

IN THE INTERMEDIATE COURT OF APPEALS OF WEST VIRGINIA

**TEDRA SAYRE,
Claimant Below, Petitioner**

v.) No. 24-ICA-514 (JCN: 2023015995)

**TOYOTA MOTOR MANUFACTURING WV, INC.,
Employer Below, Respondent**

**FILED
June 6, 2025**

ASHLEY N. DEEM, CHIEF DEPUTY CLERK
INTERMEDIATE COURT OF APPEALS
OF WEST VIRGINIA

MEMORANDUM DECISION

Petitioner Tedra Sayre appeals the December 2, 2024, order of the Workers' Compensation Board of Review ("Board"). Respondent Toyota Motor Manufacturing WV, Inc. ("Toyota") timely filed a response.¹ Ms. Sayre did not reply. The issue on appeal is whether the Board erred in affirming the claim administrator's order, which rejected the secondary conditions of left wrist De Quervain's and left lateral epicondylitis.

This Court has jurisdiction over this appeal pursuant to West Virginia Code § 51-11-4 (2022). After considering the parties' arguments, the record on appeal, and the applicable law, this Court finds no substantial question of law and no prejudicial error. For these reasons, a memorandum decision affirming the Board's order is appropriate under Rule 21 of the Rules of Appellate Procedure.

Ms. Sayre completed an Employees' and Physicians' Report of Occupational Injury or Disease form on February 23, 2023, in which she indicated that she injured her wrist on the same date while manipulating parts at work. The physician's portion, also dated February 23, 2023, was completed by Cheree Jarrell, FNP, at Family Medicine. The diagnosis was left wrist strain.

On March 2, 2023, the claim administrator issued an order that held the claim compensable for left wrist strain.

Ms. Sayre returned to Family Medicine on March 9, 2023, where she was seen by NP Heather Conway. Ms. Sayre reported a pins and needles sensation in her index finger, and that her right grip was weakened. NP Conway assessed left carpal tunnel syndrome ("CTS") and recommended a left upper extremity EMG. Further, NP Conway advised Ms. Sayre to stop the Diclofenac and start taking Ibuprofen as well as a steroid.

¹ Ms. Sayre is represented by Reginald D. Henry, Esq., and Lori J. Withrow, Esq. Toyota is represented by Tracey B. Eberling, Esq.

On March 13, 2023, Ms. Sayre underwent an EMG of her left arm at Marshall Health. Jerry Hollinger, M.D., concluded that it was a normal study, and stated that there was no electrodiagnostic evidence of entrapment neuropathy, plexopathy, or radiculopathy involving the left arm.

Ms. Sayre followed up with NP Conway on March 23, 2023, regarding her left wrist and left forearm pain. She reported continued numbness and tingling in her left index finger. NP Conway noted that Ms. Sayre had been on modified duty at work, wearing a wrist splint, and taking Ibuprofen. The diagnosis was left wrist strain. Ms. Sayre was advised to continue taking Ibuprofen and performing modified duty, and she was referred to physical therapy ("PT").

On April 6, 2023, Ms. Sayre was again seen by NP Conway. Ms. Sayre reported that her pain level was about the same, and that she continued to wear the support brace and take Ibuprofen. NP Conway diagnosed left wrist strain and left CTS. NP Conway recommended that Ms. Sayre continue with Ibuprofen, wear the brace at her discretion, attend PT, and perform modified duty.

On May 18, 2023, Ms. Sayre followed up with FNP Jarrell regarding her left wrist and elbow pain. FNP Jarrell diagnosed strain of the left wrist. Ms. Sayre was again seen by FNP Conway on June 1, 2023. The assessment was strain of left wrist. FNP Conway recommended that Ms. Sayre continue with PT and indicated that she should remain off work because she was out of modified duty days.

Ms. Sayre was treated at CAMC Teays Valley Hospital emergency room on July 28, 2023, for arm pain and swelling. The diagnosis was arm pain and swelling, and left elbow tendonitis. Ms. Sayre was advised to follow up with orthopedics.

On August 1, 2023, Ms. Sayre began treatment with Freddie Persinger, D.O. Ms. Sayre reported continued left upper extremity pain, and stated that she was unable to perform her job due to the pain and had to go home. The pain radiated from the back of her arm down into her hand and wrist. Dr. Persinger assessed radicular pain of right upper extremity and lateral epicondylitis of left elbow. He stated that he would like to obtain a repeat EMG of Ms. Sayre's upper left extremity due to symptoms consistent with radicular pain.

