

**BEFORE THE ARKANSAS WORKERS' COMPENSATION COMMISSION
WCC NO. H406997**

JUSTIN DINET, EMPLOYEE

CLAIMANT

**HYTROL CONVEYOR CO. INC.,
SELF-INSURED EMPLOYER**

RESPONDENT

**CANNON COCHRAN MGMT. SVCS. INC.,
THIRD-PARTY ADM'R**

RESPONDENT

OPINION FILED JUNE 3, 2026

Hearing before Administrative Law Judge O. Milton Fine II on March 20, 2026, in Jonesboro, Craighead County, Arkansas.

Claimant represented by Mr. Phillip J. Wells, Attorney at Law, Jonesboro, Arkansas.

Respondents represented by Mr. S. Shane Baker, Attorney at Law, Jonesboro, Arkansas.

STATEMENT OF THE CASE

On March 20, 2026, the above-captioned claim was heard in Jonesboro, Arkansas. A prehearing conference took place on January 26, 2026. The Prehearing Order entered on that date pursuant to the conference was admitted without objection as Commission Exhibit 1. At the hearing, the parties confirmed that the stipulations, issues, and respective contentions, as amended, were properly set forth in the order.

Stipulations

The parties discussed the stipulations set forth in Commission Exhibit 1. Following the withdrawal of Stipulation No. 4—which concerned the valuation of Claimant's average weekly wage but was made moot in light of the reservation of issues discussed *infra*—they are the following, which I accept:

1. The Arkansas Workers' Compensation Commission has jurisdiction over this claim.
2. The employee/self-insured employer/third-party administrator relationship existed among the parties on October 18, 2024, and at all other relevant times.
3. Respondents have controverted this claim in its entirety.

Issues

The parties discussed the issues set forth in Commission Exhibit 1. After the reservation of all issues pertaining to Claimant's entitlement to indemnity benefits, the following were litigated:

1. Whether Claimant sustained a compensable injury to his right knee by specific incident.
2. Whether Claimant is entitled to reasonable and necessary treatment of his alleged right knee injury.

All other issues have been reserved.

Contentions

The respective contentions of the parties, following amendments in light of the reservation of all issues concerning Claimant's entitlement to indemnity benefits, read as follows:

Claimant:

1. Claimant contends that during the course of his employment, he sustained an acute injury to his knee that required surgery. This represents either a

new injury or, in the alternative, an aggravation of pre-existing knee problems causing an acute condition that required him to undergo knee surgery.

Respondents:

1. Respondents contend that Claimant was not injured at work. Rather, on August 1, 2024, a CT scan of his right knee revealed that a screw from a prior ACL reconstruction surgery had fractured. The CT report from that date states in part: “The screw within this enlarged inferior tunnel has fractured and displaced laterally into the soft tissue.” Surgery was then scheduled for November 7, 2024.
2. Claimant saw Terri Campbell in the Hytrol Medical Clinic on October 18, 2024, telling her that he had injured his right knee at work. Nurse Campbell saw no injury. Claimant told her that he would call his own orthopedist and would schedule an appointment on his own. Nurse Campbell told him that his medical treatment may not be covered under workers' compensation if he chose to see his own orthopedist. On October 21, 2024, Claimant told her that he went ahead and saw his orthopedist on October 18, 2024, and that his doctor had scheduled surgery for November 7, 2024. Later, the nurse reviewed Claimant's medical records and learned that surgery had already been scheduled before Claimant first saw her to report an alleged work-related injury.

FINDINGS OF FACT AND CONCLUSIONS OF LAW

After reviewing the record as a whole, including medical reports and other matters properly before the Commission, and having had an opportunity to hear the testimony of the witnesses and to observe their demeanor, 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 Stipulations set forth above are reasonable and are hereby accepted.
3. Claimant has proven by a preponderance of the evidence that he sustained a compensable injury to his right knee by specific incident.
4. Claimant has proven by a preponderance of the evidence that he is entitled to reasonable and necessary medical treatment of his compensable right knee injury, including the October 29, 2024, right knee surgery by Dr. Aaron Wallace to address his torn meniscus, and related treatment. Moreover, Claimant has proven that all of the treatment of his torn right meniscus that is in evidence was reasonable and necessary. However, because he has not proven by a preponderance of the evidence that there is a causal connection between the pre-existing displaced screw in his right knee that was removed in the course of the October 29, 2024 operation, that particular surgical procedure is not the responsibility of Respondents.

CASE IN CHIEF

Summary of Evidence

The hearing witnesses were Claimant; his wife, Molly Dinet; his brother, Jason Dinet; his father, Steven Dinet, Jr.; and Terri Campbell, the clinic manager for Respondent Hytrol.

