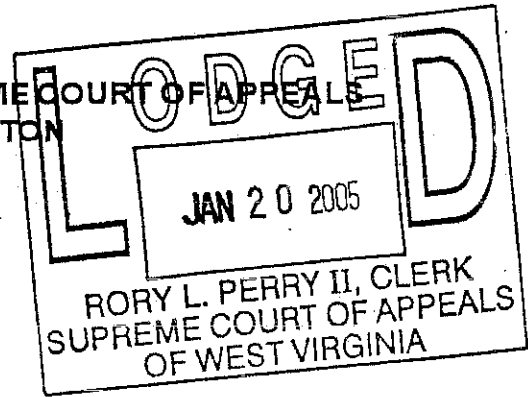


IN THE WEST VIRGINIA SUPREME COURT OF APPEALS
IN CHARLESTON



STATE OF WEST VIRGINIA
ex rel. JUDY D. PARKS,

Petitioner,

v.

Supreme Court No. 040215
Claim No. 90-19860

GREGORY A. BURTON
Executive Director
Worker's Compensation Commission

Respondent.

ANSWER TO ORDER PETITIONER'S WRIT OF MANDAMUS

Dear Honorable Justices of the West Virginia Supreme Court of Appeals,

Let it be known that I, Jason Parks, the 18 year old son of Judy D. Parks, claimant, have taken responsibility and have permission from my father, Donald J. Parks and family, to pursue my recently deceased mother's Workers Compensation case. As of December 21st, 2004 at 12:03 AM my mother became deceased partly because of the forty percent heart damage sustained from medicines taken for back pain from her October 4th, 1989 compensable injury. The recent passing of my mother, Judy D. Parks does not remove the responsibility or the due and just compensation that has been and is still now owed to her by Worker's Compensation and Acordia. I would like to explain to you some facts about my mother's case as to why this Honorable Supreme Court should order the **WRIT OF MANDAMUS**.

My Mother, Judy D. Parks became disabled when I was three. I have seen her suffer at the hands of negligent doctors, a broken Worker's Compensation system and a reluctant third party administrator of her benefits, Acordia Employer Services who, was ordered to and has yet to pay all medical bills directly related to her compensable injury from the time she was injured while working at Hills Stores Company. Since her injury in 1989 my family has yet to see any normalcy in our lives without having to deal with her suffering in one form or another either in her physical suffering or her mental anguish in dealing with the system and the ongoing denials and objections, by Workers' Compensation and Hills Stores Company to come to a fair and just settlement. We have watched my mother go from an active involved wife and mother to a bent over shell of a human being living with constant pain and anguish multiplied manyfold at the hands of the system, Worker's Compensation, Acordia, and their counsel. Worker's Compensation, Acordia and their counsel have ignored paying my mother's medical bills as ordered by this most Honorable Supreme Court on November 27th, 2000, order number 27710.

We have requested several times to have my mother's medical bills paid and other issues resolved such as my mother's fair and just monetary compensation for her pain and suffering. AND now, unfortunately, we have to include her burial expenses as well. My mother submitted a letter to this most Honorable Court on January 22, 2004, asking to compel Worker's Compensation to pay her bills as ordered by court number 27710 and asked that the court look into compensation for her heart damage and bleeding ulcers as well. We have enclosed several letters in evidence proving that these claims are valid and

true. The RESPONDANT, Gregory A. Burton's RESPONSE does not address the main issue of my mother's claim pertaining to her compensable injury suffered on 10-04-89. Her medical bills should be included in her compensation since they are a direct result of her compensable injury. If you, the Honorable Justices of the Supreme Court are under any impression that all of the protests and or appeals were not filed in time, I would respectfully ask that you review her file at the court clerk's office. There you will find the letter from my mother appealing within the thirty days allowed by any order that any Justice hearing her case was recorded, therefore her case is not barred from further hearings and I ask that fair and just compensation for her physical and emotional pain and suffering be considered by this Honorable Court and the **Writ of Mandamus** be granted.

The Writ of Mandamus is only addressing medical bills. Not only has this frustrated me and my family, but my mother's letter clearly states that she is not just looking for her medical bills related to her injury to be paid, but also for the fair monetary compensation she deserves for her pain and suffering. Since she is now deceased I believe any award in her favor be paid to her family. All of the arguments from Gregory A. Burton, Commissioner of Worker's Compensation's office, is not the issue at hand nor has it been the issue in the past. We are asking that an award as well as my mother's medical bills be paid by Acordia. We have tried several times to work out a settlement, but our pleas have fallen on deaf ears.

I would like to tell you that any and all of the medicines that they denied or approved

in this game they played with my mother's health, life and mind made the situation worse. Worker's Compensation, Acordia and their counselors knew what they were doing and also knew what kind of evil outcome this might and has caused. My family and I have suffered for fifteen long years at my mother's side while Worker's Compensation, Acordia and their counselors played this game of approve, deny, affirm, approve, etc.; all of this is wrong. The laws are clear. I know this and I am not an idiot. I may not have the legal expertise, but my parent's have raised me to know the difference between good and evil, fair and unjust treatment of others and after seeing my mother suffer both mentally and physically at the hands of Worker's Compensation, Acordia and their counselors, I must tell you that this is not fair and just treatment for my mother or anyone else. My mother's Worker's Compensation and health care benefits should have been paid to avoid this kind of disaster.

I respectfully ask you now that you consider entering an order compelling Acordia to pay my mother's benefits and or settlement in my mother's case to this family to help us pay for her final expenses. If it had not been for the generosity of friends, my mother would not be in the ground right now. She would be on ice because we did not have the money or credit to bury her and the cemetary would not bury her unless we had the money in advance. Now that she is gone we have to move on. I am still grieving over my mother. And my father, her husband of over thirty years, and her youngest son Marty, who is twelve, are still hurting. I want you to know that even though some things in this case have not been clear, I know that all of you, most Honorable Supreme Court justices are not

dumb. I know that all of you know the law and know this case and that my mother deserves some kind of closure and WE deserve some kind of closure. We have suffered soo much. I will never get her back. My brother, Marty and I, have never known, and now will never, ever get to know her beyond her physical and emotional pain and suffering.

If my mother had not been injured things would have been different and we would not be in this predicament. If Worker's Compensation, Acordia and their counsel had acted in a just and fair manner from the onset, my mother would have received the proper medical attention she needed in the timely manner required. But as a result she is now dead. And Worker's Compensation, Acordia and their counsel are still denying her a fair and just settlement.

Her twelve year old son, Marty, will never know her any differently from what this awful situation has brought upon us. But if her benefits were paid it would bring some kind of consolation and closer to my family and to the memory of my one and only mother. I still don't understand why any of the people who have heard this case have not done the fair and just thing in this case by awarding fair compensation for her injury and complications and everything related to it. I am no lawyer, but I know there are laws that clearly allow an award to be made and her bills to be paid. That is why there is insurance for these type of things. But Worker's Compensation, Acordia and their counselors have multiplied our frustration and suffering by denying my mother a fair settlement. They are just out to protect what they think belongs to them, but in reality it belongs to the disabled workers.

