exhibits at page 16, which is entitled Incident Report. She confirmed that she recognized this report, but she denied having prepared the document. The report identifies Shane Henry as being the Claimant's supervisor. The description portion of this document says, "Was moving rotator blanks from one pallet to another from a squatting position. Felt a pop when slightly twisting." The Claimant confirmed that this information was correct, except for the "twisting." She denied that she did any improper lifting that would have avoided her accident.

The Claimant confirmed that Ms. Fortner at Mena Medical Center examined her. She prescribed muscle relaxers and a shot. According to the Claimant, she followed back up with her on March 6 for a follow-up. She was put on light duty for a period. However, the Claimant's symptoms continued progressing as the week went on. At that time, she continued to have muscle

spasms and tenderness in her back. On the Claimant's second visit they ordered an MRI. However, the Claimant did not get the MRI until two months later and did not follow up with her for two months. According to the Claimant, at that time she had to have emergency surgery for the removal of her gallbladder. She also had to have an emergency internal hernia repair. The Claimant confirmed that this delayed her getting the MRI because she had to get re-approved from insurance. She further explained that they also wanted her to have the MRI procedure performed after her surgery.

Following the MRI, Ms. Fortner recommended that the Claimant be evaluated by a neurosurgeon. The Claimant was evaluated by Dr. Maggio at Legacy Spine Clinic in Little Rock. She initially underwent evaluation by Dr. Maggio on July 9, 2025. At that time, Dr. Maggio continued the Claimant on light duty. Also, Dr. Maggio continued the Claimant on her pain medication and muscle relaxers, along with at home physical therapy, and one more scan. She confirmed that at this point, workers' compensation was still paying for everything. The Claimant testified that they denied her claim after the first MRI. She confirmed that when she saw Dr. Maggio on July 9, 2025, she was recommending an epidural steroid injection. The Claimant admitted to using her medical insurance that she had obtained through Nidec.

She denied any prior problems with her back or legs before her February 26, 2025, injury. *The Claimant confirmed that she had some prior related events involving her back.* Per the Claimant, she pulled a muscle in her back in 2003. She denied getting an MRI or anything for her back. The Claimant testified that the event occurred while working for Bean Lumber. She gave the following description of her injury: "I was operating a sorter and it – I let one of the bins down and there was a wood rack on the chains and I straightened it out and when I did, it was a big piece of wood and I pulled a muscle trying to fix that." "In comparing her previous accident at Bean

Lumber with her current accident, the Claimant testified that she has never in her life felt anything like she did when she injured herself at Nidec. She testified that she went to the doctor only once for her prior accident. Her accident occurred in 2012.

The Claimant confirmed that she worked for Peabody from 2011 until 2013. She admitted that she had an incident that caused her to have some complaints of back pain while working for Peabody. According to the Claimant, she removed a haul truck "*chock*," and it caused her to have back pain. She explained that a haul *truck "chock" is* the device that stops the wheels from rolling. At the time of this incident, when she pulled the object, she felt something in her back. The Claimant testified that she reported the incident to the first aid office. She admitted to seeing a doctor twice for the incident. However, the Claimant admitted that she did not have any MRIs or anything because of that event. She confirmed that she was able to return to her job with no restrictions or limitations.

Per the Claimant, she had no other accidents relating to work until the current incident. However, she admitted she was in a car accident at the age of four or five. The Claimant denied receiving any medical treatment for the motor vehicle accident, but her parents did have her checked by a doctor. *According to the Claimant, she was bucked off a horse in 2010*. She admitted that this accident occurred prior to the time of her employment with the Peabody Energy. During this accident, *the Claimant fractured her hip in four places*. She denied having surgery due to this incident. *The Claimant testified that she was off work for seven weeks*. At that point, the Claimant returned to work with no physical restrictions or limitations. She admitted that she was also able to return to horseback riding.

The Claimant confirmed that when she went to work for Peabody in 2011, she had to undergo a physical examination before going to work for them. She further confirmed that she

was involved in an incident while working for Peabody Energy, but she later returned to work with no limitations or restrictions. The Claimant admitted that the last work-related event involving her back occurred in 2011 or 2012.

