

**WORKERS' COMPENSATION APPEALS BOARD
STATE OF CALIFORNIA**

MICHAEL ADAME, *Applicant*

vs.

**LEK ENTERPRISES, INC.; SENTINAL INSURANCE,¹ administered by THE
HARTFORD, *Defendants***

**Adjudication Number: ADJ19894287
Van Nuys District Office**

**OPINION AND ORDER
GRANTING PETITION FOR
RECONSIDERATION
AND DECISION AFTER
RECONSIDERATION**

Applicant filed a Petition for Reconsideration (Petition) of the Findings of Fact and Orders (FF&O) issued August 8, 2025, wherein the workers' compensation administrative law judge (WCJ) found that applicant failed in his burden of proving he sustained industrial injury to his back, hips, ankle, diabetes, internal, and psyche arising out of and in the course of his employment.

In the Petition, applicant asserts the WCJ should not have denied injury but instead developed the record on the issue of injury.

Defendant filed an Answer.

The WCJ's Report and Recommendation (Report) recommends the Petition be denied.

We have considered the allegations of the Petition, the Answer and the contents of the Report of the WCJ with respect thereto.

Based on our review of the record and for the reasons discussed below, we will grant reconsideration, rescind the FF&O and return the case to the WCJ to allow the parties an opportunity to provide evidence in the form of expert medical opinion and for further proceedings

¹ We use "Sentinal Insurance" to name the insurer consistent with the FF&O. As will be discussed below, this appears to be an error, and the correct name should be confirmed in any further proceedings.

consistent with this decision including, if appropriate, for the WCJ to reconsider witness credibility in light of such expert medical opinion and to correct the named insurer.

I.

Former Labor Code section 5909² provided that a petition for reconsideration was deemed denied unless the Appeals Board acted on the petition within 60 days from the date of filing. (Former Lab. Code, § 5909.) Effective July 2, 2024, section 5909 was amended to state in relevant part that:

- (a) A petition for reconsideration is deemed to have been denied by the appeals board unless it is acted upon within 60 days from the date a trial judge transmits a case to the appeals board.
- (b) (1) When a trial judge transmits a case to the appeals board, the trial judge shall provide notice to the parties of the case and the appeals board.

(2) For purposes of paragraph (1), service of the accompanying report, pursuant to subdivision (b) of Section 5900, shall constitute providing notice.

(Lab. Code, § 5909.)

Under section 5909(a), the Appeals Board must act on a petition for reconsideration within 60 days of transmission of the case to the Appeals Board. Transmission is reflected in Events in the Electronic Adjudication Management System (EAMS). Specifically, in Case Events, under Event Description is the phrase “Sent to Recon” and under Additional Information is the phrase “The case is sent to the Recon board.”

Here, according to Events the case was transmitted to the Appeals Board on September 8, 2025, and 60 days from the date of transmission is Friday, November 7, 2025. This decision issued by or on November 7, 2025, so that we have timely acted on the Petition as required by section 5909(a).

Section 5909(b)(1) requires that the parties and the Appeals Board be provided with notice of transmission of the case. Transmission of the case to the Appeals Board in EAMS provides notice to the Appeals Board. Thus, the requirement in subdivision (1) ensures that the parties are notified of the accurate date for the commencement of the 60-day period for the Appeals Board to

² Unless otherwise stated, all further statutory references are to the Labor Code.

act on a petition. Section 5909(b)(2) provides that service of the Report shall be notice of transmission.

According to the proof of service, the Report was served on September 8, 2025, and the case was transmitted to the Appeals Board on September 8, 2025. Service of the Report and transmission of the case to the Appeals Board occurred on the same day. Thus, we conclude that the parties were provided with the notice of transmission required by section 5909(b)(1) because service of the Report in compliance with section 5909(b)(2) provided them with actual notice as to the commencement of the 60-day period on September 8, 2025.

II.

The record consists of twenty-one exhibits and the testimony of three witnesses. A summary of relevant portions of the record follows.

On June 10, 2024, there is a Progress Note from Johnny Jiang, P.A., regarding follow-up for labs, which includes the notation of low back pain, unspecified. (Exhibit C, Johnny Jiang, P.A., June 10, 2024, PDF pages 1-2.)