Please, I beg of you, make them pay for our suffering, my mother's suffering and for everything that is connected with her compesable injury and that it be resolved as soon as possible. It is the fair and just thing to do after fifteen years of dealing with Worker's Compensation, Acordia and their counselors. I don't want to have to deal with this any longer. My family needs to move on and heal. Worker's Compensation, Acordia and their counselors are just tearing open the wound that we have suffered for the last fifteen years. I myself have suffered depression because of the situation and the financial annarchy that this has caused my family. I have gone for days without eating because there was simply no food to eat because there was no money to buy it with. This also applies to water, heating and gas. All of this is related because if my mother's money had been paid things would have been taken care of. My mother was the only person in our family that was working when she was injured because my father has been handicapped since long before I was even born and on a fixed income.

I would like to enter the following items in support as to why the **Writ of Mandamus** should be considered and ordered by this most honorable Supreme Court. I believe that they will prove to you that all of these problems are connected.:

CONCLUSION

My family and I have never wanted a handout from the state of West Virginia. We have simply wanted fair and just treatment for these last 15 years for my mothers pain and suffering wanting only to move on with our lives. Jackson Kelly, Counsel for Hills Department Stores Company, says, according to www.jacksonkelly.com, that they, "...have aged with dignity and the preservation of core values and beliefs that make us who we are will remain our focus." -A.L. EMCH, CEO., " What they are really saying is that Jackson Kelly will continue to protect their own assets and the assets of their past and current clients who have managed to compensate Jackson Kelly lavishly for their services, so much so, that Jackson Kelly even has the audacity to flaunt its success on their website by bragging about how they are occupying the, "...top six floors..." of the, "...tallest office building in West Virginia," They live in their glass tower far removed from the real-life situations that they themselves have and continue to plague the employees of this state with, whose hard work has been the life blood and back bone of our economy.

"Jackson Kelly's home office is located in the downtown business area of Charleston on the top six floors of Laidley Tower - the tallest office building in West Virginia. ... Some 270+ individuals work in this Jackson Kelly PLLC office alone, providing the backbone and expertise for the entire spectrum of legal services."

I respectfully petition this Honorable Supreme Court to take a stand and graciously grant my mother just and fair compensation for her pain and suffering and order the **WRIT OF MANDAMUS**. Please do not let my mothers case fall through the cracks and show my family and the decent, hardworking people of West Virginia, as well as the rest of our nation, that the judicial system can be fair and just in its decisions regarding it's employees; the good people and life blood of this state's economy.

IN THE WEST VIRGINIA SUPREME COURT OF APPEALS
IN CHARLESTON

STATE OF WEST VIRGINIA
ex rel. JUDY D. PARKS,

Petitioner,

v.

Supreme Court No. 040215
Claim No. 90-19860

GREGORY A. BURTON
Executive Director
Worker's Compensation Commission

Respondent.

CERTIFICATE OF SERVICE


I, Jason R. Parks, *Per se*, do hereby certify that a copy of the foregoing **OBJECTION** to RESPONDENT, Gregory A. Burton, and **PETITION** to order PETITIONER'S **WRIT OF MANDAMUS** was served by FACSIMILIE upon the parties of record this 19th day of January 2005.

Gregory A. Burton, Executive Director
Worker's Compensation Commission
FAX: 304-926-5372

Melissa Robinson, Esquire
Post Office Box 553
Charleston, West Virginia 25322
FAX: 800-950-0529

Hills Department Store Company
c/o Acordia Employers Service Corporation
Post Office Box 3389
Charleston, West Virginia 25333-3389
FAX: 304-342-403

David Stuart, Supervisor
WCC Defense Division
Post Office Box 4318
Charleston, West Virginia 25364



Jason R. Parks, *pro se*

AGENT AUTHORIZATION

Let it be known that I, Donald J. Parks, on behalf of the Parks family do hereby authorize my son, Jason R. Parks, to act as my representative and agent in all matters, either legal or otherwise, with regards to Worker's Compensation Claim, #90-19860.

Donald J. Parks
Donald J. Parks, January 19, 2005

Jason R. Parks
Jason R. Parks, January 19, 2005

BLUESTONE HEALTH CENTER

PATIENT NAME: Judy Parks MEDS: Call to Ergis
 CHART # 83-84 DATE: 8/7/98 TKO @ 120
 AGE: 94 ALLERGIES: All Food CVS Pharmacy 384-7857
 HT: _____ WT: 94 Attorney T
 BP: 124/62 TEMP: 97.3 P-R: 76-20 Called Dr. J. J. J.
 COMPLAINT: Recheck from Hospital Call to Dr. J. J. J.
Needs pain medication Call to Dr. J. J. J.
raised. cannot walk

PARKS, Judy 8304

8-7-98

- S: The patient is a 45-year-old white female, who I recently saw in the hospital. She was diagnosed to have malt lymphoma of the lungs. She was seen by Dr. Chambers and received first cycle of CHOP chemotherapy, which she did fairly well with. She is getting her CBC's drawn every Monday and Thursday at PCH with a copy sent to Dr. Chambers. She is due to get a second therapy near the end of this month. She also was found to have multiple gastric ulcers, which were H. pylori negative and was put on Prilosec for that with good relief of symptoms. She is still on home oxygen because of PO2 in the oxygen was less than 50. She is trying to quit smoking. Still has shortness of breath on mild exertion and some soreness at the site of the thoracoscopy, but her chest pain is otherwise controlled. Has gained some weight also. No hematemesis, hematochezia, melena, no stomach pain. No dysuria. Had some occasional swelling of feet before, but not much recently. Past Medical History-#1. Malt lymphoma of the lung. #2. Gastric ulcer. #3. Iron deficiency anemia. #4. COPD. #5. Anxiety/depression. #6. Cachexia of malignancy and malnutrition. #7. ? CAD with inferior wall ischemia with LVT 87%. #8. Chronic low back pain S/P normal MRI of the cervical and lumbar spine. #8. S/P C-section X 2. Medications-as per the list. Allergies-none. Family History-no history of heart disease. Social History-she is married, has 2 kids, has a long history of smoking, no history of alcohol or drug abuse. Her last pap smear was in July 1998. Mammogram was in '94. Vaccinations-tetanus in 1995. Pneumovax in May of 98.
- O: 45-year-old white female, who looks better than last time. Weight 94 lbs. Blood pressure 124/62. Temperature 97.3. No pallor, jaundice, or cyanosis. Throat-clear. No oral lesions seen. Neck-supple, no JVD, adenopathy, bruits, thyromegaly. Chest revealed dullness on the left lower base with some decreased air entry and occasional crackles heard also. Heart sounds-normal. No murmur, rub, or gallop heard. Abdomen-scaphoid. No organomegaly. Bowel sounds present. Extremities-no clubbing, cyanosis, or edema.

- A&P: #1. Malt lymphoma S/P 1st cycle of chemotherapy-she is still on Prednisone and getting CBC's every Monday and Thursday with results sent to Dr. Chambers.
 #2. Gastric ulcers-she finished 1 month of Prilosec and I gave her samples of Praxacid 15 mg. p.o. q.b.s. as maintenance therapy
- Cont. visit next*

ITEM B
 Bluestone Health Center Medical History

Bluestone Health Center

10 Berger Street • Mateoka, West Virginia 24736 - Telephone: (304) 467-7143

November 13, 1998

Gibson and Associates
1345 Mercer Street
Princeton, WV 24740-3033

Reference: Judy D. Parks.

