

Alaska Workers' Compensation Appeals Commission

Admiral A. Mangrum, Jr.,
Appellant,

vs.

PGS Exploration, Inc. and Travelers
Insurance Co.,
Appellees.

Final Decision

Decision No. 188 September 11, 2013

AWCAC Appeal No. 12-028
AWCB Decision No. 12-0189
AWCB Case No. 200107470

Final decision on appeal from Alaska Workers' Compensation Board Final Decision and Order No. 12-0189, issued at Fairbanks on November 2, 2012, by northern panel members Robert Vollmer, Chair, Zeb Woodman, Member for Labor, and Sarah Lefebvre, Member for Industry.

Appearances: Admiral A. Mangrum, Jr., self-represented appellant; Robert L. Griffin, Griffin & Smith, for appellees, PGS Exploration, Inc. and Travelers Insurance Co.

Commission proceedings: Appeal filed November 29, 2012; briefing completed May 22, 2013; oral argument held on September 5, 2013.

Commissioners: James N. Rhodes, S. T. Hagedorn, Laurence Keyes, Chair.

By: Laurence Keyes, Chair.

1. Introduction.

Appellant, Admiral A. Mangrum, Jr. (Mangrum), worked for appellee, PGS Exploration, Inc. (PGS), in 2001.¹ He maintains that he injured his lower back, left hip, and groin on February 4, 2001, while riding in the company truck that was being driven over rough terrain by Mangrum's supervisor.² On January 15, 2003, Mangrum filed a workers' compensation claim (claim or WCC) for a groin/hernia condition that he

¹ See *Admiral A. Mangrum v. PGS Exploration, Inc.*, Alaska Workers' Comp. Bd. Dec. No. 12-0189, 1 (Nov. 2, 2012). The other appellee, Travelers Insurance Co., covered PGS for workers' compensation liability at that time.

² See *Mangrum*, Bd. Dec. No. 12-0189 at 1.

attributed to that incident, seeking, among other things, medical, temporary total disability (TTD), and permanent partial impairment (PPI) benefits.³ Following an employer's medical evaluation (EME) on February 18, 2005, PGS controverted the claim.⁴ On August 25, 2009, Mangrum filed another WCC for his lower back and left hip conditions.⁵ PGS controverted this claim on September 15, 2009, denying benefits and asserting statutory defenses.⁶ More recently, Mangrum was diagnosed with bilateral hernias, which he attributes to the 2001 incident.⁷ Mangrum subsequently amended his claim to include a hernia condition.⁸ The Alaska Workers' Compensation Board (board) held a hearing on Mangrum's claims on October 4, 2012.⁹ In due course, the board issued a decision, denying the claims.¹⁰ Mangrum has appealed the board's decision to the Workers' Compensation Appeals Commission (commission). We affirm.

2. Factual background and proceedings.

The board found that Mangrum had a history of low back, hip, pelvic, inguinal, abdominal, and groin pain.¹¹ On March 21, 1980, he was seen at Bassett Army Hospital, complaining of low back pain that he had for the previous three or four weeks.¹² That same day, sacral x-rays were ordered for the pain Mangrum was experiencing in his sacrococcygeal area. The x-rays showed moderately acute angulation that appeared developmental in nature.¹³

³ See *Mangrum*, Bd. Dec. No. 12-0189 at 4.

⁴ See *id.* at 5.

⁵ See *id.* at 6.

⁶ See *id.*

⁷ See *id.*

⁸ See *id.*

⁹ See *id.* at 1.

¹⁰ See *id.* at 19-20.

¹¹ See *id.* at 2.

¹² R. 0796.

¹³ R. 0798.

Approximately one year later, on May 6, 1981, during a physical, it was noted that Mangrum had mild scoliosis.¹⁴ On May 15, 1981, Mangrum sought treatment for lower abdominal pain that started two weeks earlier, after he took a physical training test. No hernia was detected.¹⁵ On May 27, 1981, he was treated for low back pain.¹⁶

A chart note dated June 17, 1988, indicated that Mangrum had suffered on and off from lower back pain for seven years.¹⁷

In 1994 and 1995, Mangrum sought chiropractic treatment for hip and pelvic pain.¹⁸ On October 13, 1994, he was treated at Tanana Valley Clinic for low back and right inguinal pain after moving a heavy object. There was no evidence of hernia, although scoliosis was noted. Back and groin strain was assessed.¹⁹ On October 24, 1994, Mangrum again sought treatment from the Tanana Valley Clinic. Chart notes reflect that he had a history of right groin pain since 1981. There were no defects or bulge detected. Groin strain was assessed.²⁰