There are multiple texts, documents and emails during the period July 29, 2024, to September 18, 2024. (Exhibit A.)

On August 12, 2024, there is Progress Note, from Johnny Jiang, P.A., with chief complaint of patient “is here today for a f/u, c/o ‘extreme pain’ from right thigh to right ankle, pt c/o nausea x vomiting, was not able to take pt's vital signs due to patient currently in pain, not being able to sit down.” History includes several metabolic conditions and the applicant “presents for right lower back and hip pain that radiates to the right ankle. Patient was given tylenol-codiene but reports that it helps very little. He reports numbness all the way down to the right toes. He denies calf swelling, recent falls/injuries, chills, groin numbness, incontinence, rashes, swelling, redness. He states that it may be due to work and walking up and down stairs.” And further patient “reports ear fullness, sinus pain, rhinorrhea, and nasal congestion for 4 days. He reports subjective fever and headaches.” (Exhibit J1, Progress Note, Johnny Jiang, P.A., August 12, 2024, page 1.) The assessment included “Morbid (severe) obesity due to excess calories,” “Lumbago with sciatica, right side,” “Other chronic pain,” “Acute frontal sinusitis, unspecified,” and “Bilious vomiting (Mild).” The applicant was prescribed gabapentin for nerve pain, an antibiotic, and ondansetron for nausea. The plan included “Lumbago with sciatica, right side,” “Patient unable to do vitals due to pain.” Lumbar

MRI with and without contrast was ordered on a STAT basis. (Exhibit J1, Progress Note, Johnny Jiang, P.A., August 12, 2024, page 3.) In an attached August 19, 2024, addendum it as noted the patient “is unable to schedule MRI with and without contrast for another month. He can get an appt this week if it is without contrast.” The request was modified to a lumbar MRI without contrast. (Exhibit J1, Progress Note, Johnny Jiang, P.A., August 12, 2024, page 5.)

Also on, August 12, 2024, applicant was provided with a return to work note from Johnny Jiang, P.A., stating patient is able to return to work/school on August 19, 2024, with no restrictions or limitations. (Exhibit 17, Johnny Jiang, P.A., August 19, 2024.)

On Tuesday, August 13, 2024, there is a text message from applicant to his supervisor Smith, “Yo, good morning hey, I need a little bit time at your time to get out there dude I just woke up. I took a pain pill last night. My leg is killing me.” (Exhibit 16.)

There is an August 22, 2024, MRI of lumbar spine without contrast by Randy Taylor, M.D., Centre Lake Imaging, with impression: “Right subarticular disc protrusion at L4-5 superimposed upon an annular fissure with associated effacement of the right lateral recess and impingement of the right L5 nerve root. Mild-to-moderate bilateral neural foraminal stenosis with mild-to moderate spinal stenosis.” (Exhibit 15, Randy Taylor, M.D., August 22, 2024, page 2.)

On August 26, 2024, via Telehealth (Phone Only,) Johnny Jiang, P.A., referred applicant to an orthopedist. (Exhibit D, Johnny Jiang, P.A., August 26, 2024, page 3.)

Next is an October 3, 2024, return to work note from Johnny Jiang, P.A., stating when applicant “was seen in our office on August 12, 2024, it was for a work related injury.” (Exhibit 14, Johnny Jiang, P.A., October 3, 2024.)

On October 21, 2024, Andrew Mooney, D.C., issued a treating report. “Mr. Michael Adame states that he was hired on 06/10/2024 by LEK Enterprises as a traveling plumber. His usual and customary occupational duties were to install gas and water, and sewer pipes for commercial and residential buildings. Mr. Adame worked 8-9 hours per day, 5 days per week. On 08/08/2024, Mr. Adame states that he was working in an apartment building and was drilling holes for piping through studs and concrete in the City of Oxnard. He states that he was on an 8- foot ladder drilling and pushing up pipe at the same time. Mr. Adame reports that both of his hands were overhead drilling and when he leaned towards his right side, he felt sharp pain in his lower back and his entire right leg went numb. He states that the machine he was holding was about 80 pounds and the piping was 20 pounds.” (Exhibit 13, Andrew Mooney, D.C., October 21, 2024,