James Cox, D.O., administered a left elbow medial epicondyle cortisone injection on August 9, 2023. He assessed medial epicondylitis of the left elbow. Dr. Persinger completed a diagnosis update form on December 5, 2023, requesting that De Quervain's, left lateral epicondylitis, and left wrist pain be added to the claim as secondary conditions. Dr. Persinger indicated that the clinical findings on which the diagnoses were based were included in his exam notes from July 11, 2023, and August 1, 2023.

On April 3, 2024, an EMG of Ms. Sayre's left arm was performed. Glenn Goldfarb, M.D., interpreted the EMG as a normal study with no abnormalities. CTS, ulnar neuropathy, and radial neuropathy over the elbow were not demonstrated.

The Board issued an order dated December 2, 2024, affirming the claim administrator's January 12, 2024, order, which rejected left wrist De Quervain's and left lateral epicondylitis as secondary compensable conditions in the claim.² The Board found that Ms. Sayre failed to establish with reliable evidence that these were secondary compensable conditions. It is from this order that Ms. Sayre now appeals.

Our standard of review is set forth in West Virginia Code § 23-5-12a(b) (2022), in part, as follows:

The Intermediate Court of Appeals may affirm the order or decision of the Workers' Compensation Board of Review or remand the case for further proceedings. It shall reverse, vacate, or modify the order or decision of the Workers' Compensation Board of Review, if the substantial rights of the petitioner or petitioners have been prejudiced because the Board of Review's findings are:

- (1) In violation of statutory provisions;
- (2) In excess of the statutory authority or jurisdiction of the Board of Review;
- (3) Made upon unlawful procedures;
- (4) Affected by other error of law;
- (5) Clearly wrong in view of the reliable, probative, and substantial evidence on the whole record; or
- (6) Arbitrary or capricious or characterized by abuse of discretion or clearly unwarranted exercise of discretion.

Syl. Pt. 2, *Duff v. Kanawha Cnty. Comm'n*, 250 W. Va. 510, 905 S.E.2d 528 (2024).

On appeal, Ms. Sayre argues that the Board was clearly wrong in finding that left wrist De Quervain's and left lateral epicondylitis were not sustained in the course of and resulting from her occupational injury. Further, Ms. Sayre asserts that the normal EMG study does not rule out De Quervain's and epicondylitis. We disagree.

Three elements must coexist in compensability cases: (1) a personal injury, (2) received in the course of employment, and (3) resulting from that employment. *See Barnett v. State Workmen's Comp. Comm'r*, 153 W. Va. 796, 172 S.E.2d 698 (1970); *Sansom v. Workers' Comp. Comm'r*, 176 W. Va. 545, 346 S.E.2d 63 (1986).

² Ms. Sayre does not appeal the portion of the Board's order which rejected left wrist pain as a secondary compensable condition.

Here, the Board found that the medical evidence did not establish that left wrist De Quervain's and left lateral epicondylitis were secondary compensable conditions. The Board noted that although Dr. Persinger referenced medical notes dated July 11, 2023, as documenting the clinical findings on which his diagnoses were based, these medical notes were not part of the record. Further, the August 1, 2023, medical notes referenced by Dr. Persinger did not diagnose the condition of De Quervain's. The Board noted that Dr. Goldfarb concluded that the April 3, 2024, EMG of the left arm was a normal study with no abnormalities, and did not confirm the diagnosis of lateral epicondylitis of the left elbow. The Board also noted that there were no medical records from Dr. Persinger in evidence after the normal EMG testing that establish the presence of epicondylitis, and the only diagnosis of De Quervain's tenosynovitis was made on a Diagnosis Update form. No medical records contain a diagnosis of De Quervain's.

Upon review, we cannot conclude that the Board was clearly wrong in finding that Ms. Sayre did not establish that left wrist De Quervain's and left wrist epicondylitis were secondary compensable conditions in the claim. As set forth by the Supreme Court of Appeals of West Virginia, "[t]he 'clearly wrong' and the 'arbitrary and capricious' standards of review are deferential ones which presume an agency's actions are valid as long as the decision is supported by substantial evidence or by a rational basis." Syl. Pt. 3, *In re Queen*, 196 W. Va. 442, 473 S.E.2d 483 (1996). With this deferential standard of review in mind, we cannot conclude that the Board was clearly wrong in affirming the claim administrator's order, which rejected the conditions of left wrist De Quervain's and left wrist epicondylitis.

Finding no error, we affirm the Board's December 2, 2024, order.

Affirmed.

ISSUED: June 6, 2025

CONCURRED IN BY:

Chief Judge Charles O. Lorensen
Judge Daniel W. Greear
Judge S. Ryan White