On February 4, 2001, while working for PGS, Mangrum injured his groin, pelvis, hip, and lower back as a result of being bounced up and down and side to side while riding in a truck travelling over the tundra to and from base camp.²¹ He was seen by a camp medic, who assessed a possible pulled muscle and sent Mangrum to Fairbanks for further evaluation.²² On February 7, 2001, Mangrum saw Scott Conover, PA-C, who diagnosed left abdominal wall strain, ordered Mangrum not to lift more than 15 pounds

¹⁴ R. 0773.

¹⁵ R. 0772.

¹⁶ R. 0770.

¹⁷ R. 0515-16.

¹⁸ R. 0605.

¹⁹ R. 0642.

²⁰ R. 0641.

²¹ R. 0001.

²² R. 0602.

for one week, and prescribed Motrin and Flexeril. A hernia exam was negative bilaterally.²³

Mangrum never returned to work for PGS.²⁴ PGS paid him TTD for one week, as well as his medical costs.²⁵

On May 7, 2001, Mangrum saw PA-C Conover, complaining of continued inguinal pain. On examination, there was pressure in the inguinal fold and what was described as possibly being a small left inguinal hernia, however, there was no obvious bulge or pain into the left iliac crest. Mangrum was referred for a surgical evaluation to rule out a hernia.²⁶ On May 11, 2001, Jon Lieberman, M.D., evaluated Mangrum for groin pain. No hernia was detected on examination. Dr. Lieberman assessed groin strain but stated an occult hernia was a possibility. In his opinion, if Mangrum did have an occult hernia, Dr. Lieberman expected it to manifest within the near future.²⁷ On July 3, 2001, Mangrum was seen at a Veterans' Administration (VA) clinic. An x-ray showed scoliosis of the thoracic spine. Mangrum stated that he suffered from right groin pain for several years and began to have left groin pain starting in February of 2001, although the pain had since subsided. Thoracic scoliosis and non-specific abdominal pain were diagnosed.²⁸

On January 15, 2003, Mangrum filed a claim for a groin/hernia condition seeking TTD, PPI, a compensation rate adjustment, penalty, and interest.²⁹ That WCC was subsequently amended to include medical costs.³⁰

²³ R. 0601.

²⁴ Mangrum Dep. 31:1-9, July 13, 2012.

²⁵ R. 0003-04.

²⁶ R. 0599.

²⁷ R. 0610.

²⁸ R. 0673.

²⁹ R. 0008-09.

³⁰ R. 0895.

On January 22, 2003, an x-ray of Mangrum's hips showed no abnormalities.³¹ The same day, an x-ray of his lumbar spine showed mild degenerative changes compatible with his age.³²

On February 18, 2003, PGS took Mangrum's recorded statement. He acknowledged that he was aware of the two-year time limit for claims, having consulted an attorney in 2002.³³ On March 10, 2003, PGS answered Mangrum's claim dated January 15, 2003. It denied his entitlement to benefits.³⁴ Several prehearings were held with respect to the claim.³⁵

On October 13, 2004, Mangrum saw PA-C Conover complaining of a 10-year plus history of lower back pain radiating into his hip and a three-year history of focused left hip pain.³⁶ On October 26, 2004, an x-ray of Mangrum's hip and pelvis showed normal development and well-maintained, symmetrical hip joints with no spurring or sclerosis.³⁷ On October 26, 2004, a magnetic resonance imaging (MRI) study of his hips showed no abnormality that would explain his hip pain.³⁸ An MRI of his lumbar spine showed mild, smooth scoliosis convex to the right centering L2; multilevel degenerative spondylosis from the L3-4 through L5-S1 levels without significant spinal canal narrowing; and multilevel facet hypertrophy.³⁹

On February 18, 2005, Mangrum saw Stephen Marble, M.D., for an EME. Examination of Mangrum's inguinal canal and perineum was unremarkable. Dr. Marble stated Mangrum's groin pain onset correlated with the onset of lower back pain in the early 1980s, and diagnosed chronic pain due to progressive lumbar stenosis. Dr. Marble's

³¹ R. 0672.

³² R. 0637.

³³ R. 0477.

³⁴ R. 0012-15.

³⁵ R. 0873, 0876, 0888, and 0891.

³⁶ R. 574-75.