page 2-3.) Medical records were reviewed and the diagnoses were: 1. Lumbar Spine Strain/ Sprain with Myalgia, 2. Lumbar Spine Disc Displacement, 3. Lumbar Spine Radiculitis, 4. Reported Pre-Diabetes, and 5. Reported Stress, Depression and Anxiety. For causation the lumbar spine “based upon Labor Codes 4663 and 4664, it is my professional medical opinion that 100% of Mr. Adame's disability/impairment is compensable with and directly attributable to his specific industrial injury of 08/08/2024 while employed at LEK Enterprises,” while the for the claimed internal and psyche injuries it was the “examiner's opinion that these conditions are best evaluated by the appropriate specialists regarding AOE/COE.”³ Chiropractor Mooney states “I find that Mr. Adame's presentation of the facts of his work duties and incident of injury relating to his claimed industrial injuries as viable and medically reasonable.” (Exhibit 13, Andrew Mooney, D.C., October 21, 2024, page 10.)

There is a November 26, 2024, abnormal EMG study by Bipin Bharatwal, M.D., West Coast Rehab Center, Medical Corp., with “electromyographic evidence that is consistent with active denervation potentials noted in the right LS distribution. This finding is usually most consistent with an active right L5 radiculopathy.” (Exhibit 12, Bipin Bharatwal, M.D., November 26, 2024, PDF page 4.)

On December 4, 2024, Jonathon F. Kohan, M.D., issued a Secondary Physician Pain Management Initial Report. (Exhibit 11, Jonathon F. Kohan, M.D., December 4, 2024.) This exhibit includes a December 23, 2024, Request for Authorization for lumbar epidural injection at L4-5. (Exhibit 11, Jonathon F. Kohan, M.D., December 4, 2024, PDF page 2.) Doctor Kohan also issued reports of January 10, 2025, (Exhibit 9,) February 7, 2025, (Exhibit 6,) March 21, 2025, (Exhibit 4,) and May 2, 2025, (Exhibit 2.)

On January 30, 2025, a Doctor's First Report of Occupational Injury or Illness was issued by Alma Garcia, supervised by Ana Nogales, Ph.D., with Request for Authorization individual psychotherapy. Date of injury is listed as August 8, 2024. “Patient reported that there was significant amount of anxious distress due to lack of support and help to perform his duties. The patient reported that this lead [*sic*] to a physical injury and was forced to work after his injury. The patient reported that he requested assistance to complete a heavy job. He was denied assistance

³ The previous selections are essentially copied through all subsequent reports by chiropractor Mooney but are only presented once here for brevity. (See, December 12, 2025, Exhibit 10; January 14, 2025, Exhibit 8; February 19, 2025, Exhibit 5; and March 25, 2025, Exhibit 3.)

and he partially falls off a ladder. He felt a pinch and pull on the leg.” “The patient reported symptoms of agoraphobia. Scared to be in public spaces. Patient difficulties controlling the worry. Patient having negative ruminating thoughts. Patient reported little to no difficulties in this area. He does report having some issues falling asleep but is able to stay asleep. Reports issues with concentration. The patient reported that he has isolated from friends due to fears around his physical limitations.” (Exhibit 7, Alma Garcia, supervised by Ana Nogales, Ph.D., January 30, 2025, PDF page 2.) Diagnosis was “Generalized Anxiety Disorder.” Findings and diagnosis were consistent with applicant’s account of injury. (Exhibit 7, Alma Garcia, supervised by Ana Nogales, Ph.D., January 30, 2025, PDF page 3.)

Most recently on March 17, 2025, Alexander Ghasem, M.D., issued a Follow-Up Report of a Secondary Physician, with Request for Authorization. (Exhibit 1, Alexander Ghasem, M.D., March 17, 2025.)

During the first day of trial, applicant testified during direct testimony that his injury occurred “around August 8,” that he “was on an 8-foot ladder,” and he “drilled which caused him to be pulled to the right. He felt pain in his right butt cheek and leg, and it felt numb after about 30 minutes.” (Minutes of Hearing, Summary of Evidence (MOH Day One), June 2, 2025, page 5, lines 11-12, and 15-18.) During cross examination the applicant testified the “injury happened on Tuesday or on August 7; he is unclear.” (MOH Day One, page 6, lines 22-23.)

