



**TENNESSEE BUREAU OF WORKERS' COMPENSATION
IN THE COURT OF WORKERS' COMPENSATION CLAIMS
AT JACKSON**

WALTER McKIM,)	Docket No. 2022-07-0215
Employee,)	
v.)	
STANSELL ELECTRIC CO., INC.,)	State File No. 45805-2020
Employer,)	
And)	
BRIDGEFIELD CAS. INS. CO.,)	Judge Allen Phillips
Carrier.)	

EXPEDITED HEARING ORDER

At an Expedited Hearing on November 29, 2022, Mr. McKim asked for additional medical and temporary disability benefits and a twenty-five percent penalty on the unpaid temporary disability benefits. He also asked the Court to refer Stansell to the Compliance Program to consider assessing a civil penalty. For the following reasons, the Court awards the requested benefits and refers Stansell to the Compliance Program but declines to award the twenty-five percent penalty.

Facts

On July 21, 2020, Mr. McKim injured his left shoulder and neck when lifting a heavy electrical panel. Stansell did not contest the incident. After the first medical provider recommended an orthopedic evaluation, Stansell gave Mr. McKim a panel. He chose Dr. James Weisman, who surgically repaired a left-shoulder impingement.

Dr. Weisman either completely or severely restricted Mr. McKim from working from October 2020 until he placed him at maximum medical improvement on January 25, 2022 and rated the shoulder injury. Stansell paid Mr. McKim temporary disability benefits for the entire period he was off work, and it continued payments through March 15, 2022, at the weekly rate of \$693.33.

While Dr. Wiseman treated his shoulder, Mr. McKim continuously complained of neck pain, so he recommended that he see a neurosurgeon. Dr. Weisman also recommended pain management. Stansell gave Mr. McKim panels in both specialties.

Stansell scheduled an appointment with the selected pain management physician, Dr. John Nwofia, for September 21, 2021. Mr. McKim did not appear. The clinic called it a “no show”; Mr. McKim blamed a lack of transportation.

On September 27, 2021, Mr. McKim saw neurosurgeon Dr. Margaret MacGregor, who diagnosed cervical radiculopathy. She sent Mr. McKim for neck x-rays and an EMG that showed degenerative changes and non-work related left carpal tunnel syndrome. Afterward, Dr. MacGregor maintained her diagnosis of radiculopathy and said it was work-related.

In December 2021, Dr. MacGregor said Mr. McKim’s complaints of pain and limited motion in his neck “had not changed in location since the time of his injury,” and she too recommended pain management. Mr. McKim said that over the next several months, Stansell did not schedule another pain management appointment despite his requests.

In April 2022, Dr. MacGregor noted Mr. McKim’s continued complaints of neck and shoulder pain and recommended a diagnostic steroid injection to determine if his pain had a “cervical component.” She also thought Mr. McKim should return to Dr. Weisman for an assessment of the shoulder and said she would “resend the referral to pain management.”

Mr. McKim had the injection in May and said it helped when he saw Dr. MacGregor again in August. Dr. MacGregor called his pain complaints “classic discogenic type cervical pain” and again said his complaints were the same as those at the time of his injury. She noted he had not seen pain management. Dr. MacGregor also wrote that Mr. McKim was off work, and he did not feel he could return. She said nothing regarding his work status, and her notes contain only one undated off-work slip that reads “maintain present work restrictions.”

Mr. McKim testified he repeatedly requested pain management to no avail until Stansell scheduled another appointment for September 22, 2022. Again, Mr. McKim did not attend, again citing a lack of transportation. Stansell reset the appointment for September 28. Mr. McKim went to the appointment but did not give a urine sample and told clinic staff that he had to leave. The provider wrote: “This is the third time he has had an appointment scheduled and has not been seen.” Mr. McKim explained that he asked to use the restroom upon arrival at the clinic, and afterward was unable to produce a sample. He also said the person driving him to the appointment had to leave and he could not wait for the doctor.