Regarding her work incident with Nidec, she had previously been under light duty work restrictions, for which they allowed her to return to work on light-duty. Once her claim was denied, the Claimant began treating under the care of Dr. Maggio. During the Claimant's first visit with Dr. Maggio on July 9, she continued her light duty work restrictions. These limitations included no bending, twisting, or lifting more than fifteen pounds. The Claimant admitted that she filed a document with HR entitled Reasonable Accommodation Request Form, which is at pages 55 and 56 of her exhibits. However, the Claimant denied that Nidec continued to accommodate her work restrictions. Instead, management told the Claimant to go home without pay. Since Nidec was unable to accommodate her light duty work status at that time and called her short-term disability company. The Claimant confirmed that her application for short-term disability benefits was denied and she was unsuccessful in being able to draw any of those benefits.

Subsequently, Nidec essentially terminated the Claimant due to her light duty work status. She testified that was covered under her health insurance until September 30, 2025. The Claimant stated that Bill Carmack (the head of HR) told her that she was terminated from Nidec. Per the Claimant, she was told by management that she was being terminated because of all the time she missed from work, which was not covered under the absenteeism policy. She confirmed that she lost her health insurance policy as well as the workers' compensation coverage, which created problems with her ability to follow up with Legacy and get the treatment she needed.

The Claimant confirmed that she was able to obtain Arkansas Medicaid insurance benefits, which enabled her to return to the care at Legacy Spine under Dr. Maggio. She confirmed that she

filed for unemployment benefits. The Claimant confirmed that she drew unemployment benefits in the amount of $972.00. According to the Claimant, she receives these benefits for 12 weeks at that rate of $73.00 per week. She admitted that she made efforts to find other employment opportunities after Nidec let her go. The Claimant insisted that she was trying to find something that would accommodate her light-duty restrictions. Per the Claimant, she looked for employment that would allow her to work from home. She also put in applications for work at a doctor's office and as a clerk at a feed store. The Claimant admitted that she applied for a position at Nidec before she was terminated, which was an office position. However, the Claimant was not selected for the position. According to the Claimant, they selected an outside candidate for the position.

The Claimant admitted that she tried to return to continued treatment at Legacy in September 2025. At that time, the Claimant maintained that her symptoms included intense muscle spasms, and pain. Her walking stride was shorter by this time, and she had pain on both sides and going down both legs but was worse on his left side. However, the Claimant agreed that this changed over time to some extent. By August 20, 2025, when the Claimant saw Dr. Maggio, she confirmed that the statement she wrote in her clinic note was correct. Specifically, Dr. Maggio wrote: "The patient does have significant axial and radicular type secondary to the significant disc/facet joint findings. Patient's radicular pain is severe." She admitted that she had an epidural steroid injection at Legacy. This injection was performed on September 11, 2025. The Claimant admitted that she got relief of her symptoms for a few days.

She confirmed that a new test called a SPECT-CT was ordered on September 24, 2025. Following this test, it was recommended that a different type of injection be performed, which was a SI joint injection on the side. Her first injection was performed on October 2, 2025. She admitted that she had IV sedation for the procedure. The Claimant confirmed that her symptoms improved

for a few days and then they returned. She admitted that on October 16, 2025, she was scheduled for a second injection, but she was involved in a motor vehicle accident on her way to the doctor's office. According to the Claimant she was a passenger in a vehicle when they were rear-ended on the way for her to get an injection. The Claimant denied that she had to seek any emergency room treatment as a result of that rear-end accident. According to the Claimant was able to undergo the injection on the same day as of the motor vehicle accident.

After her motor vehicle accident, the Claimant was able to undergo x-rays and an MRI. She denied that from her perspective*, the automobile accident in any way changed her symptoms from what she was already dealing with due to her work incident.* The Claimant maintained that she experienced a little bit more stiffness the next day, but it was not more than previously. Per the Claimant, in terms of her leg pain or any other of her symptoms, they did not change after the motor vehicle accident.

Regarding Dr. Maggio's records, at page120 of Claimant's Exhibit 1, she recommended an LSO brace for the Claimant's back. The Claimant confirmed that she was unable to get the brace because the workers' compensation carrier failed to approve payment for it. She also confirmed that she was unable to get the stimulator that she recommended. The Claimant admitted that she was able to undergo the left-sided SI fusion on November 7, 2025. Although there was some discussion of whether the fusion should be performed on the left versus the right, it was determined that she would have the left side done first because it was worse than the right side.