In addition to the Prehearing Order discussed above, admitted into evidence in this case were the following: Claimant's Exhibit 1, a compilation of his medical records, consisting of one index page and 30 numbered pages thereafter; Respondents' Exhibit 1, another compilation of Claimant's medical records, consisting of one index page and 12 numbered pages thereafter; Respondents' Exhibit 2, the Form AR-N related to his claim, consisting of two pages; Joint Exhibit 1, the exhibits to the deposition of Dr. Aaron Wallace taken August 29, 2025, consisting of 13 pages; Joint Exhibit 2, the transcript¹ of Dr. Wallace's deposition, consisting of 27 numbered pages; and Joint Exhibit 3, the exhibits to the deposition, consisting of 13 pages.

Adjudication

A. Compensability

Introduction. Claimant has argued that he suffered a compensable injury to his right knee in a specific incident on October 18, 2024, while working for Respondent Hytrol. Respondents deny this.

Standards. In order to prove the occurrence of an injury caused by a specific incident identifiable by time and place of occurrence, a claimant must show that: (1) an

injury occurred that arose out of and in the course of his employment; (2) the injury caused internal or external harm to the body that required medical services or resulted in disability or death; (3) the injury is established by medical evidence supported by objective findings, which are those findings which cannot come under the voluntary control of the patient; and (4) the injury was caused by a specific incident and is identifiable by time and place of occurrence. *Mikel v. Engineered Specialty Plastics*, 56 Ark. App. 126, 938 S.W.2d 876 (1997). If a claimant fails to establish by a preponderance of the evidence any of the above elements, compensation must be denied. *Id.* This standard means the evidence having greater weight or convincing force. *Barre v. Hoffman*, 2009 Ark. 373, 326 S.W.3d 415; *Smith v. Magnet Cove Barium Corp.*, 212 Ark. 491, 206 S.W.2d 442 (1947).

A claimant's testimony is never considered uncontroverted. *Nix v. Wilson World Hotel*, 46 Ark. App. 303, 879 S.W.2d 457 (1994). The determination of a witness' credibility and how much weight to accord to that person's testimony are solely up to the Commission. *White v. Gregg Agric. Ent.*, 72 Ark. App. 309, 37 S.W.3d 649 (2001). The Commission must sort through conflicting evidence and determine the true facts. *Id.* In so doing, the Commission is not required to believe the testimony of the claimant or any other witness, but may accept and translate into findings of fact only those portions of the testimony that it deems worthy of belief. *Id.*

¹Pursuant to Commission policy, this transcript, separately bound, has been retained in the Commission's file.

Testimony. Claimant, who is 27 years old and is currently attending college, related his medical history. During a college football tryout in Colorado in 2023, he tore his right anterior cruciate ligament (“ACL”), along with other ligaments in his right knee. Dr. Aaron Wallace operated on him on October 12, 2023. Thereafter, he underwent physical therapy for five to six months. When he finished therapy, Wallace released him from treatment. Asked how he was doing at that point, Claimant responded: “I had no complications. I was fine.”

He then testified that on August 1, 2024, he felt a pop in his right knee as he was exiting a swimming pool. He treated for this at NEA Urgent Care Plus. There, he underwent a CT scan of his knee, and was given pain medication. The CT scan showed that a screw was loose and broken. Consequently, Claimant consulted Dr. Wallace. The doctor wanted him to undergo a second procedure to remove the damaged screw, so the surgery was scheduled for September 5, 2024. But because Claimant did not desire to proceed with the operation, he contacted Wallace’s office online and by phone. The procedure was canceled and was not rescheduled. Asked how his right knee was doing on September 5, 2024, Claimant stated:

I had no issues with it. I was working fine at Hytrol. I was also working at Cane Academy, and that job involved me playing with kids. We played sports, we did activities. We went to Ultimate Air and things like that. And I was fully active with them. I couldn’t—there was no issues that I had with it. I was working fine at Hytrol with no restrictions.

As of September 2024, not only did Claimant have two separate jobs—one at Hytrol and the other at Cane Academy—but he was (and still is) a full-time student at Arkansas State University. He added: “I’m a physical education major, and I also had

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classes where one of my classes that semester was physical conditioning. So I participated fully in all of my classes as well.” While he was involved in a motor vehicle collision on September 10, 2024, that resulted in both knees getting hurt, the injuries consisted only of contusions. Asked how it was doing after the collision, Claimant replied: “It was fine. It was—I had no issues with it. I went—after the car accident, I went to work that same night.”

It was Claimant’s testimony that he went to work for Respondent Hytrol on August 12, 2024. He was employed in the Power Assembly area, and described what he did there:

It [entailed] me building their conveyors. If—I had to interpret blueprints and put parts and pieces together. It involved me lifting materials such as the motor for the conveyor, the belt for the conveyor, and building those in a certain time frame and getting those.

This position was “very physically demanding.” Despite this, before October 18, 2024, he was always able to work and was not under any restrictions.