Mr. McKim additionally said he repeatedly asked Stansell for another appointment with Dr. Weisman. However, that did not occur until August 30, and then Dr. Weisman called the visit an “Independent Medical Evaluation” at Stansell’s request. Stansell said it did not know why Dr. Weisman called it an independent evaluation, but the doctor noted Stansell “put forward” several questions before the visit. Regardless, Dr. Weisman summarized the treatment he had given Mr. McKim, performed an examination, and answered Stansell’s questions.

As relevant here, Dr. Weisman said that the rating he gave Mr. McKim was for the shoulder injury only, not the neck injury. He noted Mr. McKim “did not have significant problems” with his neck before the work incident, so he believed the injury was work-related. He also again recommended pain management because: “Mr. McKim still complains of symptoms that are cervical radiculopathy like and is still having pain 2+ years post his workman’s [sic] comp injury. It is certainly plausible, appropriate, necessary, and medically indicated for Mr. McKim to be evaluated by a pain management specialist.”

Mr. McKim also obtained medical opinions via two questionnaires sent to Dr. MacGregor. First, in August 2022, Dr. MacGregor answered yes to Mr. McKim’s question as to whether his neck injury “precludes him from working from your first date of treatment, 9/27/21, to the present?” Second, in October, she again answered yes when asked if Mr. McKim is “still precluded from working.”¹ In both questionnaires, Dr. MacGregor responded that Mr. McKim’s neck injury arose primarily out of his employment.

At the hearing, Mr. McKim testified that his pain is unchanged since the time of injury. He said he has not worked since leaving Stansell and still does not think he can. He said he heard nothing from Stansell regarding return appointments with any of the authorized physicians but wants to return to all three. In addition to medical treatment, he wanted Stansell to pay outstanding mileage for the visits he has already made to authorized physicians.

Based on Dr. MacGregor’s opinions, he asked for an accrued award of temporary total disability benefits from March 15 to the present, and ongoing benefits until he reaches maximum medical improvement or is released to return to work. He also asked the Court to penalize Stansell twenty-five percent for untimely payment of temporary disability

¹ Stansell filed a motion in limine seeking exclusion of both questionnaires on grounds of hearsay and improper authentication. Stansell also argued that the questionnaires did not fit the definition of admissible letters or written statements addressing medical causation under Tennessee Compilation Rules and Regulations 0800-02-21-.15(2) (February, 2022). The Court overruled the motion and accepted the questionnaires into evidence. The parties also asked that the Court allow the late filing of Dr. MacGregor’s deposition transcript, and the Court agreed. However, Mr. McKim opted not to depose Dr. MacGregor, and neither did Stansell.

benefits under Tennessee Code Annotated section 50-6-205(b)(3) and to “make any penalty referrals it deems appropriate.”

Stansell countered that it met its obligation to furnish medical treatment by offering three panels of doctors. However, it said Mr. McKim failed to either attend appointments or accept the pain management treatment offered. It also argued Dr. MacGregor was no longer an authorized physician after she made the pain management referral.

As to temporary disability, Stansell first contended that Mr. McKim should be considered at maximum medical improvement for both his shoulder and neck injuries when Dr. Weisman released him. It argued Dr. MacGregor only treated him for pain, and he was conclusively presumed at maximum medical improvement when Dr. Weisman’s actual treatment stopped.

Second, Stansell argued it did not owe benefits because Dr. MacGregor never gave it timely medical reports containing work restrictions in violation of Tennessee Compilation Rules and Regulations 0800-02-17-.15(1) (September, 2021). It also points out that none of Dr. MacGregor’s notes includes work restrictions until the questionnaires sent to her by Mr. McKim. Stansell argued these were inadmissible under Tennessee Rules of Evidence 703 because Dr. MacGregor’s opinions “cannot be trusted,” as she did not address Mr. McKim’s work status in her notes. Stansell further argued that Dr. MacGregor’s opinions were suspect because they were generated in anticipation of litigation.

Third, Stansell argued that Mr. McKim cannot recover temporary disability benefits under Tennessee Code Annotated section 50-6-204(d)(7)(2022), which states that an injured employee’s right to compensation is suspended while the employee refuses to accept the medical services offered. Stansell said Mr. McKim’s failure to attend the first two appointments with Dr. Nwofia and his failure to cooperate with treatment at a third means he “has continuously been noncompliant with pain management from September 21, 2021 to the present.”