Since her surgery, the Claimant has had a new MRI. The Claimant admitted that she started receiving treatment outside of Legacy under the care of Dr. Mike Adams, at the Arkansas Pain Therapy Clinic. Per the Claimant, Dr. Maggio recommended him. The Claimant has seen Dr. Adams for four visits. He prescribed medications in the form of Hydrocodone, Pregabalin,

Amitriptyline, and a Toradol injection. These medications are being paid for through Medicaid. According to the Claimant, these medications have provided some relief of her symptoms and made her pain more manageable. However, the Claimant testified that they have not helped with the relief of her muscle spasms. She confirmed that she expects the right sided fusion to be scheduled. The Claimant admitted that they are surviving financially via the support of her husband. She agreed that she continues to look for work within her restrictions referenced earlier. The Claimant testified that she believes Nidec should be responsible for all her medical treatment and pay her temporary total disability benefits because she did not have any issues with her back prior to February 26, 2025, and she did not have to take medication for her back until then.

On cross-examination, the Claimant confirmed that the Respondents took her deposition in November 2025, at her attorney's office. She admitted that she drove from Mena to Texarkana which is a little over two hours. The Claimant admitted to driving to the hearing. She graduated from high school in 2002. According to the Claimant's resume, she received some training while in high school in protective equipment training, and introductory to firefighting and as a first responder. She did some courses in 2002 through Arkansas Forestry Commission pertaining to land suppression training and auto extrication. Then in 2004, the Claimant received emergency driving and hazardous material handling training. She underwent phlebotomist training in 2017 and received her certification in 2021. The Claimant attended some courses in Wyoming Mine Foreman training in 2020. This training permitted her to be able to run a coal mine. The Claimant went on to explain other general studies that she has attended. (Tr. 55)

Under further questioning, the Claimant admitted that she is not a medical doctor nor is she a neurosurgeon. She admitted that she lived in Texas for a period of time and actually worked at the sheriff's office as a dispatcher. Her job at Bean Lumber Company entailed that of a sorter.

She also worked at Ken Borden's Ranch as a farmhand for approximately three years. The Claimant previously worked at Terminix as a termite inspector and as a pest control worker. She confirmed that when she moved to Wyoming, she worked for Securitas Security for a period of time. The Claimant also drove a haul truck for several different companies, one of which was Dennis McCoy. She also worked in that same capacity for Black Thunder Mine, and then she worked for Peabody Entergy. The Claimant admitted that she worked at a power service company and built pumps for the oilfield for a period of time. Following this, the Claimant worked as a sales associate at Shoe Carnival.

While working for Peabody Entergy, the Claimant worked in dispatch. The Claimant confirmed that in dispatch she logistically moved equipment and watched computers so that product could be placed according to requirements for the particular client. She moved back to Arkansas in 2024. *The Claimant admitted that she injured her back while working at Bean Lumber, for which she filed a workers' compensation claim*. She also hit her head on a steering wheel while working for Dennis McCoy and had a concussion. The Claimant admitted that she filed a workers' compensation claim for that injury. She *further admitted that she injured her back working at Peabody Entergy when she bent over to pick up a chock from underneath a haul truck tire and it was stuck when she pulled it, but she denied a pop in her back at that time*. The Claimant agreed that the chock weighed 10 to 15 pounds. She agreed that she had another work-related injury when she tore a part of her right bicep. The Claimant explained that she had a micro tear for which they put her on light duty. *She described that it was a little difficult for her to do some lifting until the tear healed. The Claimant confirmed that she fractured her hip in four places.* When she returned to Arkansas, she started to work for Nidec on December 2, 2024. She began working as a lamination technician.

At the time of her event, the Claimant again confirmed that she had worked at Nidec for over three months. Her alleged incident occurred around lunchtime on February 26, 2025. Regarding the Claimant's deposition testimony about the sheets of aluminum that she was working with when her incident occurred, she confirmed that they are 33 millimeters thick, which she admitted are a little bit thicker than a piece of paper. The Claimant further admitted that in most cases, she was required to lift a singular sheet of lam, which is certainly not heavy. *She confirmed that she would have to lift quite a few sheets in order to get the equivalent of twenty pounds as she described.*

On the day of the incident, when the Claimant left work, she already had a doctor's appointment planned with her new PCP, Dr. Jumper. The Claimant was going to have labs drawn due to continuing pain with her gallbladder. She admitted that she went to the ER at Mena Medical Center due to similar complaints with her gallbladder on February 20, just six days before her work-related incident.

