2017 IL App (1st) 170728WC-U

Order filed: December 22, 2017

IN THE

APPELLATE COURT OF ILLINOIS

FIRST DISTRICT

WORKERS' COMPENSATION COMMISSION DIVISION

CARL BUDDIG & CO.,	)	Appeal from the Circuit Court
	)	of the First Judicial Circuit
Appellant,	)	Cook County, Illinois
	)	
v.	)	Appeal No. 1-17-0728WC
	)	Circuit No. 16-L-50551
THE ILLINOIS WORKERS'	)	
COMPENSATION COMMISSION *et al.*	)	Honorable
	)	Carl A. Walker,
(Ricardo Haro, Appellee).	)	Judge, Presiding.

PRESIDING JUSTICE HOLDRIDGE delivered the judgment of the court.
Justices Hoffman, Hudson, Harris, and Overstreet concurred in the judgment.

ORDER

¶ 1 *Held*: The Commission's findings that the claimant proved a compensable accident and that his condition of ill-being was causally related to the accident were not against the manifest weight of the evidence.

¶ 2 The employer, Carl Buddig & Co., appeals an order of the circuit court of Cook County confirming a decision of the Illinois Workers' Compensation Commission (Commission) granting certain benefits to claimant, Ricardo Haro, pursuant to the Illinois Workers' Compensation Act (Act) (820 ILCS 305/1 *et seq.* (West 2012)). The Commission reversed the

decision of the arbitrator, finding that the claimant proved a compensable accident, which caused his current condition of ill-being.

¶ 3 FACTS

¶ 4 The following factual recitation is taken from the evidence presented at the arbitration hearing conducted on July 17, 2015, and the Commission's Corrected Decision and Opinion on Review dated August 9, 2016.

¶ 5 The claimant testified, that on February 6, 2012, he was employed by the employer in a food-processing facility as a forklift driver and had been for a little over a year. He loaded and unloaded trucks, made orders, and put away stock. Sometimes, he had to lift cases of product all day. On February 6, 2012, he was making orders, and to expedite the process, he and a coworker would push "six to eight layers of boxes" together down to another skid. Each layer would have anywhere from 6, 12, 24, to 28 boxes in a row, depending on the size of the boxes. Claimant testified that he was pushing six layers of boxes weighing approximately 100 pounds with a coworker, Gustavo Pacheco, when he felt pain on the left side of his lower back, which he believed to be a pulled muscle. In an eyewitness report, Pacheco reported that they were pushing three layers of product when the claimant said that he pulled a muscle. They stopped working for about 10 minutes to see if the pain would go away. The pain persisted, and the claimant reported the injury to his supervisor, who called security to take him to the hospital.

¶ 6 The claimant testified that he had an x-ray of his lower back at the hospital. The claimant was diagnosed with a lumbar strain and was prescribed Ibuprofen and Skelaxin. He was referred to Ingalls Occupational Health Clinic (Ingalls) for a follow up. The claimant followed up at Ingalls the next day and was put on restricted duty. He returned weekly for examinations, where it was determined what he "was able to do" and he was prescribed more medication. He was in

physical therapy for about two months and put on restrictions, but he did not go back to work on restricted duty. A doctor at Ingalls recommended an MRI, which the employer denied.

¶ 7 The claimant testified, that on March 26, 2012, he was released to return to work on a trial basis. On the day he returned to work, he worked the entire day, but returned to Ingalls the next day. He believed that he was not okay to work because he had pain in his lower back and in his left leg. Medical records indicate that the claimant stated his pain worsened because he did not have any breaks and he was required to use stairs and inclines very often. After an examination, he was directed to continue physical therapy and was put on restricted duty. Again, a doctor at Ingalls recommended an MRI, which the employer denied.