Finally, Stansell asked for a credit in the amount of benefits it paid after Dr. Weisman placed Mr. McKim at maximum medical improvement on January 25.

Stansell agreed to reimburse Mr. McKim for mileage expenses he incurred in traveling to authorized medical appointments. Additionally, the parties stipulated to a wage statement, payroll records and a list of temporary disability payments made by Stansell. However, Mr. McKim argued Stansell miscalculated the compensation rate by dividing his total earnings by too many weeks.

Findings of Fact and Conclusions of Law

At this Expedited Hearing, Mr. McKim must show he would likely prevail at a hearing on the merits. Tenn. Code Ann. § 50-6-239(d)(1).

Medical benefits

Under Tennessee Code Annotated section 50-6-204(a)(1)(A), Stansell must furnish Mr. McKim medical benefits made reasonably necessary by his work injury. Here, it furnished medical treatment from Drs. Weisman and MacGregor as required, but it has not furnished return appointments, as Mr. McKim has requested. That is noncompliant with the law.

Stansell agreed Dr. Weisman is an authorized physician, and the Court finds no basis to deny a return appointment with him. Thus, Stansell must approve a return appointment with him.

Likewise, the Court rejects Stansell's argument that Dr. MacGregor lost the status of an authorized physician after referring Mr. McKim for pain management. An authorized physician remains an authorized treating physician even after making a referral to pain management. *Endsley v. Benchmark Contractors, LLC*, 2017 TN Wrk. Comp. App. Bd. LEXIS 47, at *6-7 (Aug. 11, 2017). So, the Court holds that Dr. MacGregor remains an authorized treating physician and orders Stansell to approve an appointment.

Turning to pain management, Dr. Weisman stated: "It is certainly plausible, appropriate, necessary, and medically indicated for Mr. McKim to be evaluated by a pain management specialist." The doctor said this in context of Mr. McKim's neck pain, rather than his shoulder, lending credence not only to a return to pain management but also a return to Dr. MacGregor.

Further, Mr. McKim offered valid excuses for missing the first two pain management appointments, namely a lack of transportation. This is plausible since he has had no income after Stansell stopped paying temporary disability benefits. The same holds true for the third visit, when Mr. McKim explained he left before being seen because the person driving him to the appointment needed to leave.

Thus, the Court orders Stansell to schedule Mr. McKim another appointment with Dr. Nwofia, the authorized pain management physician.

Penalty referral for untimely provision of medical benefits

Under Tennessee Code Annotated section 50-6-118(8), an employer might be penalized for failing "to timely provide medical treatment made reasonably necessary by

the accident and recommended by the authorized treating physician or operating physician.” Here, Stansell knew Dr. MacGregor referred Mr. McKim for pain management a second time in April 2022 but did not schedule an appointment with Dr. Nwofia until September. Mr. McKim repeatedly requested return visits to approved physicians. The Court finds these delays constitute untimely provision of medical treatment from approved physicians and refers Stansell to the Compliance Program for consideration of a penalty.

Temporary disability benefits

To qualify for temporary total disability benefits, Mr. McKim must establish: (1) that he became disabled from working due to a compensable injury; (2) that there is a causal connection between the injury and his inability to work; and (3) the duration of the period of disability. *Hibbitts v. Kim Royal d/b/a Royal Guttering*, 2021 TN Wrk. Comp. App. Bd. LEXIS 10, at *6 (Mar. 23, 2021).

Both Drs. Weisman and MacGregor offered expert opinions of a causal connection between Mr. McKim’s neck injury and his work. Further, Dr. MacGregor said Mr. McKim’s neck injury disabled him from working as of the first visit in September 2021. and that his disability continues. Those opinions establish the required elements for an award of temporary total disability.