The Claimant verified that after her event, Nidec provided her with modified work activities. However, Nidec stopped the Claimant's light duty work on July 14, 2025. She confirmed that during that same time, she was having abdominal pains and gallbladder issues, and she ended up having three different surgeries. Specifically, the Claimant explained that she had two surgeries and a separate gallbladder surgery. Her first hernia surgery was in March, for which she was off work for four weeks. She stated that eight days later after her first hernia surgery, she had her gallbladder removed. The Claimant's second hernia surgery in August resulted in her being off work for another four weeks.

During the time that the Claimant was performing the modified work and until when it ended on July 14, 2025, she was receiving regular wages if she clocked in. She confirmed that

when she applied for unemployment benefits, she was required to make five job contacts a week. The Claimant confirmed that in order for her to receive unemployment benefits, she had to say that she was "ready, willing, and able to work." However, the Claimant maintained that she explained to them that she had physical restrictions. She confirmed that she does not have any problems reading or writing. The Claimant admitted that she has a computer at home, and she is proficient and knows how to type. On an average day, before her first surgery, the Claimant testified that she was able to do laundry, dishes, clean house, sweep, and mop. However, the Claimant confirmed that her limitations placed on her by her doctors following her first surgery continues to restrict her from doing these household tasks. She admitted that she is able to drive. The Claimant further admitted that she did not qualify for FMLA because she did not have enough time in on the job due to her not being employed there over a year. She admitted that she started working for Nidec on December 4 and had been there a little over two months when her injury occurred.

Her initial MRI was done on May 9, 2025, which was ordered by Dr. Fortner. At the point that the Claimant saw Dr. Maggio for the first time was on June 5. The Claimant admitted that Dr. Maggio performed a physical examination on her at that time. Next, the Claimant was shown a copy of Dr. Maggio's clinic note at page 45 of Claimant's exhibit, which states that the Claimant *denied any burning, weakness, tingling, or numbness.* Her reply was that she did not have any symptoms at that time. She confirmed that the medical records correctly show that she first mentioned these new symptoms on July 3, 2025, in a progress note authored by David Koppein, NP.

The Claimant confirmed that when she saw Dr. Maggio in an office visit of August 2025, she denied burning, weakness, tingling, or numbness. However, she explained that these issues

would "come and go." She maintained that she could not recall if it was on September 18, 2025, when she saw Dr. Maggio, she denied having any of those symptoms. The Claimant agreed that the surgery she underwent was in the form of an SI joint fusion. She denied that surgery had not been referenced by any of the physicians throughout her care until the time they were recommending surgery. The Claimant denied that prior to her surgery on January 13, 2026, it was the focus of any of her medical providers at that point.

She denied knowing whether anterolisthesis is a slippage caused by a degenerative condition at the L4-5. The Claimant confirmed she had pelvic x-rays done. According to the Claimant, Dr. Maggio did not *inform her that the x-rays showed bilateral SI joint degenerative changes*. The Claimant admitted that she was informed that the subsequent February 6, 2026, MRI that was done also showed demonstrated degenerative disease. The Claimant was not aware that the pelvic x-rays done on the same day indicated that there were *some joint degenerative changes at the SI joint*. *These x-rays further revealed that there was no evidence of pelvic fractures and no evidence of hip joint arthritis.* She specifically denied that Dr. Maggio described these medical findings to her. The Claimant admitted that these findings are at the same level that her back surgery was done.

MEDICAL EVIDENCE

On February 20, 2025, the Claimant presented to the Mena Regional Emergency Department due to a primary complaint of upper abdomen. She also had nausea and vomiting, which occurred only once. Dr. Darin L. Swonger's clinical impression was "Acute food sensitivity gastroenteritis." She was discharged from home with instructions to follow up with her healthcare provider.

The Claimant was seen at Healthy Connections on February 26, 2025, to establish primary care for her abdominal pain. At that time, the Claimant was assessed with: "Right upper quadrant pain," by Lindy Jumper, APRN. According to this report, the Claimant seemed to be in moderate pain.

Also, on February 26, 2025, Juanita Coleman, a claim professional, for Nidec filled out a Workers' Compensation First Report of Injury, after being notified by the Claimant that she had injured her lower back area/lumbar while working that day. Per this report, the Claimant squatted down to move a part over and when she went to move it, she felt a pop in her lower back.