³⁷ R. 0578.

³⁸ R. 0579.

³⁹ R. 0577 and 0580.

opinion was that the February 4, 2001, injury was a temporary exacerbation of Mangrum's preexisting condition, which probably resolved in a month, but no later than July 2001.⁴⁰

On March 2, 2005, PGS controverted Mangrum's January 15, 2003, claim based on Dr. Marble's EME report.⁴¹

At a May 10, 2005, prehearing conference, Mangrum indicated he planned to obtain PA-C Conover's opinion of Dr. Marble's EME report to determine if there were issues warranting a second independent medical evaluation (SIME). He also indicated that PA-C Conover had referred him to an orthopedist, however, Mangrum cancelled the appointment on account of the May 2, 2005, controversion.⁴²

On June 3, 2005, PA-C Conover wrote a letter summarizing his efforts to diagnose and treat Mangrum's back, hip, and groin pain. He stated he could not correlate all of Mangrum's visits to the January 2001 work injury.⁴³ On July 12, 2005, PA-C Conover wrote another letter stating he believed Mangrum was injured on February 4, 2001, although he did not believe it was connected to an ongoing problem. Also, in PA-C Conover's opinion, the original injury had healed.⁴⁴

On December 8, 2007, Mangrum sought chiropractic treatment for low back pain after slipping and falling on ice, an incident unrelated to work. He was also having groin pain.⁴⁵

On August 25, 2009, Mangrum filed a WCC for lower back and left hip conditions seeking temporary partial disability (TPD), medical benefits, penalty, interest, and a finding of unfair or frivolous controversion.⁴⁶ On September 15, 2009, PGS answered

⁴⁰ R. 0466-89.

⁴¹ R. 0005.

⁴² R. 0891-92.

⁴³ R. 0766-67.

⁴⁴ Exc. 065.

⁴⁵ Exc. 066-67.

⁴⁶ R. 0016-17.

Mangrum's claim dated August 25, 2009, denying benefits and asserting statutory defenses, specifically citing AS 23.30.100(a) and AS 23.30.110(c).⁴⁷

On November 18, 2010, Mangrum was seen at the VA Clinic complaining of chronic back pain. He had a known history of scoliosis.⁴⁸ On November 22, 2010, the VA wrote to Mangrum recommending he have x-rays taken.⁴⁹ On January 26, 2011, he was seen at the VA clinic for a follow up. He stated he did not have time to have the recommended x-rays taken.⁵⁰ On March 23, 2011, an x-ray of Mangrum's thoracic spine showed prominent spondylosis involving the cervical spine and early spondylosis involving the mid and lower thoracic spine.⁵¹ On November 9, 2011, an ultrasound study of Mangrum's abdomen showed bilateral inguinal hernias while performing stress maneuvers.⁵²

On December 19, 2011, Mangrum inquired at the Fairbanks board office about his 2009 claim, and on January 4, 2012, the parties attended a prehearing. At that prehearing, Mangrum stated he had recently been diagnosed with bilateral hernias and was attempting to collect benefits for that condition. The designee amended Mangrum's 2009 claim to include his hernia condition.⁵³ On February 1, 2012, Mangrum filed an affidavit of readiness for hearing (ARH) on his January 15, 2003, and August 25, 2009, claims.⁵⁴

⁴⁷ R. 0018-22.

⁴⁸ R. 0747-48.

⁴⁹ R. 0741.

⁵⁰ R. 0738-39.

⁵¹ R. 0730.

⁵² R. 0712.

⁵³ R. 0895.

⁵⁴ R. 0025.

On February 17, 2012, previous imaging studies were reviewed to determine whether the inguinal hernias were present. The only study that included the inguinal regions was a 2004 MRI that did not show evidence of an inguinal hernia.⁵⁵

On March 8, 2012, the parties attended a prehearing conference, where a hearing date on Mangrum's claims was scheduled for October 4, 2012.⁵⁶