On the second day of trial, applicant’s supervisor, Kishnai Smith, testified he “was employed during the week of August 5, 2024 through August 9, 2024,” and “he worked with a crew that included the applicant.” (Minutes of Hearing, Summary of Evidence, July 9, 2025, (MOH Day Two), page 2, lines 7-10.) Applicant told the supervisor Smith “he was drilling, but nothing to the effect that he was injured.” (MOH Day Two, page 2, lines 22-23.) During cross examination supervisor Smith testified that on August 8, 2024, “the applicant walked up to him and reported his sciatica but said that he needed to work and make money.” (MOH Day Two, page 3, lines 9-10.)

The defendant’s controller, Kate Gadberry, testified under cross examination she was never at the site where applicant claimed injury and “had no personal knowledge of what transpired.” (MOH Day Two, page 5, lines 7-8.)

Finally, applicant's co-worker, Charlie Murillo, testified that he was "aware that the applicant had back pain prior to the job" where applicant claimed injury. (MOH Day Two, page 6, lines 6-9.)

On this record the WCJ found applicant "failed in his burden of proving he sustained industrial injury" on August 8, 2024. (FF&O, page 1, Finding 1.)

III.

As stated by the WCJ in the MOH Day One, applicant while employed by defendant on August 8, 2024, as a plumber, claims to have sustained injury arising out of and occurring in the course of employment to the back, hips, ankle, diabetes, internal, and psyche.

In support of finding applicant failed in his burden of proving he sustained industrial injury the WCJ states in part:

The court concludes that the applicant lacks the requisite credibility to find in his favor. The date of injury is unclear, the day of the injury is unclear, the August 12 medical report reflects a denial of injury (contrary to his testimony), the treating doctor reports deny any prior injuries (although he has a prior history of pain and injuries), and the testimony over a made-up car accident makes no sense and is contradictory. On top of this is the fact that Dr. Jiang produced a report dated June 10, 2024 (i.e., two months before the alleged injury) stating that the applicant had "[l]ow back pain, unspecified" and "[e]ncounter for screening for depression".

Neither Dr. Mooney's nor Dr. Kohan's reports take any kind of history of this prior condition, and none of their reports review this one. The report from Nogales psychiatric lacks any history as well. Dr. Mooney's reports dated December 12, 2024, January 14, 2025, and February 19, 2025 review Dr. Jiang's reports of August 12, 2024 and August 26, 2024, but not the one dated June 10, 2024. Although Dr. Jiang's report of October 3, 2024 says the applicant was seen on August 12, 2024 for a work-related injury, the court cannot ignore the timeline that this report was produced six days after the applicant retained counsel.

(FF&O, Opinion on Decision, page 6.)

A.

A decision must be based on admitted evidence in the record and must be supported by substantial evidence. (Lab. Code, §§ 5903, 5952(d); *Lamb v. Workmen's Comp. Appeals Bd.* (1974) 11 Cal.3d 274, 281 [39 Cal.Comp.Cases 310]; *Garza v. Workmen's Comp. Appeals Bd.* (1970) 3 Cal.3d 312, 317 [35 Cal.Comp.Cases 500]; *LeVesque v. Workers' Comp. Appeals Bd.*

(1970) 1 Cal.3d 627, 637 [35 Cal.Comp.Cases 16].) Where the issue in dispute is a medical one, expert medical evidence is ordinarily needed to resolve the issue. (*Insurance Co. of North America v. Workers' Comp. Appeals Bd.* (1981) 122 Cal.App.3d 905, 912 [46 Cal.Comp.Cases 913]; *Peter Kiewit Sons v. Industrial Acc. Com.* (1965) 234 Cal.App.2d 831, 838 [30 Cal.Comp.Cases 188].)

