WORKERS' COMPENSATION APPEALS BOARD
STATE OF CALIFORNIA

TODD FIELDS, *Applicant*

vs.

UNIFIRST CORPORATION,
insured by ACE AMERICAN INSURANCE,
administered by CORVEL, *Defendants*

Adjudication Number: ADJ12302753
Lodi District Office

OPINION AND ORDER DENYING PETITION FOR RECONSIDERATION

Defendant has filed a timely, verified Petition for Reconsideration of the October 27, 2025 Findings and Award (F&A)[1] of the workers' compensation administrative law judge (WCJ), who found, in pertinent part, that on February 20, 2018, applicant sustained injury arising out of and in the course of his employment (AOE/COE) with defendant as a driver, to his left knee and right hip, and claims to have sustained injury AOE/COE to the heart and internal organs. The WCJ deferred a finding on the issue of whether applicant also sustained injury to his heart and internal organs, including sleep apnea, other than for industrial injury in the form of hypertension, which was found industrial. Applicant was further found to be entitled to further medical care, including for his hypertension.

Defendant contends that (1) the WCJ applied an incorrect legal standard for California Labor Code[2] section 5410 for a petition to reopen for a new and further disability, (2) the WCJ erred in when he disregarded the prior stipulated award and ignored the fundamental legal principles of waiver and settlement finality, (3) the WCJ misinterpreted *Sarabi v. Workers' Compensation Appeals Bd.* (2007) 151 Cal.App.4th 920 [72 Cal. Comp. Cases 778], (4) applicant

[1] We note that although the WCJ's decision is entitled "Findings and Award" it is in fact a Findings and Order.

[2] All further references are to the Labor Code unless otherwise specified.

lacks substantial evidence of a post-award worsening of disability, and (5) the stipulated award cannot be reopened based on good cause under section 5803 in the form of new and further evidence, because applicant's "new" evidence fails the reasonable diligence standard and constitutes an improper attempt to relitigate the stipulated award.

Applicant has filed a timely, verified answer to defendant's petition. Applicant asserts that the evidence meets the standard for new and further disability under section 5410, and that there is also good cause for the reopening and amendment of the stipulated award under section 5803.

The WCJ issued a Report and Recommendation (Report) recommending denial of the Petition.

We have considered the contents of the Petition for Reconsideration, the Answer, and the Report of the WCJ. Based on our review of the record, and for the reasons stated below, we will deny reconsideration.

FACTS

On October 27, 2022, the parties executed Stipulations with Request for Award (Stipulations) in which they stipulated that on February 20, 2018, applicant sustained injury AOE/COE to the "left knee and right hip only" with 33% permanent disability. On October 31, 2022 the Stipulations were approved in an Award issued by a WCJ. The Stipulations state that settlement is based on the opinions of Panel Qualified Medical Evaluator (PQME) Joseph A. Sclafani, M.D. (Stipulations 9/21/2022, p. 7, para. 9.)

Dr. Sclafani's report of March 24, 2020 found injury AOE/COE and assigned estimated percentages of permanent impairment to the left knee and right hip, even though applicant had not yet reached maximal medical improvement (MMI). (Defendant's Exhibit L, Report of Dr. Sclafani dated March 24, 2020, pp. 27-28.)

On January 8, 2022, applicant was re-evaluated by Dr. Sclafani, who at that point deferred to "a qualified examiner in the specialty of cardiology" regarding any cardiac issues. (Defendant's Exhibit M, Report of Dr. Sclafani dated February 15, 2022, p. 12.) The parties did not obtain a medical-legal opinion in cardiology to find out whether there was any industrial aggravation of applicant's heart or history of hypertension before obtaining a stipulated 33% permanent disability award on October 31, 2022.

On February 3, 2023, applicant filed a timely petition to reopen the stipulated award within five years of the date of injury as permitted by section 5410, based on the allegation that his condition had worsened, creating new and further disability.