¶ 8 The claimant testified, that on April 6, 2012, he stopped physical therapy after about 18 sessions per his doctor's recommendation. He was still on restricted duty, which the employer could not accommodate. The last time the claimant went to Ingalls was on May 9, 2012, and he was told to continue his medication and an MRI was recommended, which was denied. Later that month, the employer sent him to Dr. Barbara Heller for an independent medical evaluation (IME). Dr. Heller issued a report indicating that the claimant was better and able to work. The employer terminated his medical treatment and sent him a letter asking him to return to work.

¶ 9 The claimant testified that the day after he returned to work, he saw his primary doctor for his pain. Thereafter, on about four or five occasions between May 2012 and October 2012, due to the pain in his lower back and left leg and foot, his primary doctor took him off work and then released him back to work. He returned nearly every month, where he was examined and prescribed additional medication. He experienced more pain in his back and left leg, all the way down to his toes. He last returned to work on October 1, 2012, and worked for 16 days. He experienced pain in his back and left leg down to his toes. His toes became numb, swollen, and

painful. His last day of work was on October 16, 2012, and he has been off work since.

¶ 10 The claimant testified, that on October 23, 2012, he had an MRI. The MRI showed that he had a herniated disc, and he was referred to an orthopedist, Dr. Abdul Amine. Dr. Amine administered an epidural injection on May 17, 2013, July 5, 2013, and August 30, 2013. The claimant noticed no improvement from the injections and noted his pain was getting worse. He returned to Dr. Amine on September 26, 2013, and asked to have surgery. Dr. Amine ordered a second MRI and performed surgery on February 10, 2014. The surgery did not resolve his back or leg pain. Dr. Amine prescribed him Vicodin and Neurontin and recommended physical therapy. The physical therapy was not approved by insurance. He last saw Dr. Amine on September 18, 2014. During the entire time he was treated by Dr. Amine, Dr. Amine never released him to go back to work in any capacity.

¶ 11 On March 10, 2014, at the employer's direction, the claimant had another IME by Dr. Kern Singh. Dr. Singh recommended a third MRI, which the claimant had on August 18, 2014. Dr. Singh recommended a second surgery, and the claimant agreed to treatment. The surgery was scheduled for September 9, 2014, but it was not approved. Dr. Singh indicated that the claimant could not return to work until he had surgery.

¶ 12 At the time of his testimony, the claimant still wanted the surgery, and he had not seen Dr. Singh since the third MRI. However, Dr. Singh continues to refill his prescriptions. The claimant further testified that he has never injured or had treatment for his lower back prior to February 6, 2012, and he has not reinjured his back in any way after that date. He still had pain in his lower back, left leg, foot, and toes. Further, he stated that "everything" aggravates his back pain, including walking, lying, and sitting.

¶ 13 On cross-examination, the claimant was questioned about a visit with his primary doctor

on August 20, 2012. Medical records showed that he saw his doctor for a sore throat and back spasms. The records indicated that he had pain the previous day when he carried his son for over 100 yards, who weighed approximately 70 pounds. The claimant was unable to walk for five days. The claimant testified that he could not remember telling the doctor this information. The claimant was also questioned about another record from September 11, 2012, where he told a doctor he was unable to walk. The records indicated that he helped set up outdoor party furniture. The claimant stated he attempted to move about six chairs but stopped because of the pain.

¶ 14 David Streeter, the safety and security manager for the employer, testified that he had 20 years of human resources experience and worked for the employer for about six and a half years. He created and enforced all safety-related policies and procedures. He also administered return to work programs. He testified that the employer had a 100% return to work program, by which they honor all light duty restrictions. Once he was informed of any restrictions, he would contact the employee and accommodate them. He stated that employees could be assigned to drive a forklift with no lifting, "cycle counts" in parts and maintenance, or do paperwork.