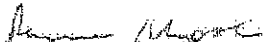
RECEIVED NOV 13 1998

Dear Mr. Cline:

In reference to your letter dated 11/10/98, I would like to mention that Ms. Parks has gastric ulcers, which were negative for Helicobacter Pylori infection. This indicates that most probably the ulcer is caused by use of pain medication that she has been on for a long time. Most of these pain medications will cause irritation to the stomach and eventually lead to gastric ulcers, which probably had been bleeding for a while causing her severe anemia. She has been on this pain medication basically for her chronic back pain. She underwent endoscopy by Dr. Colarian, which revealed ulcers and had been on a medicine called Prevacid since then, which has helped heal her ulcers. She probably needs to be on that medicine for quite some time to prevent any rebleeding from the ulcers. It is not possible to tell how long Ms. Parks has had the stomach ulcers, but she did complain of having stomach problems for a few months at least.

If you need any further information, please do not hesitate to call me at (304) 467-7143.

With best regards,



Raman Khosla, MD

RK/rs

Bluestone Health Association, Inc.

ITEM C
Bluestone Health (Ulcers)

PRINCETON COMMUNITY HOSPITAL
PRINCETON, WEST VIRGINIA

RM#:

PN
8/17/98

DISCHARGE SUMMARY

A: 7/09/98

D: 8/03/98

PATIENT NAME: PARKS, JUDY

MR#: 01-12-99

HISTORY OF PRESENT ILLNESS: The patient is a 44 year old, white female who was seen in the office on 7/7/98 with weakness, tiredness, cough, and worsening SOB. CBC was performed in the clinic which revealed Hgb 4.6 and Hct 14.4, WBC 7000, platelet 334,000. She also had a chest x-ray that showed a 7 cm mass-like density in the left lower lobe as well as patchy interstitial infiltrate mostly in the right mid lobe and apex. Hence, the patient was sent to the hospital for blood transfusion and further work-up of lung mass.

PHYSICAL EXAMINATION: The patient is very pale and sick. BP 96/50, afebrile, P 80, R 18. There was no jaundice. Neck is supple with no lymph nodes or JVD. Chest revealed bilateral wheezes. Heart sounds are normal without any murmur. Abdomen is benign without any organomegaly. Extremities: Unremarkable without any edema. CNS: unremarkable. Rectal exam in the office was negative for any mass. Heme negative. Pelvic exam was also done in the office which was unremarkable.

LABORATORY DATA: Tests done on 7/8/98 includes a chest x-ray revealing a 7 cm mass-like density in the left lower lobe. There was also patchy interstitial infiltrate mostly in the right mid lobe and apex. Also a density was noted in the right apex which could represent consolidation or loculated effusion. CBC done in the office revealed a Hgb of 4.6, Hct 14.4, WBC 7,000, platelets 334,000. Stool for occult blood, as I mentioned, was negative. TSH 1.13. BUN 6, creatinine 0.5, sodium 125, potassium 3.8.

HOSPITAL COURSE: The patient was admitted to the hospital and was transfused 4 u. of PRBCs with rapid improvement in the weakness, fatigue and SOB. He was also given Lasix after 2 u. of transfusion to prevent any volume overload. She was also started empirically on Unasyn and Zithromax for possible pneumonia versus bronchitis. Also on SerEVENT, Flovent, and Atrovent inhalers. Her home meds of Paxil and Depemise were continued. Iron studies were done which showed anemia of iron deficiency. Dr. Colarian was consulted for GI work-up and did endoscopy on 7/19/98 revealed multiple gastric ulcers. Biopsies of ulcer were done and only showed ulceration and necrosis of granulation tissue but no evidence of malignancy or helicobacter pylori infection. She was started on Prilosec 20mg bid and Niferex 150mg po bid by Dr. Colarian. CT scan of the chest was also done on admission which showed large areas of chronic pneumonia in both lungs along with bilateral pleural effusion without evidence of hilar or mediastinal adenopathy. Liver and adrenals were normal. CT scan guided biopsy of the left lower lobe mass was done along with the right sided thoracentesis on 7/11/98 by Dr. Miller which showed sheets of small sized uniform mature lymphocytes without other inflammatory epithelial cells suggestive of malignant lymphoma. The pleural

ITEM D PAGE 1

Princeton Community Hospital Discharge Summary

PRINCETON COMMUNITY HOSPITAL
DISCHARGE SUMMARY

2

A: 7/08/98

D: 8/03/98

PATIENT NAME: PARKS, JUDY

MR#: 01-12-99

Fluid was negative for any tumor cells. Specific diagnosis was not established in the CT guided biopsy because of the small size of the tissue. Dr. Duremdes was consulted and performed diagnostic thoracoscopy with wedge biopsy of left upper and lower lobe which revealed well differentiated small lymphocytic variety of malignant lymphoma with multifocal nodular deposits of lymphoma. Further analysis of the tissue by immunophenotyping revealed monoclonal (capa resected) CD5 (negative)/CD10 (negative) B cell population suspicious for a basal lymphoproliferative disorder such as an extranodal marginal zone B cell lymphoma (MALT type B cell lymphoma). Hence, Dr. Chambers was consulted who performed a bilateral bone marrow biopsy which revealed normal hematopoiesis with no evidence of malignant lymphoma. CT scan of abdomen and pelvis was also done which did not show abdominal mass or other adenopathy. MRI of the cervical spine showed C5-6 level mild annular bulging with no evidence of focal disc herniation, nerve root compression, or spinal stenosis or any present tumor. MRA of the lumbar spine revealed disc desiccation at multiple levels without any focal disc herniation or any mass lesion. CT scan of the neck done on 7/28/98, right apical mass-like density with probable lymphadenopathy extending superiorly into the right lower neck. There was not much change from the CT scan done on the chest on 7/10/98. Bone scan was also done on 7/28/98 and did not reveal any abnormalities. Serum protein electrophoresis was also normal and did not show any spike. ANA rheumatoid factor was also normal. Vitamin B-12 386, folate 8. Urine culture did grow Klebsiella for which he was treated with Bactrim with good response. After the procedures, patient had left subclavian IV port inserted by Dr. Duremdes on 7/13/98 for chemotherapy. On 7/30/98, Dr. Chambers started her on Cytosar, vincristine, and Prednisone. Muga scan was also done which revealed LVEF 87%, however, an earlier 2-D echocardiogram did show some mild LV dysfunction and at this point, the patient was not given Adriamycin. She also had Persantine Thallium stress test earlier which was minimally decreased in perfusion of inferior wall on stress images with some improvement on the resting images raising the possibility of inferior wall ischemia and the patient was already on Isosorbide and vasotec. Since Muga scan was normal, Digoxin was discontinued. Patient did have some signs of volume overload after starting IV chemotherapy and Lasix was given on an as needed basis with good response. Patient tolerated the chemotherapy without any complications. Her SOB remained about the same and her arterial oxygen content remained around 45-55 with O2 saturation around 90% without oxygen. Hence, arrangements were made for home oxygen also through Med-Response. As soon as the patient's condition stabilizes, it will be considered safe to discharge her home.