Massoud Mahmoudi, M.D., evaluated applicant as a PQME in the specialty of internal medicine to address the petition to reopen. The parties took the deposition of Dr. Mahmoudi after he had issued three reports. Both of the PQMEs, Dr. Scalfani and Dr. Mahmoudi, found new and further disability within their respective specialties. Dr. Scalfani found that applicant has new and further disability of the left knee, beyond the scope of the stipulated award, including a subsequent fall that occurred on January 8, 2023 as a compensable consequence of the work injury of February 20, 2018:

> With respect to his left knee injury, this claim must be re-opened due to further aggravation. Therefore, the applicant is no longer considered to be at maximum medical improvement or a permanent and stationary status for the left knee injury that is under review.
>
> The applicant has sustained further impairments and disabilities secondary to the interval exposure of January 8, 2023. This mechanical fall event was described to have occurred due to subjective instability of the left knee, which is a plausible mechanistic occurrence. As a result, there has been radiographic evidence of implant loosening supported by the March 1, 2023 Nuclear Medicine Bone Scan. Furthermore, on examination, he presents with an interval decrease in total left knee range of motion, worsened gait mechanics, and pronounced pain elicitation/and instability of his left knee joint upon anterior-posterior stress testing.

(Applicant's Exhibit 5, Report of Dr. Scalfini dated 12/27/2023, p. 17.)

The reports and deposition testimony of internal medicine PQME Dr. Mahmoudi addressed the issue of whether there is new and further disability in his specialty. Dr. Mahmoudi's first report deferred a causation analysis pending records review. His second report, which included review of records, noted that hypertension was aggravated by Non-Steroidal Anti-Inflammatory Drugs (NSAIDs), and also noted the possibility that post-injury weight gain, if there is a diagnosis of sleep apnea, also contributed to the industrially caused hypertension from NSAID use:

> Review of records shows a trend of increasing blood pressure. Prior to the injury h[is]systolic pressure w[as] normal and stage 1 (per Table 4-1 of the Guides, the 5th edition). [P]ost injury there were few stage 2 measurements. Stage 2 is considered measurements of 160-179 systolic and 100-109 diastolic. In my evaluation his measurements were:
>
> 155/105 mmHg (left arm) and 153/95 (right arm). Usually the higher number is considered. The 155/105 is considered stage 2 hypertension.

> One of the causes of secondary hypertension is non-steroid anti-inflammatory drugs known as NSAIDs. Review of records reveals that in fact he was on that class of medication prior to the injury of 2018. Other causes include thyroid disorder and sleep apnea among others. Although his Epworth test was within normal limits during my evaluation he reported a weight gain of 22 lbs post injury and being less active. Due to weight gain, snoring, and hypertension he should be tested for sleep apnea. If he is diagnosed with sleep apnea the condition would be considered industrial, depending a trend of weight gain post injury.
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> After reviewing the records of the cardiologist including his recent one and diagnostic testing (if any besides what we already have), I will order some lab tests and an echocardiography to assess an end-organ damage.

(Applicant's Exhibit 2, Report of Dr. Mahmoudi dated 9/11/2024, at p. 11.)

Dr. Mahmoudi's third report of March 5, 2025 reviewed more records and noted that applicant had blood pressure of 185/117, which constitutes stage 3 hypertension, at the time of his evaluation on January 8, 2023. This is the only blood pressure reading within the three-month period between October 31, 2022, the date of the stipulated award, and February 3, 2023, the date of the petition to reopen the award. Dr. Mahmoudi notes that ideally there would be a series of blood pressure readings in order to address defendant's question of whether there is evidence of new and further disability in the form of hypertension during this three-month period. On the other hand, Dr. Mahmoudi does acknowledge that this is evidence of a significant level of hypertension. The March 5, 2025 report accordingly does not clearly answer the question of whether there is new and further disability within the three-month period prior to the petition to reopen. (Applicant's Exhibit 3, Report of Dr. Mahmoudi dated 3/5/2025, at p. 12.)