The Claimant presented to Mena Medical Associates due to her alleged incident of having bent down and felt pop in her back on February 27, 2025. APRN Jumper stated in clinic notes that the Claimant's pain was in her lower back. The severity of the Claimant's pain was moderate. She reported that the nature of her pain was constant with radiation into her hips. At that time, the Claimant was assessed with "1. Acute low back pain with left side sciatica, unspecified back pain laterality. 2. Work related injury. 3. Strain of lumbar region, initial encounter." During this visit, Jumper administered to the Claimant therapeutic injections which included Decadron 4mg, Depomedrol 80 mg; and Toradol 60 mg. She instructed the Claimant to avoid heavy lifting to prevent further injury and to follow up with her in a week.

X-rays taken of the Claimant's lumbar spine on February 27, 2025, with an impression of:

1. Diffuse degenerative facet joint disease.
2. Grade 1 retrolisthesis of L2 and L3.
3. Mild degenerative disc disease at L2-L3.

The Claimant returned to Mena Medical Associates for follow up evaluation of her continuing back pain on March 6, 2025. A Progress Note authored by Lori Fortner, APRN. At that time, Nurse Fortner's assessments were: "1. Retrolisthesis of vertebrae – M43.10 (Primary)

2. Work related injury – y 90. 3. Acute low back pain with left-sided sciatica, unspecified back pain laterality – M54-42. Fortner's treatment plan for these conditions included a medication regimen of Hydrocodone for pain and a Medrol Pack. She also ordered an MRI WITHOUT CONTRAST of the Claimant's lumbar spine.

On May 6, 2025, the Claimant presented to Healthy Connections for a scheduled visit due to bariatric surgery status monitoring. This condition is unrelated to her workers' compensation claim.

An MRI of the Claimant's lumbar spine was done on May 9, 2025, with an impression of:

> 1. Multilevel degenerative disk disease and facet arthropathy of the lumbar spine, with spinal canal and neural foraminal findings as above. Recommend correlation with patient's symptoms.
>
> 2. T2 hyperintense lesions are suggested righting from the kidneys, right greater than left, nonspecific and not characterized on this exam. Recommend obtaining dedicated abdominal imaging for evaluation, such as CT abdomen/pelvis. Recommend correlation with patient history and prior imaging.

On May 13, 2025, the Claimant presented again to Mena Medical Associates due to ongoing lower pain in the back. The severity of the pain was moderate, and the nature of the pain was constant radiation into her left leg. Per this Progress Note, authored by Nurse Fortner, the Claimant's lumbar MRI showed straightening of the lumbar with multiple levels degenerative disc disease and facet arthropathy. At that time, the Claimant was assessed with "a bulging lumbar disc and retrolisthesis of the vertebrae." Due to the abnormal imaging and ongoing pain, the Claimant was referred to a neurosurgeon for further evaluation. At that time, the Claimant was placed on light duty restrictions until she could be evaluated by a specialist.

The Claimant was evaluated by Dr. Scott Schlesinger on June 5, 2025, due to low back pain. She denied any burring, tingling, or weakness. She rated the pain at its lowest to be a three and a five on average and at its worst at an eight on a day with activities. The Claimant reported

to Dr. Schlesinger that in February 2025 she was involved in a work incident when she leaned down to lift something she hear a loud pop, and lost function of her legs and hands. At that time, the Claimant reported that she had an ache that radiated from his lower back into the left hip buttock.

An opinion was rendered on June 19, 2025, regarding the MRI of the lumbar spine. The following consultative report is an aging request based on the initial interpretation. It is meant to be utilized or interpreted for treatment purposes of the Claimant. The reading radiologist was Dr. *Scott Preusen: "I concur with the primary reader's findings of multilevel degenerative disc disease and facet arthropathy throughout the lumbar spine resulting in spinal canal and neural foraminal stenosis. The primary reader also described T2 hyperintense lesions in the kidneys with appear chronic." He further concluded that that the above findings on this exam appeared to be chronic.*

Per a Progress Note dated July 3, 2025, the Claimant presented to Mena Medical Associates and was evaluated by David Koppein, NP. At that time, the Claimant's assessments remained the same. She continued to complain of ongoing pain in her lumbar spine, going down into both legs. According to these notes, Nurse Koppein stated that it appeared that the Claimant had new numbness and tingling in her right thigh. The Claimant rated her pain a 6-7 on a pain scale of 10. Her pain was constant and sharp with radiation into her left hip. She reported that she had not seen a neurosurgeon yet.