Asked what happened on October 18, 2024, Claimant stated that near the end of his shift, at approximately 5:40 a.m., the following occurred:

I was—what we have to do at the end of our shift is anything that we build, we have to bring it to the shipping area at Hytrol. And sometimes we use a pallet jack to do that. And I was using a pallet jack to bring my materials that we use to build. And on my way back to get more materials, the pallet jack struck the back of my foot. Like the—and the wheels on the pallet jack are pretty big. So it struck, like, the whole back part of my foot. And when it did, it caused my leg to twist and it popped, like, pretty loudly.

Claimant elaborated that it was his right leg that twisted and popped, and continued:

It was an extreme pain. I yelled pretty loud and had to be seated immediately. I had two coworkers by me that were—that helped me limp on my left leg to somewhere I could just be seated for a second.

According to Claimant, his supervisor used a cart to take him to the department at Hytrol where his father, Steven Dinet (“Steven”), worked. Steven gave the supervisor the keys to his vehicle. The supervisor then drove Claimant to that vehicle. Claimant used the keys to open the truck, get inside, and wait for Steven to finish his shift. Steven drove him to Claimant’s house. Claimant’s wife, Molly Dinet (“Molly”), was at the house. In describing his right knee condition at that point, Claimant related: “I was in a lot of pain. My dad had to help me inside of the house, so I had to hop on my left leg to get in it, and he assisted me.”

It was the testimony of Claimant that Respondent Hytrol has an on-site clinic. He returned to the plant that same day and went to the clinic as soon as it opened, at 8:00 a.m. There, he saw Terri Campbell, the manager of the clinic. Claimant stated that he was on crutches at the time of his arrival. Asked if Campbell examined his knee, he replied: “She observed it.” He denied that she touched the knee. Campbell recommended that he take Ibuprofen, and sent him for an x-ray at St. Bernards Medical Center. Claimant testified that he took the Ibuprofen and underwent that x-ray.

According to Claimant, he informed Campbell during their visit that he was going to try to schedule a visit with Dr. Wallace—who, as discussed above, had previously treated his right knee. Claimant was successful in securing an appointment to see Wallace that same day: October 18. Eleven days later, on October 29, 2024, Dr. Wallace operated on his knee.

Two days after the incident in question, on October 20, 2024, Claimant went back to work at Hytrol. Asked to describe his condition at that time, he stated:

My knee after the incident affected my ability to work fully. I was never at 100 percent, but I did my best to work as much as possible. I continued to have complications where I would have to be seated down until, I guess, the inflammation calmed down and try to work again. On October 25 [of 2024] is when I hurt it again at work. And then on—sorry, October 27 is when I hurt it at work.² That's when—because I had to—my dad had to take me home again.

On cross-examination, Claimant admitted that he did not tell Campbell about the displaced screw in his knee until October 21, 2024—after his October 18 appointment with Dr. Wallace. He stated: “I told her I had a complication with my knee, but I did not tell her that I had surgery scheduled for it [the screw removal procedure that was cancelled]. No, sir.” The following exchange took place:

Q. Now, when I asked you when I took your deposition, why did you not tell Ms. Campbell about the surgery that you had scheduled previously, do you remember what you told me?

A. I believe I told you that she did not ask and that there was no surgery scheduled.

Delving further into this matter, Claimant testified that while his medical records do not explicitly state that the surgical removal of the screw was cancelled, there is a record of his August 27, 2024, telephone conversation with the nurse in Wallace's office in which he made that request. He added that earlier, on August 21, 2024, he made an inquiry in his MyChart account regarding whether the surgery was necessary.

Returning to the conversation that he had with Campbell on October 18, 2024, Claimant engaged in the following exchange on cross-examination:

Q. It would have been important for her to know that you had a displaced screw in your knee that Dr. Wallace wanted to address surgically. Would it not have been important for her to know that?

²This matter is not before me.

A. Yes, sir.

Q. Okay. Did you not tell her because you were trying to get the surgery covered under a workers' compensation claim?

A. No, sir. That's not true.

Q. And that's not what you're doing here today? You're not trying to convince Judge Fine that the surgery that was previously scheduled ten weeks before your work injury was actually related to something that happened October 18, just so that hopefully your workers' compensation claim would pay for the surgery that was ultimately performed?

A. No, sir. So I can explain. As I previously said, that surgery was no longer scheduled.

On redirect-examination, Claimant engaged in the following exchange with his attorney:

Q. Mr. Dinet, regarding the allegation of trying to get workers' comp to pay for the screw removal surgery, that screw removal surgery did not go on as originally planned; is that correct?

A. Yes, sir. That's correct.

Q. If you had not had this on-the-job injury October the 18th, do you have any evidence that you would ever have had that surgery?