At his deposition, upon cross-examination by applicant's counsel, Mr. Mahmoudi clarified that he does find industrial aggravation of applicant's hypertension:

> Q. So I believe the three-month question period was [defense attorney] Mr. Hanthorn's question. Applicant's theory here is that, due to my client's previous TKR, which is industrially caused, and the fact that he's continued to have issues with that knee, he's likely deconditioning, do you think that there is a cumulative affect due to the orthopedic injury that may be causing industrial hypertension here?
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> A. Yes. And I believe I mentioned in one of my reports that there was a trend of increasingly blood pressure during that employment, during that injury and forward, yeah. But I have to look at it over again. But it looks like there was an increase of blood pressure, but then I only emphasize in that three months.
>
> Q. Do you remember if that was in one of your supplemental records or if that was in your initial evaluation report?

A. I can look. It might have been in the second or third one, because I think -- I don't believe I was provided with any records for initial evaluation, so I didn't have anything.

Q. Okay.

A. It may be in the second one, possibly on March 5 report, but I can look right now.

Q. Sure, if you don't mind, Doctor. And I'll do the same.

A. Sure. Right. That's page 11 of my March 5, '25 report.

Q. And, Doctor, can you read the section that you're referring to?

A. Sure. It says, the second paragraph, Review of records shows a trend of increasing blood pressure. That is that one. That is that.

And then, Prior to the injury, that systolic pressure was normal in a Stage 1 for Table 41 of the guides. Postinjury, there were few Stage 2 measurements. Stage 2 is considered measurement of 160 to 179 systolic and 100 to 109 diastolic.

And I measured his blood pressure -- I mean -- yeah -- his blood pressure. The blood pressure was 155 over 105. Left arm, 153 and 95. And that is correlated to Stage 2 hypertension.

Q. So given the increase from Stage 1 to Stage 2, would you agree that there is some industrial component to Mr. Fields' hypertension?

A. Yes.

Q. And what do you base that decision on?

A. So I believe he was using -- was using NSAID for a while, for a long time. And then that is a main, obvious cause of contributing to blood pressure increase. Nonsteroidal anti-inflammatory is known secondary cause -- one of the known secondary cause of increasing blood pressure.

(Applicant's Exhibit 4, Deposition of Dr. Mahmoudi dated 4/28/2025, pp. 7-10.)

Dr. Mahmoudi then testified that he had all necessary records to conclude that applicant's hypertension is at least partly industrial. (*Id*. at pp. 13-14.)

Upon cross-examination by defendant, Dr. Mahmoudi answered that a single elevated blood pressure reading is not sufficient by itself to establish a trend of worsening hypertension during the limited three-month period framed by defendants. (*Id*. at p. 17.) He indicated that he doesn't know the cause of that reading. (*Id*. at pp. 21-22.) But he then reaffirmed that NSAID use was the cause of applicant's elevated blood pressure:

Q. So let me just go back. What -- what do you think the high blood pressure was caused by?

A. As far as we know, the NSAID, this is a known cause.

(*Id*., at p. 26.)

Dr. Mahmoudi identified weight gain as potential causes but did not yet regard these factors as actual causes of the worsening of applicant's hypertension after the stipulated award. He testified, "if it is known that he has a sleep apnea, that would consider industrial, because I believe the weight gain is likely the cause of the -- I mean sleep apnea. But only if he has a sleep apnea. If he does, that would be -- all industrial.· But for now, NSAID is one of the obvious causes for now." (*Id.* at pp. 26-27.)

Dr. Mahmoudi testified that he could look at pharmacy records and re-evaluate applicant, but "again, what we have so far, it looks like it was due to NSAID, and the causation is industrial." (*Id*. at pp. 27-28.) Dr. Mahmoudi agreed that although applicant has not yet reached maximal medical improvement (MMI), there would likely be impairment due to hypertension under Table 2 at page 66 of the AMA Guides to the Evaluation of Permanent Impairment (*Id.* at pp. 10-13.)