DISCHARGE INSTRUCTIONS/MEDS: Allopurinol 300mg po qd, Prednisone 30mg po qd and then taper. Prilosec 20mg po bid, Nifedex 150mg po tid, Vasotec 10mg po qHS, Lmdur 30mg po qam, Paxil 40mg po qam, Norpramine 50mg po qHS, Serivent MD 2 puffs bid, Flovent 220mcg MD 2 puffs bid, Atrovent MD 2 puffs qid, home oxygen 2-4L/minute. Multi-vitamin 1 po qd. She is to see me in the office in 2-3 days and Dr. Chambers on 8/20. She is to have CBCs as

ITEM D PAGE 2

Princeton Community Hospital Discharge Summary

PRINCETON COMMUNITY HOSPITAL
DISCHARGE SUMMARY

3

A: 7/09/98

D: 8/03/98

PATIENT NAME: PARKS, JUDY

MR#: 01-12-99

an outpatient on Mondays and Thursdays and will get a second course of chemotherapy after she sees Dr. Chambers.

ACTIVITIES: Increase as tolerated. Diet: regular with high protein intake.

PRINCIPAL DIAGNOSIS:

MALT (mucosa-associated lymphoid tissue) lymphoma of the lung.

SECONDARY DIAGNOSIS:

- Gastric ulcer.
- Congestive heart failure due to volume overload.
- Klebsiella urinary tract infection.
- Coronary artery disease with inferior wall ischemia.
- Iron deficiency anemia due to gastric ulcer.
- Chronic obstructive pulmonary disease.
- Depression.
- Cachexia of malignancy and malnutrition.

Raman Khosla, M.D.

RK/tl/9
D: 8/05/98
T: 8/06/98
CC:



Supreme Court of Appeals

Office of the Clerk + Office of Counsel

1800 Kanawha Boulevard, East, State Capitol, Building 1, Room 5-317, Charleston, WV 25305

www.sc026.wv.us/wvsc02

CHIEF JUSTICE
Larry V. Starcher

CLERK
(304) 558-2601
Fax: (304) 558-9815

COUNSEL
(304) 558-6560
Fax: (304) 558-6046

MEDIATION
(304) 558-4282
Fax: (304) 558-6046

TTY LINE
(304) 558-4219
Hearing Impaired:

CLERK
CHIEF COUNSEL
Deborah L. McHenry

DEPUTY CLERK
Rory L. Parry II

DEPUTY COUNSEL
Kathleen S. Grase
Thomas J. McGuinn, Jr.
Tina L. Lewis

JUSTICES
Margaret L. Workmen
Robin Jean Davis
Eligee E. Meynard
Warren R. McGraw

August 12, 1999

Workers' Compensation Division
Charleston, West Virginia

Workers' Compensation Appeal Board
Charleston, West Virginia

Judy A. Parks
Jo-Ho Estates
190 Rsd. Drive
Princeton, West Virginia 24740

Melissa Robinson, Esquire
P. O. Box 553
Charleston, West Virginia 25322

RE: *Judy A. Parks (Pro Se) v. WCD/Hills Department Store Company*
Supreme Court Docket No.: 992178
Claim No.: 90-19860
Workers' Compensation Appeal No.: 48376
Appeal Board Order Date: 6/30/99

Dear Parties:

Statutory notice pursuant to W. Va. Code § 23-5-15 is hereby given that the petitioner has filed a petition for appeal from the final order of the Workers' Compensation Appeal Board in the above-referenced case.

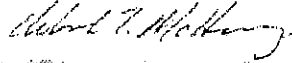
Because of the volume of petitions filed, the Court has recently instituted a Court-annexed mandatory mediation program for selected workers' compensation cases. Mediation is not automatically ordered in all cases. The above-referenced case has not been selected for the mediation program.

Additional information about the mediation program can be obtained through the Office of Counsel or from the Court's WEB site (<http://www.state.wv.us/wvsc02>).

Statutory Notice
Page 2

Your papers will be passed directly to the Court for consideration. You will be advised of the Court's decision, granting or refusing the petition for appeal, by copy of an order. Please be advised that it is the petitioner's responsibility to serve copies of the petition for appeal as required by W. Va. R. A. P. 13A(c). Failure to comply with the service requirement may result in dismissal of the petition.

Sincerely,



Deborah L. McHenry
Clerk

DLM:ves
cc: Garrett Jacobs, Esquire
Tonya Childress Gillespie, Director

STATE OF WEST VIRGINIA

At a Regular Term of the Supreme Court of Appeals continued and held at Charleston, Kanawha County, on the 27th day of November 2000, the following order was made and entered:

Judy D. Parks, Appellant

vs.) No. 27710

Workers' Compensation Division and
Hills Department Store Company, ...
Appellees


Upon an appeal from a final order of the Workers' Compensation Appeal Board, rendered on the 30th day of June, 1999.

The Court, having maturely considered the petition for appeal filed in the above-captioned case in Claim No. 90-19860, Workers' Compensation Appeal Board No. 48376, doth hereby reverse the final decision of the Workers' Compensation Appeal Board and doth hereby remand to the Workers' Compensation Commissioner with directions to enter an order authorizing medical benefits.

[Chief Justice Maynard and Justice Scott dissent.]

All of which is certified to the Workers' Compensation Appeal Board and to the Workers' Compensation Commissioner as required by law. W. Va. Code, 23-5-4.

A True Copy

Attest: 
Clerk, Supreme Court of Appeals

(T)

52 293 88 7074

Dkt. No. 70-4-1989
70-1986

Dec. 3, 2001
Judy Parks - Workers Compensation
Award;
P.O. Box 1882 Princeton, NY
29740

Dear Judge:

I am writing another protest.
I have suffered unjustly all these ^{for a long time} years. I have been totally disabled
from the time I broke my back and
~~and cannot my back to be humped~~
over like an elderly person and walk
on a cane for so many years because
of unstable ^{and nerve damage} legs and so much
pain I couldn't do much of anything.
There was given the ~~wrong~~ ^{matter of} ~~fact~~ ^{of} ~~the~~ ^{fact}
medicines which caused me to have
five bleeding ulcers which ^{finally}
put me in the hospital and caused me to
have a heart ~~attack~~ ^{attack} leaving me
with 40% heart damage. All
this is in place I already had
20% disability.

The West Virginia Supreme
Court looked at all of this and
reversed the ~~order~~ ^{order} of the Court of
appeals which that's what I asked them
to look at and pay me money and stop

(3)

if they didn't get something they needed or told me that I might get paid for nothing.

I have a lot of problems besides Melanoma and 40% heart damage back problems and headaches.

~~John C~~ I have been diagnosed with Cancer and this is in file please take this into consideration.

I have a family and children.

My Children are going to write a book and the publishing com. ~~in the~~ has already said send them something.

~~John C~~

(2)

Dec. 3, 2001

I would also want like to let you all know that I think I should have my back surgery for the time I have had to be off from work and not able to do much of anything and a monthly check. Rather than be expected to risk having a 3rd heart ~~attack~~ attack and maybe not living through it as ~~possibly~~ ^{possibly} the back operation ~~is~~ ^{is} causing the bleeding ulcers to get worse and migrain headaches or many other things besides I have been diagnosed with cancer how long it I have the time anyway. I have some ^{but I would like} compassion on the person who is liberty ~~should~~ ^{should} work any more because of working so hard the while at the time and I am a very honest person they said that should be rewarded not ~~rewarded~~ ^{rewarded} The Supreme Court has already given me my total life award and or also my medical ~~debts~~ ^{debts}

ITEM G PAGE 4

Protest letter from Judy Parks, Dec. 3, 2001

5

So why can you not agree with them "And pay me!"