A. No, sir.

Called by Claimant, Molly testified that they have been married for four-and-a-half years. She related that Claimant suffered a serious right knee injury during a college football tryout. Thereafter he underwent an ACL surgical reconstruction. Asked to describe his condition after he completed physical therapy, Molly stated: "He was

back to doing what he was normally doing before he had the surgery before the incident.”³ Asked what occurred on August 1, 2024, Molly responded:

We were swimming in the pool. And whenever he was getting out of the pool, he felt some pain and discomfort in his knee and he couldn't get out of the pool on his own. So the family member's house we were at actually had crutches. So I went and grabbed the crutches for him, and he was able to get out of the pool with them. And then I drove him to NEA Urgent Care.

While at NEA Urgent Care, Claimant underwent a CT scan of his right knee. It was Molly's understanding that this test revealed that there was an issue with the screw that had been installed in the knee as part of the ACL reconstruction. Molly stated that while surgical removal of the screw was set, the procedure did not end up taking place as scheduled. Asked to describe the condition of Claimant's right knee after the pool incident, she related:

He was doing what he normally, usually did. He only had pain on that day. And then after that, he was back to working normally. He worked at Cane Academy, an after-school care for kids, and he was playing with them and playing the games and doing everything like he normally did during that time.

Concerning the events of October 18, 2024, Molly testified that Claimant called her from his father's truck. After his father, Steven, drove him home, and after Claimant's brother brought her car back to the house, Molly drove him to the Hytrol clinic. At that time, Claimant was unable to bear weight on his right lower extremity. She had to help him into the house and to get ready to go to the clinic. He had to use

³Based upon this testimony in light of the balance of the evidence, I am interpreting “the incident” as referencing Claimant's alleged October 18, 2024, incident at Hytrol.

crutches to get to the vehicle to go back to Hytrol, and to make it from the car into the clinic that day.

It was the testimony of Molly that she was present when Claimant saw the plant nurse, Terri Campbell. She corroborated Claimant's testimony that Campbell never touched him; “[s]he observed him but did not examine him.” The three of them had a discussion about what had happened to Claimant at work that day. Molly confirmed that Campbell gave Claimant Ibuprofen, and that he took it and was able to return to work two days later. Nonetheless, he was having pain in the knee. Asked about Claimant's condition since undergoing the second surgery by Dr. Wallace on October 29, 2024, Molly stated that he is “[g]ood.” She did admit, however, that she has been only observing him at home and not at work at Hytrol. While Molly confirmed that Claimant had been involved in a motor vehicle accident that resulted in his sustaining contusions to both knees, she testified that he did not suffer any pain as a result.

Jason Dinet (“Jason”) testified that he is Claimant's brother. He was likewise employed at Respondent Hytrol during the time period at issue. Asked to describe Claimant's condition after the pool incident and motor vehicle collision, but before the October 18, 2024, incident at Hytrol, Jason replied: “He was okay. He was fine. He was working. He was doing Cane Academy, Hytrol, and he was in good condition.” During this period, he did not miss any work due to a right knee problem; and he was able to perform his job without any restrictions.

The following exchange occurred:

Q. When did you find out the fact that your brother had sustained an injury on October the 18th?

A. That was when I got off at 7 a.m. I clocked out. He had called my phone and he told me that I need to come to where—because we all work in different departments. He told me to come to our dad's department to come get the car keys from him and then drive home.

Q. Did you observe him at Hytrol that morning?

A. Yes, sir, I did.

Q. Describe his condition.

A. Yes, sir. He seemed in a lot of pain. He—a lot of pain. He couldn't do nothing, barely could move. When he handed me the car keys, it took him a while to just shift over to even hand me the keys.

According to Jason, Claimant was able to return to work a few days after being injured.

Before returning, "[h]e seemed tolerable"; afterward, "[h]e was doing okay."

Steven testified that he is the father of Claimant. As alluded to above, he, too, is a Hytrol employee. He confirmed that before the incident in question, his son was able to work and had no limitations concerning his right knee. The following exchange took place:

Q. On October 18, 2024, when did you find out that Justin had sustained an injury on the job?

A. Oh, yes. He was on a cart with his supervisor. They drove him down to my department. And the supervisor told me that Justin had injured himself and needed a way to get home. So I told him he could sit in my truck until I get off my shift. And that was at seven o'clock. So I have him my keys to my truck, and a supervisor drove him down to—and drove him to my truck and put him in the truck until I got off of work at seven o'clock.

Steven drove Claimant home, and helped him exit the vehicle. Asked to describe the condition of Claimant's right knee at that point, he replied: "Well, he couldn't put no

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pressure on it. He couldn't walk on it, and he couldn't put no pressure on it. All he could do is stand up on one leg. So I had to help him into his house." While Claimant was still having problems with the knee, according to Steven, he was able to go back to work.

Called by Respondents, Terri Campbell testified that she is a registered nurse, and that she is the clinic manager for Hytrol. She has been employed there in this capacity for nearly 15 years. It was her testimony that Claimant told her on October 18, 2024, that he was going to see his personal orthopedist. Later, because she had access to Claimant's NEA records, she reviewed them and discovered that he already had surgery scheduled to remove a displaced screw in his right knee.

