

UNREPORTED

IN THE COURT OF SPECIAL APPEALS

OF MARYLAND

No. 2414

September Term, 2016

JARED FRIED

v.

GARRISON PROPERTY & CASUALTY
INSURANCE CO.

Graeff,
Leahy,
Shaw Geter,

JJ.

Opinion by Graeff, J.

Filed: January 30, 2018

*This is an unreported opinion, and it may not be cited in any paper, brief, motion, or other document filed in this Court or any other Maryland Court as either precedent within the rule of stare decisis or as persuasive authority. Md. Rule 1-104.

In this appeal, Jared Fried, appellant, challenges the amount of damages that the Circuit Court for Baltimore City awarded him as a result of injuries he sustained after a June 14, 2012, motor vehicle accident. The court agreed with Garrison Property & Casualty Insurance Co. (“Garrison”), appellee, that damages arising from a subsequent injury Mr. Fried sustained in 2015 were not causally connected to the 2012 accident.¹ The circuit court awarded Mr. Fried \$15,404.66 for past medical expenses, \$22,109.85 for lost wages, and \$100,000 in non-economic damages, for a total award of \$137,514.51. This total was reduced by \$123,867.91, based upon a prior agreement between the parties to offset any award.

Mr. Fried subsequently filed a Motion to Alter or Amend the Judgment. The court denied the motion with regard to the court’s causation ruling, but it granted a Consent Request to Amend the Judgment, increasing the total award from \$13,646.60 to \$39,246.07.²

On appeal, Mr. Fried presents three questions for this Court’s review, which we have rephrased slightly, as follows:

1. Was the trial court’s conclusion of law legally correct with regard to its finding that Garrison was not responsible for the 2015 injury?

¹ Mr. Fried had an uninsured or underinsured motorist insurance policy with Garrison Property & Casualty Insurance Co. There was no dispute that Mr. Fried had a legitimate underinsured motorist claim or that he was injured in an accident in June 2012. The dispute was limited to damages.

² Due to an error mutually identified by the parties, the offset total was modified to \$98,268.44, which increased the total award amount from \$13,646.60 to \$39,246.07.

2. Did the trial court abuse its discretion in denying Mr. Fried's Motion to Alter and Amend the Judgment regarding its finding that Garrison was not responsible for the 2015 injury?
3. To the extent that the trial court considered the 2006 injury in rendering its decision that Garrison was not responsible for the 2015 injury, was such a consideration clearly erroneous in light of the evidence in the record?

For the reasons set forth below, we shall affirm the judgment of the circuit court.

FACTUAL AND PROCEDURAL BACKGROUND

On April 14, 2015, Mr. Fried filed a complaint in the Circuit Court for Baltimore City against Garrison and a third-party individual, who was the cause of the 2012 motor vehicle accident. Mr. Fried alleged one count against Garrison related to his uninsured/underinsured motorist policy.

On October 7, 2016, a bench trial ensued. Mr. Fried testified that he was employed in the Narcotics Unit of the Baltimore Police Department.³ As an undercover officer, Mr. Fried's unit was responsible for the apprehension of suspects involved with guns and narcotics, and part of his duties involved executing search warrants on homes, businesses and cars.

On June 14, 2012, Mr. Fried was a passenger in a vehicle driven by his sergeant, when another vehicle collided with them. Mr. Fried "felt a pop" in his right shoulder and "instantly had pain" in his right shoulder and right wrist. On October 5, 2012, Mr. Fried

³ At the time of trial, Mr. Fried informed the court that he had passed the sergeant's examination and was awaiting confirmation of his promotion. Accordingly, we will refer to him as Mr. Fried.

had surgery to fix a torn labrum in his right shoulder. He remained out of work for three months, until January 2013, when Dr. Nanavati cleared him to return to light duty.⁴ Mr. Fried returned to full duty status in the spring of 2013.

In 2015, Mr. Fried was executing a search warrant of a van, which he had done many times in the prior two years. Mr. Fried stated that as he was crawling through the van to conduct the search, he climbed over the seats, and when he put his arm down, he felt a “pop” in his right shoulder.

After the injury, Mr. Fried went to physical therapy and consulted with Dr. Jason Hammond. On December 16, 2015, Dr. Hammond performed surgery on Mr. Fried’s right shoulder. Thereafter, Mr. Fried was out of work for approximately three months, and he engaged in physical therapy.

Mr. Fried stated that, as a result of the 2012 injury, his ability to use his right arm limited his duties at work. Prior to this injury, he was known as the “ram man,” i.e., the person who swung the ram to break down a door, but after his injury he could no longer perform this task. He moved from the “enforcement side of the drug unit” to the “investigative side,” believing that he was a liability to himself and his squad members because he could not hold his gun for a long period of time in a barricade situation and the recoil from shooting his gun caused pain. Since the subsequent 2015 injury and surgery, there were still things he could not do, such as holding his children for long periods of time, and throwing a baseball or softball with them.

⁴ Dr. Nanavati’s first name does not appear in the transcript.