Thank you
Judy D. Parks
APO Box 1882
Princeton, WVA.
24740-1882

~~By~~ By The way, My medical debts have to date not been paid. If you are paying medical benefits and if you are paying BlueStone Health Center they are not the only ones.

Princeton Has saved my life when bleeding ulcers ^{Diagnosed in 1981} ~~Diagnosed in 1981~~ ^{at} ~~at~~ ^{operated} ~~operated~~ and got me out of ~~the hospital~~ ^{the hospital} and ~~help~~ ^{help} me to be able to walk ~~up stairs~~ ^{up stairs} ~~up~~ ^{up} right but still be careful not to re-injure myself. And I still have a ports cath in my left ~~shoulder~~ ^{shoulder} in case of bleeding ~~on~~ ⁱⁿ ulcers ~~in~~ ⁱⁿ case I start bleeding ~~bad~~ ^{bad} again for transfusions ^{transfusions} of a sickly I have had since 1978

(B6)

~~is~~ after

might ~~be~~ bills of \$1000.00
4000.00 to forget if all what
if I had I would still be
in wheel chair or dead maybe
I couldn't take their small
benefits at that time, I was
in to bad of a shape.

Dec. 14, 2003

Judy D. Parks

P.O. Box 1882

Princeton, W.Va.

24940

SS. 233-88-3976

Do.I. ~~9-14-89~~ 10-14-89

Claim No. 900019860

Dear Supreme Court Judge Alford,

Here is evidence of the
pain medicine causing bleeding
ulcers then that causing heart ~~attacks~~ attacks

I Am Also sending where ~~another~~ another
person's name is on my papers.

Please give me some kind of percentage

Thank-you in advance for your kindness,

Thank you
Judy D. Parks

ITEM H

Evidence of Ulcer causing Medication

No. 27710
 Court # 90017840, DOJ, 10-11-89
 25-233-58-3576 R.R. Box 1837, Promoter W.Va. 24740

Hon. Judge of the Supreme Court

Would you please consider
 maintain compensation to please
 about paying my medical bills
 as ordered by court, No. 27710.

I thank you
 Judy D. Parks

Would you please look into
 my case as I am in need of
 a back injury which caused
 bleeding ulcers from pain medicine
 which caused heart damage.

ITEM I

Letter asking for compensation for medical bills.

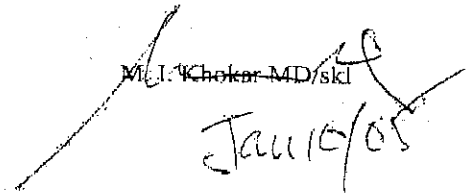
M.I. KHOKAR, M.D.
200 New Hope Road
Suite #3
Princeton, WV 24740
(304) 487-6065 (Fax) 425-5420

January 10, 2005

To Whom It May Concern:

RE: Judy Parks

This 51 year old white female was treated by me for cancer of the lung with extensive metastatic disease. During the terminal part of her stay in the hospital, the patient developed endocarditis due to candida and also had Stage IV terminal non-small cell carcinoma of the lung with extensive metastasis. She expired because of endocarditis and underlying lung cancer. The candida endocarditis contributed directly to the patient's death.


M.I. Khokar MD/ski

Jan 10/05

ITEM J
Doctor Khokar's final assessment.

On July 1, 2001, an organization named VOICES INC., located in Florida sent a letter to the Honorable Thomas Daschle, the Honorable Dennis Hastert, and Attorney General John Ashcroft expressing the sentiment shared by a great number of this country's hard working employees, (The life blood and back bone of this country) either injured, partially or permanently disabled or killed on or off the job and/or as a result of injuries sustained at work, who currently have or have had cases dropped, delayed or dismissed due in part to the long legal delays and games that the Workers Compensation and its insurance agencies and their counsel play in order to protect, not the employees, who are the life blood and back bone of this country, but the employers and their insurance companies whose interests are to protect their own assets.

This is the letter sent by VOICES:

Sirs-

We, the injured workers of the state of Florida and across the nation, respectfully request a nationwide congressional investigation into the Workers Compensation System of each of the individual states. We are a nation whose injured workers are under siege and being held hostage by the very system that was conceived to help, not further injure its workers, who are the very backbone of this great nation.

There can be a peaceful resolution to this war being waged against injured workers. But, this can only be accomplished by your intervention. A framework for a peaceful resolution was written in 1973, by the distinguished Senator from New York, Jacob Javits. His proposed bill, "The National Workers' Compensation Standards Bill SB2008" and, the revival of the standards set by the National Commission on State Workman's Compensation Laws would successfully resolve all disputed issues.

Please carefully read our enclosures and consider our request for intervention on behalf of injured workers across this nation.

Respectfully Yours,

Beverly Haire, VP
VOICES Inc;

Mary Bailey, NE Fl. Representative
VOICES Inc;

ITEM K PAGE 1
VOICES Letter

We, the Injured Workers of the State of Florida and across the nation contend the following iniquities of the Workers' Compensation System.

The Workers Compensation System does NOT enforce it's own laws and statutes already in place for the benefit of injured workers:

- a) Timely diagnosis and medical treatment and approval of such treatment within the time frame set by existing laws
- b) Timely automatic benefits within the time frame set by existing laws.

The Workers Compensation system often obtains medical as well as personal information on injured workers which has no pertinence to the claim and serves no necessary purpose in resolving the claim, but rather is used as a tactic to deter and frighten claimants out of litigation and into unfair settlement.

The Workers Compensation System willfully prolongs litigation, knowing the compensations courts are overloaded with cases, causing further severe psychological, physical and financial damage to the claimants, in hopes of pushing claimants into premature and unfair settlement.

The Workers Compensation System takes advantage of their exemption from repercussion or liability from lawsuit leaving injured workers with no recourse.

The Workers Compensation System knowingly and willingly makes fraudulent charges against many claimants in order to intimidate them and to avoid having to medically or financially compensate claimants.

The Workers Compensation System consistently cuts and denies benefits in order to starve claimants out and force their acceptance of inadequate, unfair settlements, causing many claimants to lose everything they have worked for ie; homes, vehicles, savings, etc; and forcing many into bankruptcy, loss of credit standing, and even loss of family and spouses in many cases and resulting in suicide of others.

The Workers Compensation System forces injured workers back to work on a light duty status prior to their recovery until their compensation has expired and then their employer discriminates against them with termination because they are unable to perform their job at 100% capability.

The Workers Compensation System consistently contends that claimants attorney fees are the major cause for insurance premium increases to the employer when in fact litigation in the majority of cases is NOT pursued by the claimant until the Workers Compensation System forces the claimant to seek an attorney because he has been continuously denied necessary medical treatment, medications and/or supplemental benefits. The system itself is in fact, the cause of most compensation related litigation.

The Workers Compensation System is in collusion with many physicians to deny diagnosis and treatment in favor of getting the claimant back to work despite their medical problems, willfully neglecting needed treatment Many physicians comply because to buck the system means the loss of a substantial number of patients.