Medical evidence that industrial injury was reasonably probable, although not certain, constitutes substantial evidence for a finding of injury AOE/COE. (*McAllister v. Workers' Comp. Appeals Bd.* (1968) 69 Cal.2d 408, 417 [33 Cal.Comp.Cases 660].) Although the factual issue of the occurrence of the alleged incident is a determination for the WCJ, the issue of injury is a medical determination, which requires expert medical opinion. As the Court of Appeal explained in *Peter Kiewit Sons v. Industrial Acc. Com.* (1965) 234 Cal.App.2d 831, 838 [30 Cal.Comp.Cases 188]: “Where an issue is exclusively a matter of scientific medical knowledge, expert evidence is essential to sustain a [WCAB] finding; lay testimony or opinion in support of such a finding does not measure up to the standard of substantial evidence. Expert testimony is necessary where the truth is occult and can be found only by resorting to the sciences.”

Within a few days of the claimed injury applicant was found to have lumbago with sciatica on the right side of sufficient severity that the treater ordered a lumbar MRI on an urgent basis. (Exhibit J1, Progress Note, Johnny Jiang, P.A., August 12, 2024, page 2.) The resulting August 22, 2024, MRI of the lumbar spine revealed “[r]ight subarticular disc protrusion at L4-5 superimposed upon an annular fissure with associated effacement of the right lateral recess and impingement of the right L5 nerve root,” (Exhibit 15, Randy Taylor, M.D., August 22, 2024, page 2,) and the November 26, 2024, abnormal EMG study showed findings “usually most consistent with an active right L5 radiculopathy.” (Exhibit 12, Bipin Bharatwal, M.D., November 26, 2024, PDF page 4.)

On this record the issue of injury to applicant’s lumbar spine at the L4-5 level is a medical determination, which requires expert medical opinion. It is unclear if the findings at the L4-5 level are pre-existing, idiopathic, otherwise of non-industrial origin, the result of cumulative injury, or a result of the claimed injury. Here the truth is occult and can be found only by resorting to the sciences. (*Peter Kiewit Sons, supra.*)

On October 3, 2024, Johnny Jiang, P.A., stated applicant was seen on August 12, 2024, “for a work related injury.” (Exhibit 14, Johnny Jiang, P.A., October 3, 2024, emphasis added.)

Neither this note nor the other notes from Johnny Jiang, P.A., explain the mechanism of this work injury.

On October 21, 2024, Andrew Mooney, D.C., stated “it is my professional medical opinion that 100% of Mr. Adame's disability/impairment is compensable with and directly attributable to his specific industrial injury of 08/08/2024 while employed at LEK Enterprises,” and further “I find that Mr. Adame's presentation of the facts of his work duties and incident of injury relating to his claimed industrial injuries as viable and medically reasonable.” (Exhibit 13, Andrew Mooney, D.C., October 21, 2024, page 10.) However as pointed out by the WCJ in the opinion on decision above, chiropractor Mooney did not review or comment on the back pain noted in the Johnny Jiang, P.A., note of June 10, 2024.

The January 30, 2025, Doctor's First Report of Occupational Injury or Illness issued by Alma Garcia, supervised by Ana Nogales, Ph.D., shows an August 8, 2024, date of injury, (Exhibit 7, Alma Garcia, supervised by Ana Nogales, Ph.D., January 30, 2025, PDF page 2,) and findings and diagnosis were consistent with applicant's account of injury. (Exhibit 7, Alma Garcia, supervised by Ana Nogales, Ph.D., January 30, 2025, PDF page 3.) However, this report also does not review nor comment on the back pain noted in the Johnny Jiang, P.A., note of June 10, 2024.

“Medical reports and opinions are not substantial evidence if they are known to be erroneous, or if they are based on facts no longer germane, on inadequate medical histories and examinations, or on incorrect legal theories. Medical opinion also fails to support the Board's findings if it is based on surmise, speculation, conjecture or guess.” (*Hegglin v. Workmen's Comp. Appeals Bd.* (1971) 4 Cal.3d 162, 169 [36 Cal.Comp.Cases 93].

Here the medical opinions of record commenting on causation are flawed. The other medical reports of record do not directly discuss causation. There is insufficient medical evidence on the issue of causation in either direction.