On July 9, 2025, the Claimant presented to Legacy Spine Clinic for evaluation by Dr. Dominic Maggio due to her ongoing low back pain. *The Claimant denied any burning, weakness, tingling or numbness.* She reported that her pain at a 6/10 at that time. *She stated that her injury on the job in February of 2025 occurred when she leaned down to lift something and heard a loud pop and had lost function in her legs and hands.* She reported that she had an ache that radiated

from her lower back into the left hip and buttock. Dr. Maggio planned to obtain lumbar spine radiographs with the Claimant in a standing position with flexion and extension views. A decision was made to proceed with an L4-5 interlaminar epidural steroid injection. If this failed to give the Claimant significant relief then they would go ahead with a bilateral SI joint injection.

A Chart Note was authored on August 20, 2025, at Legacy under the care of Dr. Maggio's APN, Caroline Tingquist, due to her workplace incident involving her ongoing lower back pain. This medical visit was performed via telehealth and therefore a physical exam was not performed. *However, during this visit, the Claimant reported to Dr. Maggio a prolonged history of severe lower back pain radiating to the bilateral hip, buttock, and lower extremity* that occurred since sustaining her workplace injury. She denied any significant issues prior to this. The Claimant also reported that the left side was more severely affected than the right. She denied any burning weakness, tingling, or numbness. She rated her pain as a 6/10 on average and up to 8/10 with activities of daily living. Her diagnoses included "1. Radiculopathy, lumber region (M54.16). 2. Radiculopathy, lumbosacral region (M54.17). 3. Radiculopathy, sacral and sacrococcygeal region. (54.18). The Claimant's plan of care included the decision to proceed with the LESI at L4-5 with follow up with Dr. Maggio via telehealth after this procedure. It is that the Claimant has significant axial and radicular type pain secondary to the significant disc facet joint findings on the patient's imaging that are correlative with the clinical history/exam. Per a Work Note authored by Dr. Maggio on that same day (August 20), she continued the Claimant's light duty restrictions.

The Claimant underwent a lumbar steroid injection at L4/5 on September 11, 2025, by Dr. Daniel Judkins due to a diagnosis of lumbar radiculopathy.

On September 18, 2025, a decision was made to obtain SPECT CT of the Claimant's lumbar spine. After the Claimant reported to Dr. Maggio during a telemedicine consultation that the epidural steroid injection provided her with relief of her symptoms for four days.

The Claimant underwent a bone scan on September 24, 2024. This diagnostic study showed a normal impression.

On October 2, 2025, the Claimant underwent a "Sacroiliac Joint Injection at Legacy Surgery Center bilaterally due to a pre and post procedure diagnosis of "Sacroiliitis. This procedure was performed by Dr. Judkins.

The Claimant returned to Dr. Maggio's PA-C, Patrick Ellis, on October 7, 2025, with continued a second SI joint injection. She stated that her pain returned after the above injection, but she wanted to proceed with the next injection. Her light duty restrictions were continued.

On October 16, 2025, the Claimant underwent a Sacroiliac Joint Injection, bilaterally. She tolerated the procedure well.

The Claimant was seen for an office visit at Legacy on November 1, 2025, due to complaints of continuing lower back pain radiating to the bilateral hip and buttock. The injection did not provide her with any relief and she had continuous pain. *The Claimant reported being involved in a motor vehicle accident prior to her injection. Specifically, the Claimant reported that the accident exacerbated her symptoms. Her pain had returned and it was a 7 out of ten. Additionally, the Claimant was reporting cramping on the outside of her left leg. She had numbness that traveled along a posterior and anterior distributions of her right lower extremity. The Claimant was interested in proceeding with more permanent options which included surgery. Because the Claimant had been involved in a motor vehicle accident,* Ellis, PA-C, decided that in order to evaluate her complaints and due to the elapsed time since prior imaging as well as the

most recent motor vehicle accident, she needed to obtain an MRI of the Claimant's lumbar spine to rule out any structural abnormalities including lumbar stenosis, as well as for planning purposes. Ellis stated that she would also obtain x-rays of her lumbar spine. Once these had been obtained Ellis stated that the Claimant would then follow up with Dr. Maggio. Specifically, Ellis wrote "Although the accident or injury may or may not have caused any radiological changes, I do feel that if the patient history is accurate the symptoms started with the accident, then there is a greater than 51% chance that the accident did in fact cause the symptoms and was therefore the cause of the recommended treatment.