The following exchange took place:

Q. Did you learn through your investigation what the prior CT scan revealed?

A. Yes. It revealed that he had a screw that was broken off and had come loose into his surrounding tissue.

Q. And are you familiar with the timing of that CT scan?

A. Yes.

Q. Was it August 1 of 2024?

A. Yes.

Q. Okay. When you first met with Mr. Dinet on October the 18th, did he tell you that he had had an ACL reconstruction in 2023, but that he had completely healed from that?

A. Yes.

Q. Okay. Is October 21, while you were on the phone with Mr. Dinet, the first time that Mr. Dinet revealed to you that he had surgery scheduled to address that screw in his knee?

A. Yes.

According to Campbell, she advised Claimant that because Hytrol was not using NEA physicians for workers' compensation, if he went to his physician there, Dr. Wallace, of his own accord, it might not be covered.⁴ Questioned about her examination of him on October 18, 2024, she responded:

I did—looked at his knee, just observed it with my eyes. And nothing was obvious, but—and then I palpated the knee on either side and around. And that's where I—that's where he told me the pain, when I touched a certain area.

It was based on that physical examination that she scheduled Claimant for an x-ray at St. Bernards.

On cross-examination, Campbell testified as follows:

Q. Is it your contention that the screw that was broken was the cause of his need for surgery?

A. Yes. Okay.

Q. Are you aware of that [sic] Dr. Wallace gave an opinion that the surgery was for a torn meniscus?

A. I am not.

Q. Would you dispute Dr. Wallace's testimony?

A. I can't. I'm not a physician.

⁴Of course, since this is a fully controverted claim (apart from the fact that, as Campbell admitted, it was controverted before the October 29, 2024, surgery took place in any case), lack of authorization is wholly irrelevant here.

Q. And is it—are you aware of the fact that the surgery was not for the screw removal, but the screw removal just happened to be something that he did since he was in there performing a meniscus tear surgery?

A. No. I don't believe that's true.

Q. Okay. And again, you'll rely upon Dr. Wallace to provide that testimony?

A. I have to go by the medical records.

Q. Okay. And the testimony of Dr. Wallace, an orthopedic surgeon, is that correct? Are you disputing his testimony?

A. I can't. I don't—I haven't read it, so I can't.

Q. You're not in a position to dispute it at this time, are you?

A. No. I'm not.

Campbell confirmed that she authored the following entry in Claimant's medical records:

This patient told me that his orthopedic surgeon did a CT scan on his knee Friday and told him the screw has come loose. I told him that a simple knee strain/twist would not cause a screw to come loose. As we have access to NEA records I looked at this patient's last visit and found that his last CT was on 08/01/2024 showing that the screw had fractured and would have to be removed. The visit was 10 weeks before this patient's supposed work injury. I explained to patient that his would likely not be covered because he did not follow the proper work comp channels. I told him this before I knew that he had not been truthful regarding the injury.

In reference to the above, Campbell reiterated her belief that Claimant's knee problems were due to the damaged screw—which was a pre-existing condition. But she admitted that it was not until the hearing that she knew that the surgical removal of the screw was not performed until after the injury at issue.

Following up on the last statement made by Campbell in the report entry, Claimant's counsel engaged in the following exchange with her:

- Q. And tell me in your own words, now that you've come up with this idea that Mr. Dinet is not telling the truth, what is he not telling the truth about?
- A. Well, when I first saw him on the 18th, he was not truthful about having other knee injuries. He did tell me he has a previous surgery, but that he had completely recovered from that.
- Q. What other knee surgery did he not tell you about that he was untruthful about?
- A. His very first knee surgery when he was trying out for a football team.
- Q. Again, what was he untruthful about? You said he was untruthful. About—what was he untruthful about?
- A. He told me his knee was fine until the morning of the injury.
- Q. Do you have any reason to dispute that after listening to his testimony and the testimony of his lay witnesses?
- A. Now, what?
- Q. You heard the testimony of Mr. Dinet and the testimony of his lay witnesses that before October the 18th of 2024, his knee was not bothering him correct?
- A. That's what they said. I'll say that.
- Q. And why do you say that's not truthful?
- A. Because it's untruthful. He had been having ongoing knee problems as per the medical record, and had a surgery already planned before October 18.
- Q. But that surgery was never performed.
- A. Okay.

Q. Correct?

A. Okay. I don't know.

. . .