The Court rejects Stansell’s argument that Mr. McKim was at maximum medical improvement for the neck injury in January 2022. Dr. Weisman specifically said, in answers to Stansell’s questions, that he rated Mr. McKim only for the shoulder injury in January, not the neck. Further, Stansell cannot prevail on its argument Mr. McKim was at maximum medical improvement and no longer owed temporary total disability benefits because all treatment except for pain stopped in January. *See* Tenn. Code Ann. § 50-6-207(1)(E) (an employee is conclusively presumed to be at maximum medical improvement when the treating physician ends all active treatment, and the only care is treatment for pain). To the contrary, Dr. MacGregor treated him in April and August, in an effort to *determine the cause* of Mr. McKim’s neck pain and to devise a treatment plan for it.

The Court also rejects Stansell’s arguments against admissibility of the questionnaires Mr. McKim sent Dr. MacGregor. The Court previously ruled the questionnaires were admissible when it denied Stansell’s motion in limine. Further, the Court does not find the opinions untrustworthy simply because Dr. MacGregor did not include an opinion regarding work restrictions in her notes. Nothing suggests she was asked her opinion regarding restrictions until Mr. McKim’s inquiry, and the fact he did so in anticipation of litigation is irrelevant.

Equally unpersuasive is Stansell’s argument that Mr. McKim’s alleged non-compliance with treatment prevents his recovery of benefits. Specifically, the statute on which Stansell relies, Tennessee Code Annotated section 50-6-204(d)(8), reads as follows:

If the injured employee *refuses to comply* with any reasonable request for examination or to accept the medical or specialized services that the employer is required to furnish under this chapter, the injured employee's right to compensation shall be suspended and no compensation shall be due and payable while the injured employee continues to refuse.

(Emphasis added).

The emphasized language is controlling. The Court has already found Mr. McKim's failure to attend or stay at the pain management appointments was excusable. Thus, he did not "refuse" medical services. An employer's decision to deny a claim based on an employee missing two medical appointments, without considering any explanation as to why, is unsupported by Tennessee law. *Bailey v Amazon*, 2022 TN Wrk. Comp. App. Bd. LEXIS 16, at *9-10 (May 3, 2022). Thus, the Court orders Stansell to pay Mr. McKim temporary total disability benefits from March 15, 2022, to the present, and ongoing until he either reaches maximum medical improvement or returns to work.

Penalty on unpaid benefits

Tennessee Code Annotated section 50-6-205(b)(3)(A) states that the Court might assess a penalty of twenty-five percent of unpaid benefits when the employer "has knowledge of any disability that would qualify [an employee] for benefits[.]"

Here, the Court finds no reference in Dr. MacGregor's records of work restrictions but for one undated off work slip. It was not until Mr. McKim's August 2022 questionnaire that she first gave a written opinion regarding his inability to work. At that time, Stansell contested Mr. McKim's entitlement to further temporary benefits, and it then anticipated the opportunity to cross-examine the doctor regarding her opinions until Mr. McKim canceled the deposition. Taken in totality, the Court does not find section 205(b)(3)(A) applies to these facts, and the Court declines to assess the penalty.

Compensation rate

Mr. McKim contests the compensation rate, arguing that the wage statement includes weeks that should be excluded from the calculation. The Court disagrees.

If the number of weeks an employee worked before the injury is fewer than fifty-two, then his earnings are divided by the number of weeks actually worked to obtain the average weekly wage. Tenn. Code Ann. § 50-6-102(3)(A)-(B). The average weekly wage is then multiplied by sixty-six and two-thirds percent to determine the rate at which benefits are paid. *Id.* at § 50-6-207(1)(A).

Mr. McKim's wage statement includes his wages for only six weeks of work, ending July 18, 2020. Mr. McKim proposed eliminating week six and dividing his wages by five when calculating his average weekly wage. That argument is incorrect. Instead, the wage statement should actually include another week, week seven, at least to the extent that it includes wages earned through July 21. Though absent from the wage statement, his earnings in that week are included on the payroll ledger.

Stansell paid benefits at the rate of \$693.33 per week, meaning it calculated the average weekly wage as \$1,040. The Court also arrives at that number when it divides Mr. McKim's total wages through seven weeks by 6.48, an amount that considers half of the seventh week.