The parties proceeded to trial on July 21, 2025 on the issues of (1) parts of body injured: heart and internal organs, and (2) need for further medical treatment to the heart and internal organs. The WCJ issued an F&A dated August 8, 2025, but then issued an order vacating submission after defendant filed a petition for reconsideration dated August 29, 2025. At a hearing held on October 2, 2025, the parties approved amendments to the previous minutes of hearing and summary of evidence, added a third issue, new and further disability for heart and internal organs and petition to reopen, and once again submitted issues for decision.

Following the second submission of issues on October 2, 2025, the WCJ issued another F&A, finding industrial injury to applicant's left knee, right hip, as well as injury in the form of hypertension, but deferred a finding on the issue of whether applicant also sustained injury to his heart and internal organs, including sleep apnea.

It is from this F&A that defendant seeks reconsideration.

DISCUSSION

I.

Former Labor Code section 5909[3] 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. (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.
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> (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.
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> (2) For purposes of paragraph (1), service of the accompanying report, pursuant to subdivision (b) of Section 5900, shall constitute providing notice.

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 November 24, 2025, and 60 days from the date of transmission is Friday, January 23, 2026. This decision is issued by or on Friday, January 23, 2026, 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 act on a petition. Section 5909(b)(2) provides that service of the Report and Recommendation shall be notice of transmission.

[3] Unless otherwise stated, all further statutory references are to the Labor Code.

Here, according to the proof of service for the Report and Recommendation by the WCJ, the Report was served on November 24, 2025, and the case was transmitted to the Appeals Board on November 24, 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 November 24, 2025.

II.

Before turning to the merits of the November 14, 2025 Petition, we note that defendant's August 29, 2025 petition for reconsideration of the original F&A of August 8, 2025 included illusory citations to two cases: (1) *Pizza Hut, Inc. v. Workers' Comp. Appeals Bd. (Solorzano)* (2001) 66 Cal.Comp.Cases 541, and (2) *Draper v. Workers' Comp. Appeals Bd.* (2009)175 Cal. App. 4th 23, 32. The *Solorzano* case does not appear at volume 66, page 541 of California Compensation Cases, and the closest case cite to the citation provided by defendant appears to be *Rossi v. Workers' Comp. Appeals Bd.* (2001) 66 Cal.Comp.Cases 538. The other case, *Draper*, is similarly miscited, with the closest case to pages 23 or 32 in volume 175 of the California Appellate Reports 4th being *People v. Millard* (2009) 175 Cal. App. 4th 7, a DUI and restitution case that says nothing about the legal effect of stipulated awards issued by the WCAB. The correct cite for the *Draper* case, which does involve a petition to reopen (and which actually supports the findings of the WCJ), is *Draper v. Workers' Comp. Appeals Bd.* (1983) 147 Cal. App. 3rd 502, without the quote cited by defendant. (*Id*., p. 7, line 22 ff.)

Such misrepresentations of legal authority provide sufficient grounds to issue an NIT to Order Sanctions.

Section 5813, states in pertinent part that:

> (a) The workers' compensation referee or appeals board may order a party, the party's attorney, or both, to pay any reasonable expenses, including attorney's fees and costs, incurred by another party as a result of bad-faith actions or tactics that are frivolous or solely intended to cause unnecessary delay. In addition, a workers' compensation referee or the appeals board, in its sole discretion, may order additional sanctions not to exceed two thousand five hundred dollars ($2,500) to be transmitted to the General Fund.

(Lab. Code, § 5813(a).)

Additionally, WCAB Rule 10421(b) defines bad faith actions or tactics that are frivolous or solely intended to cause unnecessary delay to include actions or tactics that result from a willful failure to comply with a statutory or regulatory obligation, that result from a willful intent to disrupt or delay the proceedings of the Workers' Compensation Appeals Board, or that are done for an improper motive or are indisputably without merit. Subdivision (b) further provides a comprehensive but non-exclusive list of actions that could be subject to sanctions, including asserting a position that misstates or substantially misstates the law. (Cal. Code Regs., tit. 8, § 10421(b)(8)).)