¶ 15 Streeter identified the accident report, eyewitness report, and supervisor's report from the accident in question. The reports indicated that the claimant was injured while pushing layers of boxes onto an empty pallet. The employer had a policy that when an employee is pushing boxes off of a pallet, they should work as a team and only push a maximum of two layers at a time. Streeter was surprised to see that the claimant and Pacheco had pushed three layers because the force needed to push two layers was acceptable—three was not. Streeter also stated that it was not plausible that the claimant was pushing six layers of boxes because six layers would be an entire pallet so it would not make sense to push boxes from one pallet to another and they would just utilize the existing pallet of product.

¶ 16 Streeter testified that the claimant suffered a muscle strain as a result of the accident. He did not recall whether there was any resistance from any employees about accommodating the claimant's restrictions or whether the claimant complained to him of pain after he returned to light-duty work. Streeter testified that he was aware that a doctor at Ingalls placed the claimant on restricted duty but could not recall whether the employer provided work with restrictions. After Streeter received Dr. Heller's report indicating that claimant could return to work without restrictions, he asked the claimant to return to work at full duty. Streeter acknowledged a note indicating that he called Ingalls on February 8, 2012, in regard to the claimant's restrictions. An addendum note also stated that Streeter called Ingalls and told them that the claimant had a history or trying not to work, he believed the claimant was exaggerating his symptoms, and his facility did not have stairs. However, Streeter testified that he could not remember this conversation.

¶ 17 Louis Draganich, an expert consultant in injury biomechanics with a Ph.D. in bioengineering, was called by the employer to testify as to whether the activity alleged caused the accident alleged. Draganich read the medical and workplace records, researched literature, performed an inspection, oversaw a reenactment demonstration of the alleged incident, and issued a report. The reenactment was performed by Streeter and Pacheco and included three layers of boxes totaling about 85 boxes, which were reported to be identical to those involved in the incident. Draganich asked the employer's attorney to serve as a surrogate because he was the same height as the claimant and the variation of weight was sufficiently close (the claimant was 185 pounds and the attorney was 150 pounds). Pacheco set up the demonstration as it was at the time of the incident.

¶ 18 Draganich opined that it took 72 pounds of force to push the boxes. The compressive

force on L5-S1 was between 485 and 630 pounds. By comparison, fast walking would produce 545 pounds of compressive force on the lumbar spine, bending over at about 80 degrees would cause 561 pounds of compressive force, a sit up would produce about 600 pounds of compressive force, and carrying a typical carry-on suitcase would produce 621 pounds of compressive force, which was almost exactly the same as the alleged accident. He concluded that the force exerted in the alleged accident was very similar to those exerted in normal exercise and activities of normal everyday living. He determined that for the claimant's age and weight, his tolerance limit was a little over 2,000 pounds to fracture the bone. Therefore, he concluded that the force was not sufficient to cause the ruptured disc or to aggravate any preexisting condition. He opined that the claimant's injury was not produced acutely, but rather, was the result of fatigue. On cross-examination, Draganich agreed that many activities that do not require much heavy lifting could cause a disc herniation.

¶ 19 Dr. Heller, the medical examiner that conducted the first IME on the claimant in May 2012, testified by deposition. She did not remember the claimant, but in her report, she noted that the claimant told her that he was pushing stacked boxes of fairly light items four to five feet on a skid and felt pain on his lower back. After conducting the May 2012 physical examination, she diagnosed him with a mild lumbar strain and noted his examination was essentially normal. She believed that the claimant's injury was not as severe compared to other patients she had seen. At the time of the examination, she believed the claimant had achieved maximum medical improvement because he did not require any additional treatment based on the normalcy of his physical exam, his extensive physical therapy, and because he was taught "how to change positions properly."

¶ 20 On cross-examination, Dr. Heller testified that although the claimant continued to

complain of lower back pain in his weekly exams through April 6, 2012, his physical exams were normal except for tenderness and decreased range of motion. Her dictation did not indicate that the claimant began complaining of radiating left leg pain. She noted, that if he had pain to the knee, it would not be radicular pain, as radicular pain would involve below the knee with numbness and tingling. Additionally, she opined that leg pain in the front of the leg would be consistent with an L5-S1 herniation.