Based on the evidence presented, the Court finds no error in Stansell's calculation and orders that temporary total disability benefits be paid at the rate of \$693.33 per week.

IT IS, THEREFORE, ORDERED as follows:

1. Stansell shall furnish medical treatment made reasonably necessary by Mr. McKim's injury of July 21, 2020, by scheduling appointments with all three approved physicians, Drs. Weisman, MacGregor, and Nwofia.
2. Stansell shall pay Mr. McKim temporary total disability benefits from March 15, 2022, to November 29, or thirty-seven weeks at the weekly rate of \$693.33, totaling \$25,653.21. Stansell shall continue payments until Mr. McKim returns to work or is placed at maximum medical improvement. Counsel is entitled to a reasonable fee for recovery of those benefits, not to exceed twenty percent. The Court denies Mr. McKim's request for a twenty-five percent penalty under Tennessee Code Annotated section 50-6-205(b)(3).
3. Stansell shall pay Mr. McKim for mileage expenses incurred for travel to authorized medical appointments.
4. The Court refers Stansell to the Compliance Program for consideration of a penalty under Tennessee Code Annotated section 50-6-118(8) for untimely provision of medical treatment recommended by authorized physicians.
5. The Court sets a Status Hearing for **Monday, March 27, 2023, at 9:00 a.m. Central Time**. The parties must call 731-422-5263 or toll-free 855-543-5038 to participate.
6. Unless interlocutory appeal of the Expedited Hearing Order is filed, compliance with this Order must occur no later than seven business days from the date of entry of this Order as required by Tennessee Code Annotated section 50-6-239(d)(3). The Employer must submit confirmation of compliance with this Order to the Bureau by

email to WCCompliance.Program@tn.gov no later than the seventh business day after entry of this Order. Failure to submit the necessary confirmation within the period of compliance may result in a penalty assessment for non-compliance. For questions regarding compliance, please contact the Workers' Compensation Compliance Unit via email at WCCompliance.Program@tn.gov.

ENTERED December 9, 2022.



JUDGE ALLEN PHILLIPS
Court of Workers' Compensation Claims

APPENDIX

Exhibits:

1. Collective Medical Records
2. Deposition of David Brown
3. Collective Choice of Physician Forms
4. Wage Statement and payroll records
5. Stansell's Payment Ledger
6. Notice of Change or Termination of Compensation Benefits
7. Excerpts from Mr. McKim's deposition
8. Rule 72 Declaration of Anne Hofmann

Technical record:

1. Petition for Benefit Determination
2. Employee's Motion to Quash Notice of Deposition and Motion to Compel Deposition of Adjuster
3. Employee's Notice of Insurance Carrier and/or TPA's Rule 30.02(6) Deposition
4. Employee's Response to Employer's Response to Employee's Motion to Quash Notice of Deposition and Motion to Compel Deposition of Adjuster
5. Discovery Order
6. Dispute Certification Notice
7. Employer's Objections to Employee's Notice of Insurance Carrier and/or TPA's Rule 30.02(6) Deposition
8. Employee's Motion to Compel Mileage Reimbursement
9. Employer's Response to Employee's Motion to Compel Mileage Reimbursement
10. Employee's Rule 37 Motion for Sanctions, Attorney's Fees, Court Reporter Costs, and Reasonable Expenses
11. Order Denying Employee's Motion for Mileage Reimbursement and Setting Status Hearing