Business and Professions Code section 6068 provides in part that an attorney must respect the courts of justice and judicial officers (subdivision (b)); maintain only actions that are legal or just (subdivision (c)); be truthful at all times, including never to mislead a judge or judicial officer by false statement of fact or law (subdivision (d)); and, refrain from beginning or continuing a proceeding from "any corrupt motive" (subdivision (g)). Rule 3.3 of the California Rules of Professional Conduct provides in part that a lawyer shall not: "(1) knowingly make a false statement of fact or law to a tribunal or fail to correct a false statement of material fact or law previously made to the tribunal by the lawyer; (2). … knowingly misquote to a tribunal the language of a book, statute, decision or other authority." In addition, "an opinion of a California Court of Appeal or superior court appellate division that is not certified for publication or ordered published must not be cited or relied on by a court or a party in any other action." (Cal. Rules of Court, rule 8.1115(a).)

That said, because the WCJ vacated submission[4] on September 8, 2025 and issued a new F&A on October 27, 2024 which is the subject of the current Petition for Reconsideration, the August 29, 2025 petition has been rendered moot, and because defendant's present Petition for Reconsideration dated November 14, 2025 does not include either of the two miscited cases, we decline to issue an NIT re: sanctions at this time. However, we do admonish defense counsel and his firm to take every reasonable precaution to avoid filing any erroneous misrepresentations of authority in the future, and we note that such conduct may subject counsel to sanctions.

[4] It appears likely that the WCJ intended the order vacating submission to rescind the prior F&A of August 8, 2025 under WCAB Rule 10961, because submission had already been closed by the issuance of the August 8, 2025 decision. (Cal. Code Regs., tit. 8, § 10961.) This procedural distinction is now moot, because the WCJ later amended his decision after further hearing.

III.

Here we address each of the five primary contentions of the November 14, 2025 Petition for Reconsideration.

Section 5410 reads as follows:

> Nothing in this chapter shall bar the right of any injured worker to institute proceedings for the collection of compensation within five years after the date of the injury upon the ground that the original injury has caused new and further disability. The jurisdiction of the appeals board in these cases shall be a continuing jurisdiction within this period. This section does not extend the limitation provided in Section 5407.

(Lab. Code, § 5410.)

While "new" and "further" does mean after the date of an award, and not merely after the date of injury, there is no jurisdictional limitation that deprives the Appeals Board of its ability to award increased permanent disability that has developed more than five years after the date of injury, provided a timely petition to reopen the award has been filed within that five-year period pursuant to section 5410.[5] Further, as noted in applicant's Answer, nothing within section 5410 itself limits the ability of an injured worker to assert new body parts when the original stipulation did not include newly alleged body parts that were a direct consequence of the industrial treatment.

Under the provisions of section 5410, the October 31, 2022 stipulated award has been timely reopened because applicant has alleged new and further disability and instituted further proceedings to attempt to prove and collect additional compensation in the form of additional medical care, additional temporary disability if any within five years of the date of injury that does not exceed the limits of section 4656,[6] and permanent disability. It therefore has no finality until a future amended award is issued to fully address the extent of any new and further disability.

Further, because the injured worker did not know the full extent of his disability at the time of the Stipulations, he could not waive it under Civil Code section 1542, which provides that "[a] general release does not extend to claims that the creditor or releasing party does not know or suspect to exist in his or her favor at the time of executing the release and that, if known by him

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[5] Temporary disability, unlike permanent disability, does have a five-year jurisdictional limit for injuries occurring on or after January 1, 2008, under section 4656(c)(2). (Lab. Code, § 4656(c)(2); see also *County of San Diego v. Workers' Comp. Appeals Bd. (Pike)* (2018) 21 Cal.App.5th 1, 14 [83 Cal.Comp.Cases 465].)

[6] Section 4656(c)(2) provides that aggregate disability payments for a single injury occurring on or after January 1, 2008, causing temporary disability shall not extend for more than 104 compensable weeks within a period of five years from the date of injury.

or her, would have materially affected his or her settlement with the debtor or released party." (Civ. Code, § 1542.)