¶ 21 At the time of her examination, Dr. Heller did not believe an MRI was indicated because the claimant did not complain of radicular or leg pain and Ingalls' records showed no such symptoms. After seeing an Ingalls note from March 21, 2012, that indicated the claimant complained of low back pain with radiation to the base of the buttocks and the posterior of the left leg to the knee with no numbness or tingling, she stated that his symptoms were not "hard and fast" radicular to her. She stated that the report of pain could be referred pain because his symptoms did not follow nerve distribution. However, Dr. Heller did agree that the claimant's October 2012 MRI showed a large herniated disc—but that did not change her opinion that he only had a mild lumbar strain when she examined him in May 2012 because he did not complain of leg pain, numbness, or tingling and his physical examination was practically normal.

¶ 22 Dr. Singh, the medical examiner that conducted the second IME on the claimant in March 2014, testified that he believed the claimant's reported work injury caused the herniated disc at L5-S1. He reviewed an MRI from 2012 that showed a herniated disc at L5-S1 and an MRI from 2012 that showed no change. Dr. Singh opined "the mechanism of injury is no different than can be the expected result from normal daily activity." Meaning that he thought either pushing boxes or normal activities were plausible mechanisms of injury. In August 2014, Dr. Singh noted that the claimant had positive straight leg raises and weakness in his calf muscle and big toe. He

recommended a repeat MRI because the claimant was neurologically deficit at that time. The repeat MRI showed that a large disc herniation was still present causing nerve compression at L5 and the previous surgery had taken away a lot of the L5-S1 face joint. Dr. Singh opined that the claimant's symptoms were essentially unchanged but now with a new neurological deficit. He felt that the residual disc herniation was a direct byproduct of the February 2012 work injury.

¶ 23 On cross-examination, Dr. Singh agreed that his initial examination was essentially normal. However, he thought the claimant's pain complaints were reasonable considering that he was only four weeks post-operation, and he saw no indication of symptom magnification. Dr. Singh's undergraduate degree was in biomechanical engineering, however, he would not defer to a biomechanical analysis—he would have to analyze it himself. However, he felt it would be highly unlikely that a biomechanical analysis would change his opinion on causation. Dr. Singh believed that the previous medical examiners were incorrect with their diagnosis of lumbar muscular strain because the MRI revealed a disc herniation. Dr. Singh was questioned regarding medical records that indicated that the claimant suffered from chronic lower back pain since 1997. Notably, the claimant testified that he never received treatment for his lower back prior to February 6, 2012. Nonetheless, the Dr. Singh concluded that the claimant's history of chronic lower back pain was not consistent with the herniated disc injury. Instead, the claimant's history of chronic lower back pain was consistent with the degeneration seen at L5-S1. Dr. Singh recommended that the claimant should stay off work pending surgery because the spinal segment at L5-S1 was unstable with a large herniation causing nerve root compression.

¶ 24 The arbitrator concluded that the claimant failed to prove, by a preponderance of the evidence, that an accident occurred that arose out of and in the course of his employment with the employer. The arbitrator stated, that based on the review of medical records, the witness

statement, and the fact that the claimant's testimony was contradictory to the facts as contained in the medical records, that the claimant was not a credible witness. She concluded that his claim of a compensable accident was not credible regarding the mechanism of his alleged injury, his history of chronic back pain, and several documented intervening causes. She specifically noted that the claimant's testimony that he was pushing six to eight layers of boxes was contradicted by earlier reports, his reference to the required use of stairs, and his statements to providers that there was no light duty work available. She noted that his claim regarding stairs at work and the lack of available light duty work were specifically denied by Streeter in his testimony. The claimant filed a petition for review.