Q. The independent screw removal surgery was not performed?

A. Correct.

Dr. Aaron Wallace was deposed on August 29, 2025. Under questioning from Respondents, he testified that Claimant saw him on August 5, 2024, and related that he “felt a crack and pop” in his knee on August 2, 2024, when he was leaving a swimming pool. Claimant had undergone a right knee ACL reconstruction in October 2023. X-rays during the August 2024 visit revealed a piece of screw (which had been installed as part of the ACL reconstruction) in the tunnel of the knee. Because of this finding, the following surgery was scheduled: a right knee arthroscopy with a partial synovectomy and open lateral screw removal. As part of the August 2024 visit to Dr. Wallace, Claimant also underwent a CT scan of his right knee. The scan showed, along with post-surgical changes, (1) enlargement of the more inferior of the two tunnels in the lateral femoral condyle; and (2) a fractured screw with pieces displaced laterally into the soft tissues. The surgical procedure to remove the screw was scheduled for September 5, 2024. However, the operation did not take place until October 29, 2024. Dr. Wallace did not have any memory of the screw removal surgery being cancelled.

On October 18, 2024, Claimant went back to Wallace and reported that his right knee was injured at work. The surgery that took place on October 29, 2024, showed that Claimant had a torn meniscus in his right knee. Dr. Wallace testified that either an

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MRI or a CT scan after August 5, 2024, would have shown if the torn meniscus was present.

The doctor's testimony was that Claimant's accounts of the pool incident and of the incident at work were very similar. He also related that someone with a broken screw in the knee would be more susceptible to a torn meniscus. Wallace stated that it is possible that the meniscus was torn during the August 2024 pool incident. While he later signed an opinion letter giving the major cause for Claimant's October 2024 surgery as being his work-related injury of October 18, 2024, he was not sure if he reviewed Claimant's August 2024 records before so opining.

Later, Dr. Wallace revisited his opinion and qualified it:

Q. And your testimony is that the torn meniscus could have also occurred as a result of the August 2024 pool incident, correct?

A. Yes.

Q. Okay. And so the surgery that you performed was to address the issues that you saw Mr. Dinet for August 5th of 2024, true?

A. Not sure.

Q. Why are you not sure?

A. So, the tear pattern, the question you asked earlier was could a screw cause a tear. The answer to that question is yes. The tear pattern he has or had was not conducive with third body wear or foreign body wear, so it's not possible for me to tell you when that exactly occurred and his symptoms had become more severe.

Q. Okay. It's not possible for you to tell us when the meniscus tear occurred, but it's just as likely that it could have occurred with respect to the pool incident that he reported to you when he heard the pop and felt the crack, correct?

A. No.

Q. Why do you say that?

A. I can't tell you if it's just as likely or not.

Q. Okay. So you can't tell us which incident the torn meniscus resulted from, either the August 5th incident or the October 18th incident?

A. Correct.

Wallace testified that if Claimant had informed a member of his staff that he no longer wished to have the screw-removal surgery, the chart would have reflected it.

When questioned by Claimant, the doctor agreed that the August 8, 2024, CT scan—which took place three days after the pool incident—showed no meniscal tear. Claimant saw him on October 18, 2024, and reported that he hurt his right knee at work and that he was having moderate pain. The October 29, 2024, surgery revealed not only the broken screw, but the torn meniscus. The following exchange took place:

Q. Is there any evidence before October the 18th of 2024 that Mr. Dinet was suffering from a torn meniscus?

A. No.

Q. CT scan was performed. No evidence of a torn meniscus before the date of the surgery; is that correct?

A. Correct.

Q. No evidence of a torn meniscus before October the 18th, 2024, the date of his on-the-job injury.

A. Correct.

The questioning again turned to Dr. Wallace's causation opinion:

Q. And, obviously, the issue here is more likely than not whether the torn meniscus that required surgery at your direction was existing

or whether it was as a result of the one-the-job injury of October the 18th. Was that the aggravation or a new injury requiring your surgery. That's the question we have. I'd like your opinion.

A. Given, given all the evidence, he did not have that specific complaint about the meniscal-type pain previously when he was getting out of the pool. And it looks, to me it looks like, you know, if you look at the CT scan, there was a partially broken screw. The majority of that still retained in the, in the bone. And the tear pattern that he had, which was a horizontal tear—it wasn't like a, you know, what you'd call like a mortar-and-pestle grind down, like the meniscus had been ground down by a third body—it looked like it was an acute tear.

Q. And acute would have been recent; is that correct?

A. Correct.

Q. And, therefore, is it your opinion, as you've said previously, based on all the evidence we've had, the pool incident and everything else, that it was the on-the-job injury of October the 18th of 2024 that represented the major cause of the torn meniscus that required the surgery; is that still your opinion?

A. Yes.

Medical Records. The records in evidence reflect that Claimant underwent a CT scan of his right knee on August 1, 2024, that showed the following:

Postsurgical changes associated ACL and posterolateral corner reconstruction. There is enlargement of the more inferior of two tunnels in the lateral femoral condyle. The screw within this enlarged inferior tunnel has fractured and displaced laterally into the soft tissues.

Claimant went to NEA Baptist on August 5, 2024, and stated that “he was in the pool on Friday, 08/02/24, he turned to walk out and felt a crack and pop” in his right knee. He reported that he underwent a CT scan and that, while he could still walk on the knee, he had limited range of motion. Surgery was scheduled to remove the displaced screw.