The Workers Compensation System willfully and knowingly shifts the burden of responsibility for permanently disabled injured workers onto the already over burdened Social Security Disability system for which the injured worker paid half, himself. Why is the Workers Compensation System allowed to get off the hook and shift this burden?

There are many more iniquities of the Workers Compensation System, that are too numerous to list one by one, but an investigation into the Workers Compensation system of any individual state will begin to reveal these iniquities enough to convince you that further investigation is indeed warranted.

We feel confident, that you as the guardians of our great nation and representatives of we, the people, will share our concerns and act upon our request for help.

WORKERS COMPENSATION A Modern Fairy Tale

Once upon a time, in the greatest nation in the world, the United States Congress passed the "Occupational Safety and Health Act of 1970", (or the OSHA act). It was a very , very good law for the hard working people of this very great nation. It said:

"...the vast majority of American workers, and their families, are dependant on workmen's (sic worker's) compensation for their basic economic security in the event such worker suffers disabling injury in the course of their employment; and that the full protection of American workers from job-related injury or death requires an adequate, prompt, and equitable system of workmen's compensation as well as an effective program of occupational health and

safety regulation..."

A short time later, The American Congress remarked:

"In recent years serious questions have been raised concerning the fairness and adequacy of present workmen's compensation laws in light of the growth of the economy, the changing nature of the labor force, increases in medical knowledge, changes in the hazards associated with various types of employment, new technology creating new risks to health and safety, and increases in the general level of wages and the cost of living."

Because of these serious concerns, the Congress established the National Commission on State Workmen's Compensation Laws to "undertake a comprehensive study and evaluation of State workmen's compensation laws in order to determine if such laws provide an adequate, prompt and equitable system of compensation." July 31, 1972, was the date Congress decided upon for the transmittal of the report of the Commission to the President and Congress. The Commission was a large un-unified group, and no one truly expected them to complete the report on time (as often happens in large committees). But, lo and behold, to everyone's surprise, the report was completed and turned over right on time, and our tale continues.

The 1972 Commission concluded: "...State workmen's compensation laws are, in general neither adequate nor equitable...Perhaps in another decade or two, an attractive alternative to workmen's compensation will emerge...For the foreseeable future we are convinced that, if our recommendations for a modern workmen's compensation program are adopted, the program should be retained." It was asked by some, why this problem had gone unresolved for so long. "We know why," responded the Commission.

There are numerous reasons:

- a) Lack of interest by State legislatures and the general public
- b) Lack of understanding by State legislatures and the general public
- c) In-fighting among special interest groups
- d) The complexity of the problems
- e) The irrational fear that the increases in premiums would drive employers away to States with less generous benefits and lower costs. (THIS, was called "The Main Barrier.")

The Congress, OSHA and the Commission knew they had to conquer "The Main Barrier" before the problem could be resolved. Could they ever find the

solution? YES!

After considering an immediate complete federal takeover, after considering voluntary guidelines followed by a complete federal takeover in a few years if deficiencies are not corrected promptly, the Commission decided that the main barrier could be overcome if:

The States were required to meet certain minimum standards for the essential requirements of a State workmen's compensation law no later than July 1, 1975.

Now, you might very well be asking, "What are these Essential Elements" established by that great and benevolent Commission so very long ago and meant to be fully complied with by the date of July 1, 1975?:

THE ESSENTIAL ELEMENTS:

1. Compulsory Coverage
2. No occupational or numerical exemptions to coverage
3. Full coverage of work related diseases
4. Full medical and physical rehabilitation services without arbitrary limits
5. Employee's choice of jurisdiction for filing interstate claims
6. Adequate weekly cash payments for Temporary Total Disability (TTD), Permanent Total Disability (PTD) and Death cases
7. No arbitrary limits on duration or sum of benefits

The commission voted unanimously that Congressional intervention may be needed to bring about reforms in the State systems. The threat of, or if necessary, the enactment of Federal mandates will remove from each State the main barrier to effective workmen's compensation reform: The terrible irrational fear that compensation costs may drive employers to move away to States where protection for disabled workers is inadequate but less expensive. The Commission, on a majority vote, gave the States until July 1, 1975 to comply with The Essential Elements.

Keeping in mind, that this Commission mandated total compliance by the States by the date of July 1, 1975, you the reader must have concluded that this Fairy Tale had to have a happy ending as do all good Fairy Tale's. Sadly, I must inform you that THIS Fairy Tale has NO happy ending. As of this date, July 1, 2001, almost 26 years to the day that this mandate was supposed to

have been complied with, NOT EVEN ONE STATE OUT OF 50 HAS COMPLIED WITH THE ESSENTIAL ELEMENTS! In fact, not even one State out of 50 has even come close to compliance!

The truth of the matter is that, in the intervening 26 years since this mandate was proclaimed, the individual State Worker's Compensation Systems have further deteriorated to such a devastating degree that they are not even remotely as adequate as they were when the Commission decided they were inadequate enough to mandate The Essential elements!

An American worker who becomes injured under today's individual State Workers' Compensation Systems has become a victim of a holocaust, unequalled and unparalleled in American history.

We, the Injured Workers of America have waited twenty six years for Congressional intervention which was promised when the Essential Elements Mandate was proposed.

It's time for our Congress to act on that promise.

Item submitted is Vistaril, *courtesy of www.drugs.com* showing side effects

Vistaril

What is Vistaril and why is it prescribed?

Vistaril is an antihistamine used to relieve the symptoms of common anxiety and tension and, in combination with other medications, to treat anxiety that results from physical illness. It also relieves itching from allergic reactions and can be used as a sedative before and after general anesthesia. **Vistaril is not intended for long-term use (more than 4 months).** Your doctor should re-evaluate the prescription periodically.

How should you take Vistaril?

Follow your doctors directions for taking Vistaril. If you miss a dose take it as soon as you remember. If it is almost time for your next dose, skip the one you missed and go back to your regular schedule. Do not take two doses at once. Store tablets and syrup away from heat, light, and moisture. Keep the syrup from freezing.

Are there any Vistaril side effects?

Vistaril side effects cannot be anticipated. If any develop or change in intensity, inform your doctor as soon as possible. Drowsiness, the most common side effect of Vistaril, is usually temporary and may disappear in a few days or when dosage is reduced. Other Vistaril side effects include dry mouth, twitches, tremors, and convulsions. The last two usually occur with higher than recommended doses of Vistaril.

What are the possible food and drug interactions when taking Vistaril?

If Vistaril is taken with certain other drugs, the effects of either could be increased, decreased, or altered. Be sure to inform your doctor of all the prescription and over the counter medications you are taking. Vistaril may increase the effects of alcohol. Avoid alcohol while taking this medication. It is especially important to check with your doctor before combining Vistaril with Barbiturates (such as Seconal and Phenobarbital), Narcotics (such as Demerol and Percocet), or Non-narcotic analgesics (such as Motrin and Tylenol).

Are there any special warnings about Vistaril?

Vistaril increases the effects of drugs that depress the activity of the central nervous system. If you are taking narcotics, non-narcotic analgesics, or barbiturates in combination with Vistaril, their dosage should be reduced. Vistaril can cause drowsiness. Driving or operating dangerous machinery or participating in any hazardous activity that requires full mental alertness is not recommended until you know how you react to Vistaril.