The WCJ and the Appeals Board have a duty to further develop the record where there is insufficient evidence on an issue. (*McClune v. Workers' Comp. Appeals Bd.* (1998) 62 Cal.App.4th 1117, 1121-1122 [63 Cal.Comp.Cases 261].) The Appeals Board has a constitutional mandate to “ensure substantial justice in all cases.” (*Kuykendall v. Workers' Comp. Appeals Bd.* (2000) 79 Cal.App.4th 396, 403 [65 Cal.Comp.Cases 264].) The Board may not leave matters undeveloped where it is clear that additional discovery is needed. (*Id.* at p. 404.) The preferred procedure is to allow supplementation of the medical record by the physicians who have already reported in the

case. (*McDuffie v. Los Angeles County Metropolitan Transit Authority* (2003) 67 Cal.Comp.Cases 138, 142 (Appeals Board en banc).) Here, we are not convinced the lack of medical evidence will be cured by returning to the prior physicians who have opined on causation.

The parties are to obtain expert medical opinion addressing the relevant workers' compensation issues, specifically including industrial causation. This is to be done either by way of Agreed Medical Examiner (AME) or by initiating the Panel Qualified Medical Examiner (PQME) process as set out in the Labor Code beginning with section 4060 for denied claims.

B.

The WCJ concluded "the applicant lacks the requisite credibility to find in his favor. The date of injury is unclear, the day of the injury is unclear, the August 12 medical report reflects a denial of injury (contrary to his testimony)." (FF&O, Opinion on Decision, page 6.)

Ordinarily we give the WCJ's credibility determination great weight because the WCJ had the opportunity to observe the demeanor of the witness. (*Garza v. Workmen's Comp. Appeals Bd.* (1970) 3 Cal.3d 312, 319 [35 Cal.Comp.Cases 500].) Here, however, we will return this case to the WCJ for further proceedings including re-visiting the credibility of the witnesses if appropriate once expert medical opinion on injury is available.

Should witness credibility remain an issue after expert medical opinion is obtained, we provide the following observations for the WCJ's consideration:

The WCJ should reconsider how the August 12, 2024, Progress Note from Johnny Jiang, P.A., affects applicant's credibility when applicant was complaining of "extreme pain" from the right thigh to right ankle, "nausea" with "vomiting," and the treater was not able to take applicant's vital signs due applicant's pain and not being able to sit down. It was noted that Tylenol with Codeine was of very little help. Considering this extra context may help evaluating the treater's recording of applicant's statement as his symptoms "may be due to work and walking up and down stairs." (Exhibit J1, Progress Note, Johnny Jiang, P.A., August 12, 2024, page 1.) Further context on applicant's credibility during the visit comes from applicant having "[a]cute frontal sinusitis, unspecified," and "[b]ilious vomiting ([m]ild)," as well as being prescribed gabapentin for nerve pain, an antibiotic (presumably for the sinuses), and ondansetron for nausea, as well as the treater ordering a lumbar MRI on an urgent basis. (Exhibit J1, Progress Note, Johnny Jiang, P.A., August 12, 2024, page 2.)

Further consideration of credibility should also weigh and discuss the report that applicant “reported symptoms of agoraphobia. Scared to be in public spaces. Patient difficulties controlling the worry. Patient having negative ruminating thoughts.” Also, applicant reports “issues with concentration. The patient reported that he has isolated from friends due to fears around his physical limitations.” (Exhibit 7, Alma Garcia, supervised by Ana Nogales, Ph.D., January 30, 2025, PDF page 2.) These reported symptoms may be considered along with the diagnosis of “Generalized Anxiety Disorder.” (Exhibit 7, Alma Garcia, supervised by Ana Nogales, Ph.D., January 30, 2025, PDF page 3.)

Witness testimony should be considered not only to identify potential conflicts but also points of congruence. For example, applicant’s supervisor, Kishnai Smith, testified he “was employed during the week of August 5, 2024 through August 9, 2024,” and that “he worked with a crew that included the applicant.” (Minutes of Hearing, Summary of Evidence, July 9, 2025, (MOH Day Two), page 2, lines 7-10.) Applicant told the supervisor Smith “he was drilling, but nothing to the effect that he was injured.” (MOH Day Two, page 2, lines 22-23.) During cross examination, however, supervisor Smith testified that on August 8, 2024, “the applicant walked up to him and reported his sciatica but said that he needed to work and make money.” (MOH Day Two, page 3, lines 9-10.)