An MRI of the Claimant's lumbar spine was performed on October 29, 2025, with the following CONCLUSION being rendered by Dr. Andrew Finkbeiner: "Shallow broad-based disc bulge with left foraminal protrusion and *severe facet hypertrophy* at the L4-5 level with abutment of the existing left L4 nerve abutment of bilateral descending L5 nerves. There is a C-shaped curvature of the lumbar spine with the main convexity to the left side nerves. This is a C-shaped curvature of the lumbar spine with the convexity to the left side."

On November 7, 2025, the Claimant was seen at Legacy for following up of her x-rays and lumber MRI obtained on October 29. The Claimant reported that her medications were providing only temporary relief. A decision was made to order the Claimant an LSO brace to manage the patient's segmental instability, deformity and or fracture and to reduce lumbar sacral pain sciatica by restricting mobility of the trunk `and for support of weak spinal muscles. Dr. Maggio stated the following: Lumbar spine MRI 10/29/25 demonstrate degenerative changes. Of note, at l4-5 there is subtle anterolisthesis. There is moderate bilateral neural foraminal stenosis. There is bilateral facet arthropathy. No other areas of significant central canal or neuroforaminal stenosis. There is preserved lumbar lordosis. Dr. Maggio noted: "The x-rays showed a grade 1 anterolisthesis at L4-

6 with subtle movement between flexion and extension views. No other areas of spondylolisthesis or dynamic instability. There is a subtle levoscoliosis with apex at the L2-4-disc space. A decision was made to proceed with a left sided SI fusion."

The Claimant underwent lumbar surgery by Dr. Maggio on January 13, 2026. Dr. Maggio authored an Operative Note on that same:

Pre-operative Diagnosis: Left Sacroiliac joint dysfunction.

Post-Operative Diagnosis: Same

Procedure Performed:

1) Sacroiliac Joint arthrodesis with instrumentation with Spinal Simplicity Liberty set, left.
2) Use of intraoperative fluoroscopy.

On January 16, 2025, the Claimant presented to Legacy and was evaluated by Koppein, NP. At that time, she complained of numbness in the anterior aspect of her right leg, in her thigh and her shin. She also had tingling in her feet. The Claimant stated that the numbness was intermittent, but she had been present the night of surgery.

The Claimant underwent an MRI of her lumbar spine February 6, 2026, with the following Conclusion: "Findings are similar to a prior examination with a broad-based disc bulge and posterior annular tear at the L2-3 level with abutment of bilateral descending L3 nerves. There is left foraminal protrusion at the L4-5 level abutment of the exiting left L4 nerve."

On February 9, 2026, the Claimant was seen at Legacy under the care of Dr. Maggio due to ongoing complaints related to her lumbar spine. Ellis noted that at the L4-5 there was subtle anterolisthesis. There was moderate bilateral neural foraminal stenosis. A decision was made to proceed with a right sided L4-5 transformational epidural steroid injection. She complained of significant back pain that radiated down to her right lower extremity.

The Claimant came under the care of Dr. Micheal Adams on February 10, 2026, due to low back pain. She was evaluated for chronic pain and management. Dr. Adams continues to monitor the Claimant chronic pain symptoms due to "intervertebral disc disorders with radiculopathy, lumbosacral region and chronic pain syndrome," with a medication regimen which includes opiates and Pregabalin.

ADJUDICATION

Compensability

The Claimant contends that she sustained injuries to her back and pelvis, on February 26, 2025, during and in the course of her employment with Nidec.

In order to prove a compensable injury as the result of a specific incident that is identifiable by time and place of occurrence, a Claimant must establish by a preponderance of the evidence (1) an injury arising out of and in the course of employment; (2) 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 establishing an injury; and (4) the injury was caused by a specific incident identifiable by time and place of occurrence.

A compensable injury must also be established by medical evidence supported by objective findings. Ark. Code Ann. § 11-9-102(4)(D) (Repl. 2012). "Objective findings" are those findings which cannot come under the voluntary control of the patient. Ark. Code Ann. §11-9-102(16)(A)(i) (Repl. 2012).

The Claimant's burden of proof shall be a preponderance of the evidence. Ark. Code Ann.§ 11-9-102 (4)(E)(i) (Repl. 2012).

Preponderance of the evidence means the evidence having greater weight or convincing force. *Metropolitan Nat'l Bank v. La Sher Oil Co*., 81 Ark. App. 269, 101 S.W. 3d 252 (2003).

After reviewing the evidence in this case impartially, without giving the benefit of the doubt to either party, I find that the Claimant failed to prove by a preponderance of the credible evidence that she sustained compensable injuries to her back and pelvis during the alleged February 26, 2025, work-related incident. Following this incident, medical professionals noted that the Claimant muscle spasms for which medication was prescribed. Her testimony confirms the same.