¶ 25 The Commission reversed the decision of the arbitrator and found that the claimant proved a compensable accident on February 6, 2012, which caused his current condition of ill-being. The Commission noted that the arbitrator erred when she premised her denial of compensation based on her finding that the claimant did not prove an accident rather than that he did not prove causation. The Commission found that the arbitrator's reliance on Streeter's testimony was misplaced. The Commission stated that Streeter's testimony that the employer always had light duty available to accommodate any restrictions was not credible and did not make sense intuitively. The Commission believed, that if that was the case, the employer would have documented its offer of light duty employment and terminated temporary total disability benefits if the claimant refused—it did not. Further, the Commission found Streeter's testimony seemed to equivocate when asked if the employer actually offered the claimant light duty work.

¶ 26 The Commission also found the inconsistency as to whether the claimant was pushing three or six layers of boxes to be of limited importance. The claimant testified that the boxes weighed approximately 100 pounds and Streeter confirmed that three layers of boxes would

weigh over 100 pounds. Based on the claimant's immediate reporting of the accident, his consistent reports to medical providers, and corroboration by an eyewitness, the Commission found that the claimant proved that he sustained a compensable accident on February 6, 2012.

¶ 27 As to causation, the Commission noted that the claimant's complaints of pain and symptoms arose immediately after the accident and were consistent and persistent thereafter. The Commission found the testimony of Dr. Singh to be more persuasive than that of Dr. Heller, both of which were hired by the employer. Dr. Singh found that the claimant's herniated disc was consistent with the reported mechanism of injury, as reported by the claimant, and that his condition was caused by a work accident. The Commission noted that Dr. Heller did not have the benefit of the MRI results when she examined the claimant and issued her report. The lack of objective evidence signifying pathology for more than eight months was due to the employer's denial of authorization for an MRI—despite repeated requests from doctors at Ingalls—its preferred medical provider. The Commission also found that the employer failed to successfully establish that the incidents of increased symptoms after the claimant carried his son and moved outdoor party furniture were intervening events severing causation.

¶ 28 Last, the Commission addressed Draganich's testimony. The Commission stated, that although he tried to duplicate the mechanism of injury as closely as possible, it was impossible for him to precisely determine exactly how the claimant performed the activities during the incident. Additionally, his calculations were based on the force needed to herniate a healthy disc but there was no evidence as to the claimant's back condition prior to the accident. The Commission noted that Draganich's analysis presumes that more than one out of five individuals in the claimant's age group have had one or more asymptomatic disc herniations, which could support the theory that the claimant had a preexisting asymptomatic disc herniation, which

became symptomatic after the work accident. The Commission also noted that because Dr. Singh also had a degree in biomechanical engineering and found the mechanism consistent with a herniated disc, it lessened the impact of Draganich's opinions.

¶ 29 The Commission concluded that all medical treatment rendered to date was necessary and reasonable and related to the claimant's work-related injury. The employer did not present any evidence demonstrating otherwise. The Commission awarded all outstanding medical expenses occurred to date, subject to the applicable medical fee schedule. Additionally, the Commission ordered the employer to authorize and pay for prospective treatment by Dr. Singh. The Commission awarded a total of 159-2/7 weeks of total temporary disability benefits at a rate of $299.73 per week. The Commission also remanded the matter of any additional temporary and total disability benefits, as well as permanent disability benefits, to the arbitrator.

¶ 30 The employer sought judicial review of the Commission's decision in the circuit court of Cook County. The circuit court confirmed the decision and award of the Commission. The employer appeals.