Item submitted is Pamelor, *courtesy of www.drugs.com* showing side effects.

Pamelor

What is Pamelor and why is it prescribed?

Pamelor is prescribed for the relief of symptoms of depression. It is one of the drugs known as tricyclic antidepressants. Some doctors also prescribe Pamelor to treat chronic hives, premenstrual depression, attention deficit hyperactivity disorder in children, and bedwetting. Pamelor must be taken regularly to be effective and it may be several weeks before you begin to feel better.

How should you take Pamelor?

Follow your doctors directions for taking Pamelor. Pamelor may make your mouth dry. Sucking on hard candy, chewing gum, or melting ice chips in your mouth can provide relief. If you miss a dose take it as soon as you remember. If it is almost time for the next dose, skip the one you missed and go back to your regular schedule. If you take Pamelor once a day at bedtime and you miss a dose, do not take it in the morning, since disturbing side effects could occur. Never take two doses at once. Keep Pamelor in the container it came in, tightly closed and away from light. Store at room temperature.

Are there any Pamelor side effects?

Pamelor side effects cannot be anticipated. If any develop or change in intensity, inform your doctor as soon as possible. Pamelor side effects may include abdominal cramps, agitation, anxiety, black tongue, blurred vision, breast development in males, breast enlargement, confusion, constipation, delusions, diarrhea, dilation of pupils, disorientation, dizziness, drowsiness, dry mouth, excessive or spontaneous flow of milk, excessive urination at night, fatigue, fever, fluid retention, flushing, frequent urination, hair loss, hallucinations, headache, heart attack, high or low blood pressure, high or low blood sugar, hives, impotence, inability to sleep, inability to urinate, increased or decreased sex drive, inflammation of the mouth, intestinal blockage, itching, loss of appetite, loss of coordination, nausea, nightmares, numbness, panic, perspiration, pins and needles in the arms and legs, rapid, fluttery, or irregular heartbeat, rash, reddish or purplish spots on skin, restlessness, ringing in the ears, seizures, sensitivity to light, stomach upset, strange taste, stroke, swelling of the testicles, swollen glands, tingling, tremors, vision problems, vomiting, weakness, weight gain or loss, and yellow eyes and skin. Side effects due to rapid decrease or abrupt withdrawal from Pamelor after a long term of treatment include headache, nausea, and a vague feeling of bodily discomfort. These side effects do not indicate addiction to Pamelor.

What are the possible food and drug interactions when taking Pamelor?

If Pamelor is taken with certain other drugs, the effects of either could be increased, decreased, or altered. Be sure to inform your doctor of all the prescription and over the counter medications you are taking. Combining Pamelor and MAO inhibitors can be fatal. Pamelor may intensify the effects of alcohol. Do not drink alcohol while taking Pamelor. It is especially important to check with your doctor before combining Pamelor with Airway-opening drugs (such as Ventolin and Proventil), Antidepressants (such as Wellbutrin and Desyrel), Antidepressants that act on serotonin (such as Prozac, Paxil, and Zoloft), Blood pressure medications (such as Catapres and Esimil), Cimetidine (Tagamet), Chlorpropamide (Diabinese), Drugs for heart irregularities (such as Tambacor and Rythmol), Drugs that control spasms (such as Donnatal and Benty), Levodopa (Larodopa), Major tranquilizers (such as Thorazine and Mellaril), Quinidine (Quinidex), Reserpine (Diupres), Stimulants (such as Dexedrine), Thyroid medication (such as Synthroid), or Warfarin (Coumadin).

Are there any special warnings about Pamelor?

Pamelor may cause you to become drowsy or less alert. Use Pamelor with caution if you have a history of seizures, difficulty urinating, diabetes, or chronic eye conditions such as glaucoma. Be careful, also, if you have heart disease, high blood pressure, or an overactive thyroid, or are receiving thyroid medication. You should discuss all of your medical problems with your doctor before taking this medication. If you are being treated for a severe mental disorder, tell your doctor before taking Pamelor. Pamelor may make your skin more sensitive to sunlight. Try to stay out of the sun, wear protective clothing, and apply a sun block. Before having surgery, dental treatment, or any diagnostic procedure, tell your doctor that you are taking Pamelor. Certain drugs used during these procedures, such as anesthetics and muscle relaxants, may interact with Pamelor.

ITEM M

Item submitted is Darvocet, *courtesy of www.drugs.com* showing side effects.

Darvocet

- acetaminophen and propoxyphene (a see tah MIH no fen/proe POX ih feen) Darvocet A500, Darvocet N 100, Darvocet N 50, Propacet 100, Wygesic

What is the most important information I should know about Darvocet? Propoxyphene may be habit forming. Physical and/or psychological dependence can occur, and withdrawal effects are possible if the medication is stopped suddenly after prolonged or high-dose treatment. Do not stop taking Darvocet suddenly without first talking to your doctor if you have been taking it continuously for more than 5 to 7 days. Your doctor may want to gradually reduce the dose.

- Do not take Darvocet if you suffer from depression or have suicidal thoughts.
- Do not take more of this medication than is prescribed. If the pain is not being adequately treated, talk to your doctor.
- Do not take other over-the-counter and prescription products that contain acetaminophen. Too much acetaminophen could be dangerous. Talk to your doctor or pharmacist before taking any over-the-counter preparations.
- Avoid alcohol while taking Darvocet. Alcohol can increase drowsiness and dizziness caused by the medication which could be dangerous. Also, alcohol may increase the risk of liver problems when taking acetaminophen.
- Drowsiness or dizziness caused by Darvocet may be increased by other drugs such as antidepressants, alcohol, antihistamines, sedatives (used to treat insomnia), other pain relievers, anxiety medicines, and muscle relaxants. Together, these medicines may cause dangerous sedation, possibly resulting in unconsciousness or death. Tell your doctor about all medicines that you are taking, and do not take any medicine without first talking to your doctor.

What is Darvocet?

- Propoxyphene (related to codeine) is in a class of drugs called narcotic analgesics. It works by changing the way the body feels pain.
- Acetaminophen is a less potent pain reliever that increases the effects of propoxyphene.
- Together, acetaminophen and propoxyphene are used to relieve pain.
- Darvocet may also be used for purposes other than those listed in this medication guide.

What should I discuss with my healthcare provider before taking Darvocet?

- Do not take Darvocet if you suffer from depression or have suicidal thoughts.
- Before taking this medication, tell your doctor if you have
 - a history of drug or alcohol addiction;
 - drink 3 or more alcoholic beverages per day;
 - kidney disease;
 - liver disease;
 - asthma;
 - urinary retention;
 - an enlarged prostate;
 - hypothyroidism;
 - seizures or epilepsy;
 - gallbladder disease;
 - a head injury; or
 - Addison's disease.

• You may not be able to take Darvocet, or you may require a dosage adjustment or special monitoring during treatment if you have any of the conditions listed above.

Item submitted is Darvocet, *courtesy of www.drugs.com* showing side effects.