In the case at bar, I find that the Claimant sustained, at best, a minor injury to her back and pelvis that had resolved at the point of conversion by the Respondents.

Therefore, in dispute is the crucial issue of the Claimant's specifically alleged more serious injuries to her back and pelvis for which she sought medical treatment on her own primarily under the care of Dr. Maggio.

The Claimant maintains that she sustained more serious injuries to her back and pelvis while lifting a sheet of aluminum. Although the Respondents accepted the claim as a compensable claim and paid some medical benefits, they have now controverted the claim in its entirety.

In the instant case, the Claimant was seen been treated primarily by Dr. Maggio since the claim was controverted. She has undergone extensive conservative treatment in the form of home exercises, LESI injections, and a medication regimen. The Claimant has undergone x-rays and lumbar spine MRIs. All of these diagnostic tests revealed extensive and significant pre-existing degenerative joint disease of the lumbar spine. While I am well aware that this is not a bar to a claim. It is well-established in workers' compensation law that the employer takes the employee as she finds her. *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).

The evidence in this case before me do not bear out to prove by a preponderance of evidence that the Claimant's employment aggravated, accelerated, or combined with the disease or infirmity to produce the disability for which compensation is sought. I realize that surgery was already indicated, however the Claimant reported to her medical providers that her symptoms were increased by the accident and they changed. However, the Claimant denied during her hearing testimony that the MVA changed her symptoms.

Therefore, when considering the totality of the evidence, I am unable to find that the Claimant's alleged incident of February 26, 2025, caused her symptoms and resulted in her need for further medical treatment. The mechanism of injury alleged by the Claimant was not sufficient in force/twisting type nor was she lifting any significant weight to result in the symptoms and lead to the need for surgical intervention that the Claimant had to undergo. All the objective medical findings are degenerative in nature with no evidence of a new injury to her back and pelvis. The Claimant has had prior injuries to her back and pelvis. Most notably, the Claimant had previously injured her back during a work-related incident with a prior company that also resulted in a tear. In 2012 the Claimant sustained significant injuries to her back and pelvis when she was thrown from a horse. Moreover, it is also noted that the Claimant was involved in a motor vehicle accident/ MVA wherein she was a passenger in vehicle that was rear ended in October 2025. This incident

occurred right before one of her scheduled injections. Following this MVA, the Claimant's lumbar spine symptoms changed, and she ultimately underwent surgical intervention by Dr. Maggio. I am unable to give any weight to the opinion by Dr. Maggio's nurse on causation since it is unclear which accident she is referring to in her clinic notes. However, the radiologist attributed the Claimant's symptoms and need for treatment to her pre-existing degenerative condition. I have assigned significant weight to this expert opinion. There are no expert opinions to the contrary.

I did not find the Claimant's testimony to be credible, nor was the testimony of her one witness very convincing. Nevertheless, the Claimant's testimony concerning her symptoms are inconsistent with the medical records. She denied that her injury was caused by a *twisting mechanism* during her testimony on direct examination while the report of the injury shows otherwise. The Claimant suffered significant pre-existing degenerative disc disease to her back and pelvis. She had also sustained prior serious injuries to her back and pelvis. In order for me to conclude that the Claimant's alleged incident of February 26, led to her symptoms and ultimate need for surgery would require me to engage in an impermissible amount of speculation. Conjecture and speculation, however plausible, cannot be permitted to supply the place of proof. *Dena Construction Company v. Herndon*, 264 Ark. 791, 575 S.W. 2d 155 (1979).

Under these circumstances, I find that the Claimant has failed to prove by a preponderance of the evidence that she sustained compensable injuries to her back and pelvis on February 26, 2025, while performing her employment duties for Nidec. All other remaining issues have been rendered moot and not discussed in this Opinion. This claim is respectfully denied and dismissed in its entirety.

ORDER

The Claimant failed to prove by a preponderance of the credible evidence that she sustained compensable injuries to her back and pelvis while working for the respondent-employer/Nidec on February 26, 2025. Her minor injury resulting due her work incident in the form of muscle spasms resolved at the point of conversion by the Respondents. All remaining issues have been rendered moot. Accordingly, this claim must be respectfully denied and dismissed in its entirety.

IT IS SO ORDERED.

CHANDRA L. BLACK
ADMINISTRATIVE LAW JUDGE