¶ 31 ANALYSIS

¶ 32 To obtain compensation under the Act, a claimant must show, by a preponderance of the evidence, that he suffered a disabling injury that arose out of and in the course of his employment. *Baggett v. Industrial Comm'n*, 201 Ill. 2d 187, 194 (2002). An injury "arises out of" one's employment if it originated from a risk connected with, or incidental to, the employment and involved a causal connection between the employment and the accidental injury. *Id.* Whether a claimant established the requisite causal connection is a question of fact to be determined by the Commission. *Westin Hotel v. Industrial Comm'n of Illinois*, 372 Ill. App. 3d 527, 538 (2007). In resolving disputed issues of fact, it is within the exclusive purview of the

Commission to assess the credibility of witnesses, draw reasonable inferences from the evidence, determine the weight to be given to evidence, and to resolve conflicting evidence. *Shafer v. Illinois Workers' Compensation Comm'n*, 2011 IL App (4th) 100505WC, ¶ 38.

¶ 33 A factual finding by the Commission will not be set aside on appeal unless it is against the manifest weight of the evidence. *City of Springfield v. Illinois Workers' Compensation Comm'n*, 388 Ill. App. 3d 297, 315 (2009). A finding of fact is against the manifest weight of the evidence when an opposite conclusion is clearly apparent. *Gross v. Illinois Workers' Compensation Comm'n*, 2011 IL App (4th) 100615WC, ¶ 21. The appropriate test for our review is whether the evidence in the record is sufficient to support the Commission's determination—not whether this court or another tribunal might have reached an opposite conclusion. *Pietrzak v. Industrial Comm'n of Illinois*, 329 Ill. App. 3d 828, 833 (2002).

¶ 34 First, the employer argues that the Commission's finding that the claimant proved that a compensable accident occurred on February 6, 2012, was against the manifest weight of the evidence. Specifically, the employer argues that the Commission's decision was against the manifest weight of the evidence because (1) the claimant lacked credibility, (2) the medical records showed normal physical findings after the alleged accident, (3) several potential intervening causes were documented following the alleged accident, and (4) testimony from Streeter demonstrated that the alleged mechanism of injury was illogical and contrary to policy.

¶ 35 The claimant reported the February 2012 accident to the employer 10 minutes after it occurred. At the hospital, he reported that he hurt his lower left back as he was pushing boxes, which was corroborated by Pacheco. Although the record contains some inconsistencies as to how many boxes he was pushing when the accident occurred, the claimant testified that they weighed about 100 pounds, which was supported Streeter's testimony. The claimant was

diagnosed with a lumbar strain. After the accident, he engaged in weeks of physical therapy, where he continued to complain of back pain. In March 2012, the claimant first complained that the pain in his lower back radiated down his left leg. The doctors at Ingalls repeatedly recommended MRIs, which were denied by the employer's insurer.

¶ 36 In May 2012, the employer sent the claimant to Dr. Heller for an IME. Dr. Heller concluded that the claimant suffered a mild lumbar strain and that he was better and able to work. Over the next few months, the defendant's complaints of pain persisted, and he was continuously taken off and put back on work. In October 2012, the claimant worked his last day with the employer and experienced pain in his back and left leg down to his toes. His toes became numb, swollen, and painful. He had an MRI that revealed a large herniated disc. Over the course of several months, Dr. Amine gave the claimant three epidural injections and performed a left L5-S1 laminectomy, foraminotomy, and facetectomy for a herniated disc and radiculopathy. He obtained no relief from the injections or the procedures.

¶ 37 In March 2014, the employer sent the claimant to Dr. Singh for a second IME. Dr. Singh opined that the lumbar strain diagnoses were incorrect as the October 2012 MRI revealed a large disc herniation. He believed that the previous doctors were unable to correctly diagnose the claimant's condition because they did not have the benefit of the MRI. He testified that the claimant's injury was consistent with the pushing of boxes, as the claimant described.

