

**FILED**

**WORKERS' COMPENSATION COURT  
STATE OF OKLAHOMA  
June 10, 2015  
Katrina Stephenson  
COURT CLERK**

Court Number: 2013-05128J

### Claimant's Social Security

Number: xxx-xx-8516

THAT at time of injury, claimant's wages were sufficient to establish the rates of compensation at \$323.00 per week for permanent partial impairment.

- 4 -

THAT after review of all the evidence, testimony including the report of Court Independent Medical Examiner Dr. Hargrove (JANUARY 16, 2014 Order), the Court finds claimant has had two (2) surgical treatments to the LEFT SHOULDER.

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THAT as a result of said injury, claimant sustained 20 percent permanent partial impairment to the BODY AS A WHOLE ATTRIBUTABLE TO THE LEFT SHOULDER, for which claimant is entitled to compensation for 100 weeks at \$323.00 per week, or the total amount of \$32,300.00 of which 53 weeks have accrued and shall be paid in a lump sum of \$17,119.00.

- 6 -

THAT respondent or insurance carrier shall provide the claimant with reasonable and necessary continuing medical maintenance with DR. BOBB (claimant's treating physician). Prescription medications, if any, are subject to the rules, limitations, and requirements of the Oklahoma Treatment Guidelines for the use of Schedule II Drugs and review upon application of either party.

- 7 -

THAT respondent and/or insurance carrier shall pay all reasonable and necessary medical expenses incurred by claimant as a result of said injury.

- 8 -

THAT respondent or insurance carrier shall pay claimant the accrued portion of the award herein in lump sum of \$17,119.00 and pay the balance of said award at the rate of \$323.00 per week until the total award of \$32,300.00 (less attorney fee) has been paid to claimant.

- 9 -

THAT Respondent shall pay court costs; Special Occupational Health and Safety Fund Tax of three-fourths of one percent (0.75%) of the amounts paid in lump sum of \$242.25 is levied against the Respondent; three-fourths of one percent of the continuing benefits awarded in this case shall be computed and paid as the same comes due. Pursuant to 85 O.S., Section 407, as amended by Laws 2013, HB 2201, c. 254, Section 49, eff. January 1, 2015, Respondent, if Own Risk, shall pay \$646.00 to the Workers' Compensation Administration Fund created by 85 O.S. Section 407, to be used for the costs of administering the Workers' Compensation Code as applicable to the Oklahoma Workers' Compensation Court of Existing Claims, representing two percent (2%) of the permanent disability award herein.

- 10 -

THAT pursuant to Title 85 O.S. Section 368, a final award fee of one hundred forty dollars (\$140.00) is taxed as a cost in this matter, and shall be paid by respondent.

- 11 -

THAT the sum of \$6,460.00 shall be deducted from the award herein and paid in lump sum to claimant's attorney as a fair and reasonable attorney fee; within twenty (20) days from the date of filing of this order, respondent or insurance carrier shall comply herewith.

BY ORDER OF:

/s/ 

L BRAD TAYLOR, JUDGE

ca/CRichardson

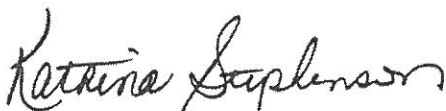
A copy of the above and foregoing Court Order was mailed, by regular or Certified United States Mail, on this filed stamped date to:

Claimant's Attorney: GREG A BARNARD  
225 N PETERS  
NORMAN, OK 73069-7232

Respondent's Attorney: JEANNE SNIDER  
PO BOX 370  
NORMAN, OK 73070-

BRADLEY J MCCLURE  
1327 N ROBINSON  
OKLAHOMA CITY, OK 73103-4848

I do hereby certify that the above and foregoing is a true and correct copy of the original order signed by the Judge herein. Witness by my hand and the official seal of this court on this date.



Court Clerk  
June 10, 2015