On October 18, 2024, Claimant went to the Medical Clinic at Hytrol and reported that he had been using a pallet jack to move pallets that morning when the back of the pallet jack struck his right heel and “twisted his knee when he turned.” Claimant described feeling a “pop” in the knee. Per Campbell, the author of the record, Claimant told her that “he had the personal number of the orth[o]paedist that did his previous knee surgery so he called him and got an appointment scheduled for today.” Campbell told Claimant that he could go to the appointment with Dr. Wallace, but that it would not be covered under workers’ compensation. She instructed him to undergo an x-ray of his knee at St. Bernards Medical Center. In an Addendum to the report, bearing the date of October 21, 2024, Campbell wrote: “I am concerned that this patient kept his appointment from his personal provider because he did not get the X-Ray as I instructed him to do; as there were no results.” This was incorrect; the x-ray took place. Per the report thereof, the x-ray revealed no acute findings

Claimant presented to NEA Baptist Clinic on October 18, 2024, with “moderate pain” in his right knee. Per the report, Claimant stated that he was at work and “was using a college app [sic],⁵ rolled it, and hit the back of his ankle, causing him to move his leg, which then twisted and crackled.” Arthroscopic surgery was scheduled to address Claimant’s problem and to remove “a small piece of screw.”

Claimant returned to the clinic at Hytrol on October 21, 2024. The report thereof contains the passage quoted in Campbell’s testimony above.

⁵The record notes that artificial intelligence (“AI”) was used to prepare the record from a recording. It is apparent that “college app” is an AI mistranslation of “pallet jack.”

The surgery in question took place on October 29, 2024. Per Dr. Wallace's surgical notes, "[t]here was a tear in the posterior horn of [the] lateral meniscus in the red red [sic] zone and the meniscus synovial junction." This tear was addressed; and the "retained implant" (i.e., the displaced screw) was removed from the lateral gutter.

On November 1, 2024, Dr. Wallace checked a box, and signed an opinion letter, that reads as follows:

In my medical opinion the on-the-job injury of Justin Dinet that occurred on or about October 18, 2024, represents the major cause of his knee problems that required orthopedic surgery at my direction.

In follow-up visits with Wallace, Claimant reported that he was making satisfactory progress with his right knee. As of January 22, 2025, he was having no knee pain.

Discussion. In this case, the evidence is clear that Claimant has an objective finding of an injury to his right knee. This finding comes from the surgery that took place on October 29, 2024, and reflects that Claimant suffered a meniscal tear in his right knee. The tear caused internal or external harm to the body that required medical services.

As for whether this injury arose out of and in the course of his employment at Respondent Hytrol, and was caused by a specific incident that is identifiable by time and place of occurrence, the evidence shows that before the October 18, 2024, incident, Claimant was able to perform the physical requirements of his job without any problems. This was corroborated by at the hearing by his wife, brother, and father. Claimant not only was working at Hytrol; but he was also employed at Cane Academy—where he engaged in youth sports.

But this changed on October 18, 2024. On that date, Claimant twisted his knee—which popped—when a pallet jack that he was pulling struck his right heel. As corroborated by the other witnesses, Claimant had to be driven in a cart to his father’s workstation, where he obtained the keys to his father’s truck. His father, Steven, drove him home. There, his wife, Molly, drove him back to the medical clinic at Hytrol, where Claimant saw Campbell, the nurse there. He told her that he was going to contact Wallace’s office. This took place, as borne out by the fact that Claimant ended up going there later that day. I credit Claimant’s testimony that while, as a result of the August 2024, pool incident, he had been scheduled to undergo surgery to remove a displaced screw in his knee—which had been implanted as part of an ACL reconstruction that he underwent—he later decided not to have the procedure and informed Dr. Wallace’s office of this. Regardless, Wallace operated Claimant on October 29, 2024—ostensibly to remove the defective hardware in question. But in the course of this procedure, the surgeon discovered the torn meniscus; this finding was not present on the August 1, 2024, CT scan. I credit Dr. Wallace’s deposition testimony that such a tear can be seen on a CT scan on an MRI.

The evidence preponderates that Claimant did not suffer this tear as a result of the swimming pool incident. A causal relationship may be established between an employment-related incident and a subsequent physical injury based on the evidence that the injury manifested itself within a reasonable period of time following the incident, so that the injury is logically attributable to the incident, where there is no other reasonable explanation for the injury. *Hall v. Pittman Construction Co.*, 234 Ark. 104,

357 S.W.2d 263 (1962). I likewise credit the testimony of Claimant and Molly that the motor vehicle accident of September 10, 2024, did not cause Claimant to suffer any real knee trouble; certainly not symptoms pointing to a meniscal tear. Instead, the preponderance of the evidence establishes that the tear—the injury to Claimant’s right knee—was sustained in the October 18, 2024, pallet jack incident, which occurred at approximately 5:40 a.m. that day. This injury was thus caused by a specific incident that is identifiable by time and place of occurrence, and arose out of and in the course of his employment with Respondent Hytrol.