12. Hearing Request and Affidavit
13. Employer's Response to Employee's Rule 37 Motion for Sanctions, Attorney's Fees, Court Reporter Costs, and Reasonable Expenses
14. Employee's Reply to Employer's Response to Employee's Rule 37 Motion for Sanctions, Attorney's Fees, Court Reporter Costs, and Reasonable Expenses
15. Employer's Sur-Reply to Employee's Rule 37 Motion for Sanctions, Attorney's Fees, Court Reporter Costs, and Reasonable Expenses
16. Employees Response and Objection to Employer's Sur-Reply
17. Order for Rule 37 Sanctions
18. Affidavit of Attorney Peter Frech
19. Employer's Motion for Relief and Reconsideration
20. Employer's Objection and Response to Employee's Notice of Filing and Affidavit of Peter Frech
21. Employee's Response to Employer's Motion for Relief and Reconsideration
22. Notice of Expedited Hearing
23. Employee's Notice of Revised Affidavit
24. Employer's Motion to Compel Independent Medical Evaluation
25. Employee's Response to Employer's Motion to Compel Independent Medical Examination
26. Employee's Pre-Hearing Brief
27. Order Denying Reconsideration of Rule 37 Sanctions and Awarding Fees and Expenses
28. Motion in Limine to Exclude Dr. MacGregor's Medical Questionnaire Responses
29. Employer's Pre-Trial Brief for Expedited Hearing
30. Employer's Pre-Expedited Hearing Statement
31. Employer's Witness and Exhibit List
32. Agreed Order Allowing Employer's Late Filings for the Expedited Hearing
33. Employee's Response to Employer's Motion in Limine to Exclude Dr. Margaret MacGregor's Medical Questionnaire Responses
34. Order Denying Independent Medical Evaluation
35. Order Denying Motion in Limine

CERTIFICATE OF SERVICE

I certify that a copy of this Order was sent as indicated on December 9, 2022.

Name	Email	Service sent to:
Peter Frech, Employee's Attorney	X	pfrech@forthepeople.com
Gregory H. Fuller and Ashley B. McGee, Employer's Attorneys	X	ghfuller@mijs.com abmcgee@mijs.com
Compliance Program	X	WCCompliance.Program@tn.gov

Penny Shrum

Penny Shrum, Court Clerk
Court of Workers' Compensation Claims



Expedited Hearing Order Right to Appeal:

If you disagree with this Expedited Hearing Order, you may appeal to the Workers' Compensation Appeals Board. To appeal an expedited hearing order, you must:

1. Complete the enclosed form entitled: "Notice of Appeal," and file the form with the Clerk of the Court of Workers' Compensation Claims *within seven business days* of the date the expedited hearing order was filed. When filing the Notice of Appeal, you must serve a copy upon all parties.
2. You must pay, via check, money order, or credit card, a **\$75.00 filing fee** *within ten calendar days* after filing of the Notice of Appeal. Payments can be made in-person at any Bureau office or by U.S. mail, hand-delivery, or other delivery service. In the alternative, you may file an Affidavit of Indigency (form available on the Bureau's website or any Bureau office) seeking a waiver of the fee. You must file the fully-completed Affidavit of Indigency *within ten calendar days* of filing the Notice of Appeal. **Failure to timely pay the filing fee or file the Affidavit of Indigency will result in dismissal of the appeal.**
3. You bear the responsibility of ensuring a complete record on appeal. You may request from the court clerk the audio recording of the hearing for a \$25.00 fee. If a transcript of the proceedings is to be filed, a licensed court reporter must prepare the transcript and file it with the court clerk *within ten business days* of the filing the Notice of Appeal. Alternatively, you may file a statement of the evidence prepared jointly by both parties *within ten business days* of the filing of the Notice of Appeal. The statement of the evidence must convey a complete and accurate account of the hearing. The Workers' Compensation Judge must approve the statement before the record is submitted to the Appeals Board. If the Appeals Board is called upon to review testimony or other proof concerning factual matters, the absence of a transcript or statement of the evidence can be a significant obstacle to meaningful appellate review.
4. If you wish to file a position statement, you must file it with the court clerk *within ten business days* after the deadline to file a transcript or statement of the evidence. The party opposing the appeal may file a response with the court clerk *within ten business days* after you file your position statement. All position statements should include: (1) a statement summarizing the facts of the case from the evidence admitted during the expedited hearing; (2) a statement summarizing the disposition of the case as a result of the expedited hearing; (3) a statement of the issue(s) presented for review; and (4) an argument, citing appropriate statutes, case law, or other authority.

For self-represented litigants: Help from an Ombudsman is available at 800-332-2667.



NOTICE OF APPEAL

Tennessee Bureau of Workers' Compensation

www.tn.gov/workforce/injuries-at-work/

wc.courtclerk@tn.gov | 1-800-332-2667

Docket No.: _____

State File No.: _____

Date of Injury: _____

Employee

v.