Contrary to the assertions of the Petition for Reconsideration, the holding in *Sarabi* supports the F&A. In that case, the Court of Appeal observed:

> Under Labor Code section 5410, an injured worker who has previously received workers' compensation benefits either voluntarily paid by the employer or pursuant to an award is entitled to claim benefits for "new and further disability" within five years of the date of injury. Section 5803 permits the reopening of a previously adjudicated case for "good cause" upon a petition filed by a party, also within five years from the date of injury. If a petition to reopen under either section is filed within the five-year period, the Board has jurisdiction to decide the matter beyond the five-year period. (§ 5804; *Bland v. Workers' Comp. Appeals Bd.* (1970) 3 Cal.3d 324, 329, fn. 3 [475 P.2d 663, 90 Cal. Rptr. 431, 35 Cal. Comp. Cases 513]; see also *General Foundry Service v. Workers' Comp. Appeals Bd.* (1986) 42 Cal.3d 331, 337 [721 P.2d 124, 228 Cal. Rptr. 243, 51 Cal. Comp. Cases 375] ["The Board clearly has the power to continue its jurisdiction beyond the five-year period when an application is made within that period"].)

(*Sarabi*, *supra*, 151 Cal.App.4th at p. 925.)

In the present case, there is both a statutory basis for further proceedings instituted within five years of the date of injury under section 5410, as well as good cause to amend the award under section 5803, as noted in *Sarabi*, *supra*. Mr. Mahmoudi's opinion that aggravation of applicant's hypertension was due to his industrial NSAID use constitutes good cause for the F&A's order that the hypertension be admitted as a body part and treated as industrial. (See Applicant's Exhibit 4, Deposition of Dr. Mahmoudi dated 4/28/2025, pp. 27-28.)

We also find that the F&A is supported by the evidentiary record.

It is well established that any decision of the WCAB must be supported by substantial evidence. (*Escobedo v. Marshalls* (2005) 70 Cal. Comp. Cases 604, 620 (Appeals Bd. en banc), citing Lab. Code, § 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. Workmen's Comp. Appeals Bd.* (1970) 1 Cal.3d 627, 635 [35 Cal.Comp.Cases 16].) In order to constitute substantial medical evidence, a medical opinion "must be framed in terms of reasonable medical probability, it must not be speculative, it must be based on pertinent facts and on an adequate examination and history, and it must set forth reasoning in support of its conclusions." (*Escobedo*, *supra*, 70 Cal. Comp. Cases 604, 621.)

Dr. Scalfani clearly found new and further disability of the left knee, including a compensable consequence fall of January 8, 2023, after examination of applicant both prior to and following his October 31, 2022 stipulated award, and after consideration of all medical records provided for his review. He further explained the mechanism of worsening of the left knee due to the compensable consequence injury. (See Applicant's Exhibit 5, Report of Dr. Scalfini dated 12/27/2023, p. 17.)

Internal medicine PQME Dr. Mahmoudi also provides a substantial opinion regarding the worsening of applicant's hypertension. As noted in the WCJ's Report, Dr. Mahmoudi opined that applicant has industrial hypertension due to deconditioning and the cumulative effects of his injury. (See Applicant's Exhibit 4, Deposition of Dr. Mahmoudi, p. 8, lines 3-12). He felt that applicant had an increase in hypertension from stage 1 to stage 2 and that increase is industrial, especially given applicant's use of NSAIDs. (*Id*. at p. 9, lines 17-25). He confirmed that all the prior blood pressure measurements that he is using to find causations for the hypertension predate the stipulated award of October 31, 2022. (*Id*. at p. 16, lines 21-25). He also testified that applicant's first class 2 diagnosis for hypertension was on April 14, 2021. (*Id*. at p. 35, lines 6-16). The QME reaffirmed that he felt this was industrial due to the NSAIDs, weight gain, and total knee replacement, especially since NSAIDs can increase blood pressure. (*Id*. at pp. 35-36, lines 22- 1). He gives a detailed explanation of causation of the increase in blood pressure due to the injury and use of NSAIDs that are associated with that injury, regardless of prior use of NSAIDs on a potentially non-industrial basis. (*Id*. at p. 37-38, lines 17-3). Dr. Mahmoudi's opinions are based on pertinent facts and on an adequate examination and history to establish at least one industrial cause of aggravation of hypertension, and Dr. Mahmoudi has through his deposition testimony provided reasoning in support of his conclusion. We conclude that the unrebutted medical expert opinions of Dr. Mahmoudi constitute substantial medical evidence in support of the F&A.