Medical evidence is not ordinarily required to prove causation. *Wal-Mart v. Van Wagner*, 337 Ark. 443, 990 S.W.2d 522 (1999). But if a medical opinion is offered on causation, the opinion must be stated within a reasonable degree of medical certainty. Ark. Code Ann. § 11-9-102(16)(B) (Repl. 2012). The Commission is authorized to accept or reject a medical opinion and is authorized to determine its medical soundness and probative value. *Poulan Weed Eater v. Marshall*, 79 Ark. App. 129, 84 S.W.3d 878 (2002); *Green Bay Packing v. Bartlett*, 67 Ark. App. 332, 999 S.W.2d 692 (1999). I credit Dr. Wallace’s causation opinion that ties Claimant’s torn meniscus to the October 18, 2024, incident at Hytrol. In so doing, I note that the doctor, who was the one who operated on Claimant’s knee and was able to observe the meniscal tear, described it as not only “recent,” but of such a nature that it would not have been caused by grinding against a foreign object—such as a screw. In sum, I find that Claimant has proven by a preponderance of the evidence that he sustained a compensable right knee injury by specific incident.

B. Medical Treatment

Introduction. Claimant has alleged that he is entitled to reasonable and necessary medical treatment of his alleged right knee injury.

Standards. Arkansas Code Annotated Section 11-9-508(a) (Repl. 2012) states that an employer shall provide for an injured employee such medical treatment as may be necessary in connection with the injury received by the employee. *Wal-Mart Stores, Inc. v. Brown*, 82 Ark. App. 600, 120 S.W.3d 153 (2003). But employers are liable only for such treatment and services as are deemed necessary for the treatment of the claimant's injuries. *DeBoard v. Colson Co.*, 20 Ark. App. 166, 725 S.W.2d 857 (1987). The claimant must prove by a preponderance of the evidence that medical treatment is reasonable and necessary for the treatment of a compensable injury. *Brown, supra*; *Geo Specialty Chem. v. Clingan*, 69 Ark. App. 369, 13 S.W.3d 218 (2000). What constitutes reasonable and necessary medical treatment is a question of fact for the Commission. *White Consolidated Indus. v. Galloway*, 74 Ark. App. 13, 45 S.W.3d 396 (2001); *Wackenhut Corp. v. Jones*, 73 Ark. App. 158, 40 S.W.3d 333 (2001).

As the Arkansas Court of Appeals has held, a claimant may be entitled to additional treatment even after the healing period has ended, if said treatment is geared toward management of the injury. See *Patchell v. Wal-Mart Stores, Inc.*, 86 Ark. App. 230, 184 S.W.3d 31 (2004); *Artex Hydrophonics, Inc. v. Pippin*, 8 Ark. App. 200, 649 S.W.2d 845 (1983). Such services can include those for the purpose of diagnosing the nature and extent of the compensable injury; reducing or alleviating symptoms resulting from the compensable injury; maintaining the level of healing achieved; or preventing

further deterioration of the damage produced by the compensable injury. *Jordan v. Tyson Foods, Inc.*, 51 Ark. App. 100, 911 S.W.2d 593 (1995); *Artex, supra*.

Discussion. I find that Claimant has proven by a preponderance of the evidence that he is entitled to reasonable and necessary medical treatment of his compensable right knee injury, including the October 29, 2024, surgical repair of his torn meniscus and related treatment. Moreover, I have reviewed all of such treatment that is in evidence, and find that all of it was reasonable and necessary.

As stated above, Wallace on October 29, 2024, performed a “right knee arthroscopy with lateral meniscal repair and deep implant removal.” The evidence readily shows that (1) the “deep implant removal” pertains to a broken screw that was discovered by a CT scan on August 1, 2024, following the pool incident; and (2) the surgical removal of said screw was recommended prior to the work-related October 18, 2024, incident at Hytrol, but the removal had not taken place. In order for me to find that Respondent Hytrol is liable for the screw removal, Claimant must prove that it is causally related to his compensable injury of October 18, 2024. See *Pulaski Cty. Spec. Sch. Dist. v. Tenner*, 2013 Ark. App. 569, 2013 Ark. App. LEXIS 601. It is not. Thus, Respondents are not responsible for this particular surgical procedure.

CONCLUSION AND AWARD

Respondents are hereby directed to pay/furnish benefits in accordance with the findings of fact and conclusions of law set forth above. All accrued sums shall be paid in a lump sum without discount, and this award shall earn interest at the legal rate until

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paid, pursuant to Ark. Code Ann. § 11-9-809 (Repl. 2012). See *Couch v. First State Bank of Newport*, 49 Ark. App. 102, 898 S.W.2d 57 (1995).

IT IS SO ORDERED.

Hon. O. Milton Fine II
Chief Administrative Law Judge