From this testimony it appears that supervisor Smith worked with the applicant the week of the claimed injury, confirmed applicant was drilling, and that “the applicant walked up to him and reported his sciatica.” If after expert medical opinion is obtained credibility is still in issue any congruencies in testimony should also be considered.

Further, when considering injury the WCJ states “Although Dr. Jiang’s report of October 3, 2024 says the applicant was seen on August 12, 2024 for a work-related injury, the court cannot ignore the timeline that this report was produced six days after the applicant retained counsel.” (FF&O, Opinion on Decision, page 6, referring to Exhibit 14, Johnny Jiang, P.A., October 3, 2024.)

We are unable to discern the purpose of the WCJ’s statement. On the surface it would appear the unpoetic thread being spun is that physician assistant Jiang is not credible and, further, is subject to the corrupt influence of applicant’s counsel. Without more analysis and substance, this statement appears to be a distracting gossamer at odds with the proposition it may be meant to support.

C.

There is a question as to the proper name for the insurer in this case as where a name is shown on the pleadings the insurer is named as “Sentinal Insurance.”

A review of the California Department of Insurance online company profile search reveals no admitted carrier providing workers’ compensation coverage under the name “Sentinal Insurance.”⁴ It appears the most likely insurer for this case is “Sentinel Insurance Company, Ltd.,” (with “Sentinel” ending in “el”), a member of the Hartford Fire and Casualty Group.

In any further proceedings the proper insurer should be confirmed. Under WCAB Rule 10390 (Cal. Code Regs., tit. 8, §10390), all parties must provide their full legal name on all pleadings and at any appearance, including the names of the employer, insurance company and any third-party administrator. (See *Coldiron v. Compuware Corp.* (2002) 67 Cal.Comp.Cases 289 (Appeals Bd. en banc) [defendant attorneys must disclose proper legal names for the employer, insurance company and any third-party administrator and failure to do so may subject the offending party to sanctions]; and see *Jillian DiFusco v. Hands On Spa* (2025) 90 Cal.Comp.Cases ***, (Appeals Bd. en banc) [WCAB Rule 10390 does not supersede the *Coldiron* decisions. Defendants must comply with WCAB Rule 10390 and the disclosure requirements in *Coldiron I* and *II*, regardless of whether there is a third-party administrator].)

IV.

Following our independent review of the record occasioned by applicant’s Petition, we are persuaded that expert medical opinion is necessary in this case either by way of Agreed Medical Examiner or by Panel Qualified Medical Examiner. Once expert medical opinion is obtained, the WCJ may revisit witness credibility if appropriate. Finally, defendant attorney must disclose the proper legal names for the insurance company and any third-party administrator.

We express no opinion as to the ultimate resolution of any issue in this matter.

Accordingly, we grant defendant’s Petition for Reconsideration, rescind the August 8, 2025, FF&O, and return the case to the trial level for further proceedings consistent with this opinion.

⁴ See: <https://interactive.web.insurance.ca.gov/companyprofile/companyprofile?event=companyProfile>

For the foregoing reasons,

IT IS ORDERED that applicant's Petition for Reconsideration of the August 8, 2025, Findings of Fact and Orders is **GRANTED**.

IT IS FURTHER ORDERED as the Decision After Reconsideration of the Workers' Compensation Appeals Board that the August 8, 2025, Findings of Fact and Orders is **RESCINDED**, and the matter is **RETURNED** to the trial level for further proceedings consistent with this opinion.

WORKERS' COMPENSATION APPEALS BOARD

/s/ KATHERINE WILLIAMS DODD, COMMISSIONER

I CONCUR,

/s/ CRAIG L. SNELLINGS, COMMISSIONER

/s/ JOSEPH V. CAPURRO, COMMISSIONER



DATED AND FILED AT SAN FRANCISCO, CALIFORNIA

November 7, 2025

SERVICE MADE ON THE ABOVE DATE ON THE PERSONS LISTED BELOW AT THEIR ADDRESSES SHOWN ON THE CURRENT OFFICIAL ADDRESS RECORD.

**MICHAEL ADAME
WHATES LAW
LAW OFFICES OF TOBIN LUCKS**

PS/oo

*I certify that I affixed the official seal of
the Workers' Compensation Appeals
Board to this original decision on this
date. o.o*