Employer

Notice is given that _____

[List name(s) of all appealing party(ies). Use separate sheet if necessary.]

appeals the following order(s) of the Tennessee Court of Workers' Compensation Claims to the Workers' Compensation Appeals Board (check one or more applicable boxes and include the date file-stamped on the first page of the order(s) being appealed):

Expedited Hearing Order filed on _____ Motion Order filed on _____

Compensation Order filed on _____ Other Order filed on _____

issued by Judge _____.

Statement of the Issues on Appeal

Provide a short and plain statement of the issues on appeal or basis for relief on appeal:

Parties

Appellant(s) (Requesting Party): _____ Employer Employee

Address: _____ Phone: _____

Email: _____

Attorney's Name: _____ BPR#: _____

Attorney's Email: _____ Phone: _____

Attorney's Address: _____

** Attach an additional sheet for each additional Appellant **

Employee Name: _____ Docket No.: _____ Date of Inj.: _____

Appellee(s) (Opposing Party): _____ Employer Employee

Appellee's Address: _____ Phone: _____

Email: _____

Attorney's Name: _____ BPR#: _____

Attorney's Email: _____ Phone: _____

Attorney's Address: _____

** Attach an additional sheet for each additional Appellee **

CERTIFICATE OF SERVICE

I, _____, certify that I have forwarded a true and exact copy of this Notice of Appeal by First Class mail, postage prepaid, or in any manner as described in Tennessee Compilation Rules & Regulations, Chapter 0800-02-21, to all parties and/or their attorneys in this case on this the _____ day of _____, 20 ____.

[Signature of appellant or attorney for appellant]



**Tennessee Bureau of Workers' Compensation
 220 French Landing Drive, I-B
 Nashville, TN 37243-1002
 800-332-2667**

AFFIDAVIT OF INDIGENCY

I, _____, having been duly sworn according to law, make oath that because of my poverty, I am unable to bear the costs of this appeal and request that the filing fee to appeal be waived. The following facts support my poverty.

1. Full Name: _____ 2. Address: _____

3. Telephone Number: _____ 4. Date of Birth: _____

5. Names and Ages of All Dependents:

_____ Relationship: _____
 _____ Relationship: _____
 _____ Relationship: _____
 _____ Relationship: _____

6. I am employed by: _____

My employer's address is: _____

My employer's phone number is: _____

7. My present monthly household income, after federal income and social security taxes are deducted, is:

\$ _____

8. I receive or expect to receive money from the following sources:

AFDC	\$ _____ per month	beginning _____
SSI	\$ _____ per month	beginning _____
Retirement	\$ _____ per month	beginning _____
Disability	\$ _____ per month	beginning _____
Unemployment	\$ _____ per month	beginning _____
Worker's Comp.	\$ _____ per month	beginning _____
Other	\$ _____ per month	beginning _____

9. My expenses are:

Rent/House Payment	\$ _____ per month	Medical/Dental	\$ _____ per month
Groceries	\$ _____ per month	Telephone	\$ _____ per month
Electricity	\$ _____ per month	School Supplies	\$ _____ per month
Water	\$ _____ per month	Clothing	\$ _____ per month
Gas	\$ _____ per month	Child Care	\$ _____ per month
Transportation	\$ _____ per month	Child Support	\$ _____ per month
Car	\$ _____ per month		
Other	\$ _____ per month (describe: _____)		

10. Assets:

Automobile	\$ _____	(FMV) _____
Checking/Savings Acct.	\$ _____	
House	\$ _____	(FMV) _____
Other	\$ _____	Describe: _____

11. My debts are:

Amount Owed	To Whom
_____	_____
_____	_____
_____	_____
_____	_____

I hereby declare under the penalty of perjury that the foregoing answers are true, correct, and complete and that I am financially unable to pay the costs of this appeal.

APPELLANT

Sworn and subscribed before me, a notary public, this
_____ day of _____, 20_____.

NOTARY PUBLIC
My Commission Expires: _____