- Propoxyphene may cause addiction and withdrawal symptoms as well as other harmful effects in an unborn baby. Do not take Darvocet without first talking to your doctor if you are pregnant or could become pregnant during treatment.
- Propoxyphene may cause addiction and withdrawal symptoms in a nursing baby. Do not take Darvocet without first talking to your doctor if you are breast-feeding a baby.
- If you are younger than 18 years of age or older than 60 years of age, you may be more likely to experience side effects from Darvocet therapy. Your doctor may prescribe a lower dose.
- Propoxyphene may be habit forming. Physical and/or psychological dependence can occur, and withdrawal effects are possible if the medication is stopped suddenly after prolonged or high-dose treatment. Do not stop taking Darvocet suddenly without first talking to your doctor if you have been taking it continuously for more than 5 to 7 days. Your doctor may want to gradually reduce the dose.
- Constipation may be a side effect of treatment with Darvocet. Increasing the amount of fiber and water (six to eight full glasses) in the diet may reduce constipation.
- Do not share this medication with anyone else.
- Store Darvocet at room temperature away from moisture and heat.

What are the possible side effects of Darvocet?

- If you experience any of the following serious side effects, stop taking Darvocet and seek emergency medical attention:
 - an allergic reaction (difficulty breathing; closing of the throat; swelling of the lips, tongue, or face; or hives);
 - slow, weak breathing;
 - seizures;
 - cold, clammy skin;
 - severe weakness or dizziness;
 - unconsciousness;
 - yellowing of the skin or eyes; or unusual fatigue, bleeding, or bruising.
- Other, less serious side effects may be more likely to occur. Continue to take Darvocet and talk to your doctor if you experience
 - constipation;
 - dry mouth, nausea, vomiting, or decreased appetite;
 - dizziness, tiredness, or lightheadedness;
 - muscle twitches;
 - sweating;
 - itching;
 - decreased urination; or decreased sex drive.
- Propoxyphene may be habit forming. Physical and/or psychological dependence can occur, and withdrawal effects are possible if the medication is stopped suddenly after prolonged or high-dose treatment. Do not stop taking Darvocet suddenly without first talking to your doctor if you have been taking it continuously for more than 5 to 7 days. Your doctor may want to gradually reduce the dose.
- Side effects other than those listed here may also occur. Talk to your doctor about any side effect that seems unusual or that is especially bothersome.

Copyright 1996-2003 Cerner Multum, Inc. Version: 6.01. Revision date: 9/18/03.

Item submitted is Darvocet, *courtesy of www.drugs.com* showing side effects.

Percocet Description

NARCOTIC ANALGESICS WITH ACETAMINOPHEN - ORAL

Common Percocet Brand Name(s)

Lortab, Percocet, Phenaphen w/Codeine, Tylenol w/Codeine, Tylox, Vicodin

Percocet Side Effects

PERCOCET may cause constipation, stomach upset, lightheadedness, dizziness, drowsiness, nausea, vomiting, or flushing. If any of these effects persist or worsen, contact your doctor or pharmacist promptly. Tell your doctor immediately if you have any of these unlikely but serious side effects: loss of coordination, confusion, irregular heartbeat, irregular breathing, extreme dizziness, anxiety, tremors. An allergic reaction to PERCOCET is unlikely, but seek immediate medical attention if it occurs. Symptoms of an allergic reaction include: rash, itching, swelling, dizziness, trouble breathing. If you notice other effects not listed above, contact your doctor or pharmacist.

How To Use Percocet

PERCOCET: Take PERCOCET by mouth, exactly as prescribed. To prevent upset stomach, take with food or milk. Pain medications work best in preventing pain before it occurs. Once the pain becomes intense, the medication is not as effective in relieving it. Use PERCOCET exactly as directed by your doctor. Do not increase your dose, take it more frequently or use it for a longer period of time than prescribed because PERCOCET can be habit-forming. Also, if used for an extended period of time, do not suddenly stop using PERCOCET without your doctor's approval. When used for extended periods, PERCOCET may not work as well and may require different dosing. Talk with your doctor if this medication stops working well.

Percocet Uses

PERCOCET is used to relieve moderate to severe pain.

Percocet Precautions

Tell your doctor your medical history especially of liver or kidney conditions, history of alcohol use, heart problems, abdominal/stomach problems, breathing problems, seizure disorders, drug dependency, severe diarrhea and of any drug allergies. Avoid alcoholic beverages, because they may increase certain side effects of PERCOCET. Use caution when performing tasks requiring alertness such as driving or using heavy machinery. This product contains acetaminophen, which may cause liver damage. Daily use of alcohol, especially when combined with acetaminophen, may increase your risk for liver damage. Check with your doctor or pharmacist for more information. Caution is advised when prescribing or using PERCOCET in the elderly or very young since they may be more sensitive to the effects of PERCOCET. PERCOCET should be used only when clearly needed during pregnancy. Discuss the risks and benefits with your doctor. PERCOCET (or drugs closely related to it) pass into breast milk. Because of the potential risk to the infant, consult your doctor before breast-feeding.

Percocet Drug Interactions

Tell your doctor of all prescription and nonprescription drugs you may use including MAO inhibitors (e.g., furazolidone, phenelzine, selegiline, tranylcypromine), psychiatric drugs, tranquilizers, sleep medications, rifampin, other narcotic pain relievers, barbiturates, anti-seizure drugs, drowsiness-causing antihistamines (e.g., diphenhydramine), isoniazid, zidovudine, sulfapyrazone and cimetidine. Before taking pain relievers, cough-and-cold medicines or allergy products, read their labels to be sure that they do not also contain acetaminophen. An overdose of acetaminophen can be harmful. If you are uncertain your medicines contain acetaminophen, ask your pharmacist. Do not start or stop any medicine without doctor or pharmacist approval.

Percocet Overdose

If overdose is suspected, contact your local poison control center or emergency room immediately. Symptoms of overdose may include nausea, vomiting, stomach pain, slow breathing, slow heart rate, or unconsciousness.

Percocet Notes

To prevent constipation, increase your intake of fiber, drink plenty of water and exercise. PERCOCET has been prescribed for your current condition only. Do not use it later for another condition unless told to do so by your doctor. A different medication may be necessary in those cases. Do not share PERCOCET with others.

ITEM O

In his Innaugural Address, January 17th, 2005, newly elected Governor Joe Manchin himself declared the problems and inefficiencies of the Worker's Compensation system here in West Virginia and that, "...this system must be fixed and it must be fixed now. We cannot afford to wait even one more minute."

"We will restructure our government so that you can be sure we have the right tools for the right job.

I will personally take responsibility for developing a plan to pay off, once and for all, the long-term debts that we owe. Our workers comp debt is the Achilles heel of our state's economy, and I firmly believe that in order to create more good jobs in West Virginia this system must be fixed and it must be fixed now. We cannot afford to wait even one more minute.

And, just like every working family, we will look closely at the money coming in, and the money going out, to determine exactly which credits and debits most affect our checkbook, and yours.

Working together with the legislature, we will put in place a new code of ethics that will hold our officeholders, and all those entrusted to do the people's work, as well as all those receiving public funds, to the highest rules of professional conduct.

My administration's guiding principle during this special session, and the regular session that follows, will be quite simple: Whatever problems you thought you had when you woke up this morning, and whatever burdens you feel you have the responsibility to bear — imagine facing them without a paycheck, as so many West Virginians do today. Odds are your problems, and your burdens, would be magnified tenfold. And that is why it is so important that we open our state for business and get our people back to work."

-Governor Joe Manchin

ITEM P