Defendant also raises the issue of whether section 5803 gives the WCAB the right to amend the stipulated award of October 31, 2022. That section provides as follows:

> The appeals board has continuing jurisdiction over all its orders, decisions, and awards made and entered under the provisions of this division, and the decisions and orders of the rehabilitation unit established under Section 139.5. At any time, upon notice and after an opportunity to be heard is given to the parties in interest, the appeals board may rescind, alter, or amend any order, decision, or award, good cause appearing therefor.

> This power includes the right to review, grant or regrant, diminish, increase, or terminate, within the limits prescribed by this division, any compensation awarded, upon the grounds that the disability of the person in whose favor the award was made has either recurred, increased, diminished, or terminated.

(Lab. Code, § 5803.)

The Court of Appeal has applied the requirements for "good cause" under section 5803 to a petition to reopen an award of permanent disability, and describes those requirements in the following manner:

> "Through many court decisions it has become well settled that, in order to constitute 'good cause' for reopening, new evidence (a) must present some good ground, not previously known to the Appeals Board, which renders the original award inequitable, (b) must be more than merely cumulative or a restatement of the original evidence or contentions, and (c) must be accompanied by a showing that such evidence could not with reasonable diligence have been discovered and produced at the original hearing." (1 Hanna, supra, § 9.02[2][d]; see *Merritt-Chapman & Scott Corp. v. Indus. A. C.* (1936) 6 Cal.2d 314 [57 P.2d 501]; *Clendaniel v. Ind. Acc. Com.* (1941) 17 Cal.2d 659 [111 P.2d 314].) CA(5) (5) Reopening upon the claim of newly discovered evidence is not a matter of right. (*Clendaniel*, *supra*, 17 Cal.2d at p. 661.)

(*Nicky Blair's Rest. v. Workers' Comp. Appeals Bd. (Macias)* (1980) 109 Cal.App.3d 941, 956-957 [45 Cal.Comp.Cases 876].)

The present case meets all three requirements for good cause described in the *Macias* case. Applicant has a worsening condition in the form of hypertension, the extent of which was not known to the Appeals Board until after stipulated award, rendering the award inequitable. That evidence is not merely a restatement of evidence available prior to the stipulated award but consists of new evaluations and events that took place after October 31, 2022, showing not just the existence of a condition but also significant worsening. Because applicant's new and further disability was developing on an ongoing basis, it appears that its present extent could not possibly have been fully assessed prior to the stipulated award, even if the parties had exercised all conceivable diligence. Although it is clear from the medical opinions of the QMEs that applicant has new and further disability of his left leg and hypertension, the extent of that new and further permanent disability and need for medical treatment has still not been fully ascertained. The WCJ has properly deferred that issue, as well as the issues of whether there is new and further disability to the heart and internal organs, including sleep apnea.

Accordingly, we deny defendant's November 14, 2025 Petition for Reconsideration.

For the foregoing reasons,

IT IS ORDERED that defendant's Petition for Reconsideration of the October 27, 2025 Findings and Award is **DENIED**.

WORKERS' COMPENSATION APPEALS BOARD

/s/ JOSE H. RAZO, COMMISSIONER

I CONCUR,

/s/ LISA A. SUSSMAN, DEPUTY COMMISSIONER

/s/ CRAIG L. SNELLINGS, COMMISSIONER

DATED AND FILED AT SAN FRANCISCO, CALIFORNIA

JANUARY 23, 2026

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

TODD FIELDS
WIESNER ENGLISH, P.C.
MICHAEL SULLIVAN & ASSOCIATES LLP

CWF/cs

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