On August 16, 2012, Dr. Marble performed another EME. Mangrum told Dr. Marble that he had recently been diagnosed with bilateral hernias and he noticed a distinct change in his condition in 2008, when there was an escalation in his pain and a new bloating sensation. Dr. Marble performed abdominal examinations and found a soft tissue alteration just to the right of the umbilicus that corresponded with Mangrum's pain description. Dr. Marble indicated that he was perplexed by the alteration because he did not detect a distinct umbilical or abdominal wall defect or hernia. There was no palpatory pain or mass in the inguinal region. Dr. Marble diagnosed lumbar scoliosis associated with degenerative spondylosis and stenosis at L4-5 and L5-S1. In his opinion, Mangrum was historically symptomatic in the abdomen/inguinal region as a result of referred or radicular symptoms stemming from a lumbar pathology as opposed to an inguinal hernia, and felt the recent hernia finding may have been incidental. Dr. Marble stated the February 4, 2001, work injury was not a substantial factor in Mangrum's groin or lumbar condition and cited Mangrum's pre-injury inguinal/groin complaints, post-injury examinations that were negative for hernia, and also the 2004 MRI that did not show evidence of hernia, to support his conclusions. He reiterated his opinion from 2005 that Mangrum suffered a temporary exacerbation of his pre-existing lower back and hip symptoms for between one and six months.⁵⁷

On September 20, 2012, a prehearing conference was held to clarify issues for hearing. Mangrum contended that the recently diagnosed bilateral hernias were caused by the 2001 work injury and he still suffers from hip pain related to that injury. In

⁵⁵ R. 0708-09.

⁵⁶ R. 0914-15.

⁵⁷ R. 0695-707.

addition to medical benefits, Mangrum stated he was totally unable to work for six months immediately following the 2001 injury, and since March of 2012 as a result of his hernia condition, and is therefore entitled to TTD benefits. He further contended he was entitled to TPD benefits because his condition limited him to working at lesser paying construction jobs from 2001 until the present.⁵⁸

At the October 4, 2012, hearing, upon reviewing the 2005 and 2009 controversion notices, Mangrum stated he did not read the subsection .110(c) notice on the 2005 controversion and probably did not read the notice on the reverse side of the 2009 controversion form.⁵⁹ He either ignored or scanned the controversion notices because he “knew nothing was going to happen.”⁶⁰

Upon reviewing Mangrum’s medical records, Dr. Marble found the back and inguinal complaints date to the early 1980s.⁶¹ Dr. Marble noted differences between his 2005 and 2012 examinations. In 2005, Mangrum was complaining of left lumbar pain; in 2012, he described a belt of pain across his iliac crest, more on his right than left. In 2005, motion testing showed Mangrum’s limitations were mostly on his left; in 2012, testing showed limitations mostly on his right. Also, in 2012, Mangrum’s symptoms changed and he had a new sensitivity in the abdominal area around his navel. There was a soft area to the right of the navel that resembled a defect in the abdominal wall. While the new symptoms resembled a hernia, the changing of symptoms between 2005 and 2012, from left to right, is indicative of scoliosis.⁶²

Dr. Marble stated the 2011 ultrasound showed a mild hernia that is only observable when Mangrum “bears down.” He stated it is normal for a man Mangrum’s age to have such a hernia. Furthermore, the hernia is not Mangrum’s primary problem, and that the groin pain is coming from Mangrum’s back condition irritating the nerves

⁵⁸ R. 0953-54.

⁵⁹ Hr’g Tr. 83:16-21, 84:17-20, Oct. 4, 2012.

⁶⁰ Hr’g Tr. 85:16–86:9.

⁶¹ Hr’g Tr. 21:1-12.

⁶² Hr’g Tr. 29:9–30:18, 31:18-23, 32:4-9.

and aggravating Mangrum's groin and pelvis symptoms.⁶³ Dr. Marble stated the 2001 work injury was not a substantial factor in causing Mangrum's scoliosis, however, it did cause a temporary exacerbation of symptoms that resolved by July of 2001.⁶⁴ Dr. Marble stated other work-related symptom exacerbations in the record subsequent to Mangrum's employment with PGS support his opinion work activity aggravated symptoms related to Mangrum's scoliosis condition.⁶⁵

3. Standard of review.

The commission is to uphold the board's findings of fact if they are supported by substantial evidence in light of the whole record. Substantial evidence is such relevant evidence which a reasonable mind might accept as adequate to support a conclusion.⁶⁶ The question whether the quantum of evidence is substantial enough to support a conclusion in the contemplation of a reasonable mind is a question of law.⁶⁷ We exercise our independent judgment when reviewing questions of law and procedure.⁶⁸ The board's credibility findings are binding on the commission.⁶⁹

4. Discussion.

a. Applicable law.