¶ 38 Nevertheless, the employer argues that two intervening causes occurred that may have caused the claimant's current condition of ill-being. First, around August 20, 2012, when the claimant informed his doctor that he hurt his back while carrying his son and experienced back spasms. Second, on September 11, 2012, when the claimant reportedly set up outdoor party furniture and reported that he injured his back rendering him unable to walk. However, this is

contradictory to Dr. Singh's opinion, which the employer fails to reconcile with its argument. The claimant consistently complained of lower back pain from the very instance of his described injury in February 2012. Additionally, the claimant complained of pain radiating down his left leg as early as March 2012. The claimant made these complaints before either of these alleged intervening causes occured. It is logical to assume that an untreated herniated disc would be aggravated after attempting to work and complete activities of daily living for several months. Based on the foregoing reasons, we find that there was sufficient factual evidence in the record to support the Commission's finding that the claimant proved that a compensable accident occurred on February 6, 2012.

¶ 39 Second, the employer argues that the Commission's finding that the claimant's current condition of ill-being was causally related to the February 2012 injury was against the manifest weight of the evidence. In making this argument, the employer largely relies on the testimonies of Dr. Heller and Draganich and the aforementioned alleged intervening causes.

¶ 40 The employer essentially argues that Dr. Heller's medical opinion and Draganich's analysis should be given more weight than Dr. Singh's medical opinion. As we previously stated, it is not the prerogative of a reviewing court to reweigh the evidence and substitute its judgment for that of the Commission. The Commission is tasked with resolving conflicts in the evidence presented, including medical testimony and evidence. See *Prairie Farms Dairy v. Industrial Comm'n*, 279 Ill. App. 3d 546, 551 (1996). Accordingly, it was for the Commission to decide which of two conflicting opinions should be accepted and we will not substitute our judgment for that of the Commission. *Setzekorn v. Industrial Comm'n*, 353 Ill. App. 3d 1049, 1055 (2004).

¶ 41 The employer also notes the aforementioned intervening causes, two separate instances when the claimant carried his child and when he helped set up outdoor party furniture. However,

as we previously addressed under the employer's first argument, these "intervening causes" are unpersuasive and have been rebutted by Dr. Singh's testimony that the work accident caused the herniated disc. Because we find support in record for the Commission's finding that a causal relationship existed between the claimant's work-related injury and his condition of ill-being, we cannot say that the Commission's determination is against the manifest weight of the evidence.

¶ 42 Third, the employer alternatively argues that the Commission erred when it found that the claimant proved he was entitled to reasonable and necessary medical expenses and prospective medical care. The employer argues that the claimant underwent procedures that were not causally related to the alleged work-related accident, noting that the he received epidural injections despite his release from Ingalls, received no improvement from the injections, and underwent a lumbar discectomy without approval or recommendation of Dr. Heller. This is the extent of the employer's argument, which fails to include any citation to the record, citation to authority, and a developed argument. Where an issue is merely included in a vague allegation of error, it is not argued, and it will not satisfy the requirements of the Supreme Court rule requiring argument and citation to relevant authority. *Lake County Grading Co., LLC v. Village of Antioch*, 2014 IL 115805, ¶ 36; Ill. S. Ct. R. 341(h)(7) (eff. Jan. 1, 2016). Therefore, the employer has forfeited review of this issue and we need not consider it.

¶ 43 Last, the employer alternatively argues that the Commission's finding that the claimant proved that he was entitled to payment of temporary total disability benefits for a period of 159-2/7 weeks was against the manifest weight of the evidence. The employer's argument hinges on its belief that the claimant did not prove that he was unable to work. The entirety of the employer's argument states, "Because [the employer] has shown herein that [the claimant] has failed to prove that he sustained an accident, and that his current condition of ill[-]being is

causally related to his employment *** the issue of temporary total disability benefits is also moot." Again, issues merely included in a vague allegation of error are not "argued" and fail to satisfy the requirements of Illinois Supreme Court Rule 341(h)(7) (eff. Jan. 1, 2016). The employer has also forfeited this issue and we need not consider it.

¶ 44 CONCLUSION

¶ 45 For the foregoing reasons, we affirm the judgment of the circuit court of Cook County, which confirmed the Commission's decision.

¶ 46 Affirmed and remanded.