Mangrum's original injury date was February 4, 2001. Even though he filed a claim for more benefits, including TPD and medical benefits, on August 25, 2009, that claim relates back to his original injury date. Therefore, the 2005 amendments to the Alaska Workers' Compensation Act (Act) do not apply to his claim. However,

⁶³ Hr'g Tr. 36:3-9, 37:5-9, 40:10-20.

⁶⁴ Hr'g Tr. 25:10-26:6, 30:19-22, 33:1-7.

⁶⁵ Hr'g Tr. 44:9-24.

⁶⁶ *See, e.g., Norcon, Inc. v. Alaska Workers' Compensation Bd.*, 880 P.2d 1051, 1054 (Alaska 1994).

⁶⁷ *See Wasser & Winters Co., Inc. v. Linke*, Alaska Workers' Comp. App. Comm'n Dec. No. 138, 5 (Sept. 7, 2010).

⁶⁸ *See* AS 23.30.128(b).

⁶⁹ *See* AS 23.30.128(b).

AS 23.30.110 has not been amended since 2000, thus, the analysis of the statute is the same in any event.

AS 23.30.110(c) reads:

Before a hearing is scheduled, the party seeking a hearing shall file a request for a hearing together with an affidavit stating that the party has completed necessary discovery, obtained necessary evidence, and is prepared for the hearing. An opposing party shall have 10 days after the hearing request is filed to file a response. If a party opposes the hearing request, the board or a board designee shall within 30 days of the filing of the opposition conduct a pre-hearing conference and set a hearing date. If opposition is not filed, a hearing shall be scheduled no later than 60 days after the receipt of the hearing request. The board shall give each party at least 10 days' notice of the hearing, either personally or by certified mail. After a hearing has been scheduled, the parties may not stipulate to change the hearing date or to cancel, postpone, or continue the hearing, except for good cause as determined by the board. After completion of the hearing the board shall close the hearing record. If a settlement agreement is reached by the parties less than 14 days before the hearing, the parties shall appear at the time of the scheduled hearing to state the terms of the settlement agreement. Within 30 days after the hearing record closes, the board shall file its decision. If the employer controverts a claim on a board-prescribed controversion notice and the employee does not request a hearing within two years following the filing of the controversion notice, the claim is denied.

b. Mangrum's claims are barred under AS 23.30.110(c).

Both the Alaska Supreme Court (supreme court) and this commission have issued decisions construing and applying AS 23.30.110(c),⁷⁰ the statutory subsection at the center of this appeal.

We have compared the failure-to-prosecute provision of AS 23.30.110(c) to a statute of limitations and interpreted the term "claim" in this statutory subsection to mean a written application for benefits. In *Kim v. Alyeska Seafoods, Inc.*, we decided that substantial rather than strict compliance with AS 23.30.110(c) could avoid claim denial. We observed there that the Commission had recognized the Board's power to excuse strict compliance with the statute for equitable reasons. But we also said that

⁷⁰ See, e.g., *Pruitt v. Providence Extended Care*, 297 P.3d 891 (Alaska 2013), *Kim v. Alyeska Seafoods, Inc.*, 197 P.3d 193 (Alaska 2008), *Providence Health System v. Hessel*, Alaska Workers' Comp. App. Comm'n Dec. No. 131 (Mar. 24, 2010).

we did “not suggest that a claimant can simply ignore the statutory deadline and fail to file anything.”⁷¹

Here, Mangrum filed his original claim on January 15, 2003. Shortly thereafter, on February 18, 2003, PGS took his recorded statement, during which he acknowledged that he had consulted an attorney and found out what he needed to do to pursue his claim.⁷² Eventually, PGS controverted Mangrum’s original claim on March 3, 2005, on a board-prescribed controversion notice. Mangrum filed his subsequent claim on August 25, 2009, which PGS controverted on September 15, 2009, using a board-prescribed controversion notice. On February 1, 2012, Mangrum filed an ARH on his January 15, 2003, and August 25, 2009, claims.

Based on his hearing testimony, the board found that Mangrum had not read the subsection .110(c) warnings that appeared on the reverse side of both the March 3, 2005, and the September 15, 2009, controversion notices.⁷³ Furthermore, the board found no evidence in the record that any of the recognized exceptions to the operation of subsection .110(c), mental incompetence or the pendency of an SIME, would excuse Mangrum from substantial compliance with that subsection.⁷⁴ We conclude that the foregoing evidence, in particular Mangrum’s admission that he did not read the controversion notices, constitutes substantial evidence in support of the board’s decision that he ignored the statutory deadline without any rational reason for doing so. The board acted appropriately in denying Mangrum’s claim.

c. Mangrum is not entitled to any benefits.

The last sentence of AS 23.30.110(c) states that “[i]f the employer controverts a claim on a board-prescribed controversion notice and the employee does not request a hearing within two years following the filing of the controversion notice, the claim is denied.” More than two years passed between PGS’s controversions of both of

⁷¹ *Pruitt v. Providence Extended Care*, 297 P.3d at 894-895 (footnotes omitted).

⁷² Exc. 030.

⁷³ Hr’g Tr. 62:10–64:18, Oct. 4, 2012.

⁷⁴ *See Mangrum*, Bd. Dec. No. 12-0189 at 16.

Mangrum's claims and the filing of his request for a hearing on February 1, 2012. As provided in subsection .110(c), his claim must be denied, which means he is not entitled to any workers' compensation benefits.

d. Mangrum's claims are not barred under AS 23.30.100(a).

PGS also argued before the board that Mangrum's claims were barred pursuant to AS 23.30.100(a). That subsection reads: "Notice of an injury or death in respect to which compensation is payable under this chapter shall be given within 30 days after the date of such injury or death to the board and to the employer." The board decided that subsection .100(a) did not preclude Mangrum's claims.⁷⁵ Because PGS did not cross-appeal this ruling, it is not an issue in this appeal.

5. Conclusion.

We AFFIRM the board's decision.

Date: 11 September 2013 ALASKA WORKERS' COMPENSATION APPEALS COMMISSION



Signed

James N. Rhodes, Appeals Commissioner

Signed

S. T. Hagedorn, Appeals Commissioner

Signed

Laurence Keyes, Chair

APPEAL PROCEDURES

This is a final decision on the merits of this appeal. The appeals commission affirms the board's decision. The commission's decision becomes effective when distributed (mailed) unless proceedings to reconsider it or to appeal to the Alaska Supreme Court are instituted (started).⁷⁶ For the date of distribution, see the box below.

⁷⁵ See *Mangrum*, Bd. Dec. No. 12-0189 at 17.

⁷⁶ A party has 30 days after the distribution of a final decision of the commission to file an appeal to the supreme court. If the commission's decision was distributed by mail only to a party, then three days are added to the 30 days, pursuant to Rule of Appellate Procedure 502(c), which states:

Effective, November 7, 2005, proceedings to appeal this decision must be instituted (started) in the Alaska Supreme Court no later than 30 days after the date this final decision is distributed⁷⁷ and be brought by a party-in-interest against all other parties to the proceedings before the commission, as provided by the Alaska Rules of Appellate Procedure. *See* AS 23.30.129(a). The appeals commission is not a party.

You may wish to consider consulting with legal counsel before filing an appeal. If you wish to appeal to the Alaska Supreme Court, you should contact the Alaska Appellate Courts *immediately*.

Clerk of the Appellate Courts
303 K Street
Anchorage, AK 99501-2084
Telephone: 907-264-0612

More information is available on the Alaska Court System's website:
<http://www.courts.alaska.gov/>

RECONSIDERATION

This is a decision issued under AS 23.30.128(e). A party may ask the commission to reconsider this final decision by filing a motion for reconsideration in accordance with 8 AAC 57.230. The motion for reconsideration must be filed with the commission no later than 30 days after the day this decision is distributed to the parties. If a request for reconsideration of this final decision is filed on time with the commission, any proceedings to appeal must be instituted no later than 30 days after the reconsideration decision is distributed to the parties, or, no later than 60 days after the date this final decision was distributed in the absence of any action on the reconsideration request, whichever date is earlier. AS 23.30.128(f).

I certify that, with the exception of changes made to correct typographical errors, this is a full and correct copy of Final Decision No. 188 issued in the matter of *Admiral A. Mangrum, Jr. vs. PGS Exploration, Inc. and Travelers Insurance Company*, AWCAC Appeal No. 12-028, and distributed by the office of the Alaska Workers' Compensation Appeals Commission in Anchorage, Alaska, on September 11, 2013.

Date: September 12, 2013



Signed

K. Morrison, Deputy Commission Clerk

Additional Time After Service or Distribution by Mail.

Whenever a party has the right or is required to act within a prescribed number of days after the service or distribution of a document, and the document is served or distributed by mail, three calendar days shall be added to the prescribed period. However, no additional time shall be added if a court order specifies a particular calendar date by which an act must occur.

⁷⁷

See id.