Dr. Hammond, who operated on Mr. Fried's shoulder after the 2015 injury, testified that he performed, at the request of Mr. Fried's counsel, an independent medical evaluation of Mr. Fried, which included a review of Mr. Fried's medical history. In 2006, Mr. Fried, in the course of performing his police duties, was involved in an altercation that resulted in an injury to his right shoulder. Mr. Fried received "some conservative treatment, such as physical therapy," but the injury had "significantly improved" prior to the 2012 injury. The 2006 injury was diagnosed as a superior labrum tear, the same type of injury that Mr. Fried sustained in 2012 from the motor vehicle accident.

Dr. Hammond reviewed Dr. Nanavati's operative notes from the 2012 surgery, which "describe[d] that the superior labrum visually was intact," and "the anterior and posterior labrum were - - looked - - visually intact."⁵ Dr. Hammond opined: "A lot of times you can have a - - because you have the labrum tear here you can have some stretching of the ligaments that you don't know – see virtually as torn. But it can cause the shoulder still to have slight looseness in this bone." He testified that this looseness is referred to as "instability."

When Dr. Hammond saw Mr. Fried in 2015, he was in "a lot of pain." Mr. Fried stated that he had been dealing with the pain for a period of time, which "got worse after

⁵ Dr. Hammond described the shoulder, using an analogy of a golf ball on a tee, stating that, "[i]n order to keep the ball in place, if you put a rubber ring on a golf tee, that's kind of like what the labrum is. It helps to hold the ball in place." He stated that there are various points of the labrum: the superior labrum representing the top of the labrum; the anterior being the front of the labrum; and the posterior being the back of the labrum.

his subsequent injury to the shoulder region.” Dr. Hammond described Mr. Fried’s 2015 injury as a tear to the posterior and anterior labrum, and because conservative treatment options, i.e., physical therapy and rest, did not improve the injury, it was fixed through an arthroscopic procedure.⁶

Dr. Hammond stated that he had an opinion, within a reasonable degree of medical certainty, regarding what caused the 2015 injury. He explained that when someone has a significant injury like Mr. Fried had in 2012, it can make the person more susceptible to future difficulty with the labrum or instability problems. Although Dr. Nanavati’s notes indicated that there was no instability present when Mr. Fried was discharged in 2013, Dr. Hammond testified that instability can develop over time, as the shoulder ligaments can stretch out if they are “being irritated or aggravated,” and as the shoulder stretches out “the instability can worsen over time.” Dr. Hammond testified that Mr. Fried was more susceptible to injury because of the 2012 accident, and the 2015 injury was causally related to the 2012 accident.

Dr. Hammond opined, to a reasonable degree of medical certainty, that Mr. Fried has permanent injury to his right shoulder. He opined that there was a possibility Mr. Fried would have permanent discomfort with certain motions, depending on how he moved his arm, as well as discomfort with certain activities, such as throwing objects.

⁶ Dr. Hammond testified that arthroscopy is a “minimally invasive approach” that utilizes a small camera “to look behind the ball and socket” and observe the entire joint. He utilized dissolvable anchors and sutures to repair the anterior and posterior labrum tears.

On cross-examination, Dr. Hammond stated that the records from the 2006 injury to the right shoulder indicated that it was a “suspected SLAP tear.”⁷ With respect to the 2015 injury, Mr. Fried’s description of the “pop” in his shoulder was clinically significant because it indicated “an acute event, something that – that’s different than what you may have felt before.” He characterized Mr. Fried’s 2015 injury as a “significant” injury. In December 2015, Dr. Hammond “repaired two tears, one at the anterior location and one at the posterior location.” The tear to the superior labrum, which Dr. Nanavati repaired in 2012, was still intact.

On redirect examination, Mr. Fried’s counsel inquired about Dr. Hammond’s testimony regarding the 2015 injury being an acute event. Dr. Hammond testified that an acute event is clinically defined as “[s]omething that happens right away or currently,” in contrast to a chronic event, which is “something that’s been going on for [a] long, long period of time.” Dr. Hammond confirmed that instability can result in an acute event, and it was not unusual for someone to have subtle subclinical instability and then experience an acute event, which is what he believed happened to Mr. Fried in 2015.

The court then asked some clarifying questions to understand a labrum tear. It questioned Dr. Hammond about the impact of the 2006 injury on the 2012 and 2015 injuries. Dr. Hammond stated that he did not think “that the 2006 injury had a distinct

⁷ The term SLAP tear is an acronym for the superior labrum, anterior, posterior (SLAP). Dr. Hammond described a SLAP tear as a version of the labrum tear, but from the superior to the anterior-posterior area. He stated that “the labrum is adhered to the socket,” and a tear occurs when the labrum peels off of the bone of the socket area known as the Glenoid Labrum.

impact on the 2012 injury.” Rather, “[t]o a reasonable degree of medical certainty [he] believe[d] that the 2012 injury was unique and separate.” With respect to the 2015 injury, he could not tell “because of the intervening surgery.”

The parties then presented closing argument. Counsel for Mr. Fried noted that Garrison was not challenging the causation relating to the 2012 injury. With respect to the 2015 injury, counsel argued that instability caused by the 2012 event “led to the 2015 incident, the pop when he reached, and necessitated the conservative treatment and surgery that [Mr. Fried] received in 2015.” He argued that the 2012 injury changed Mr. Fried’s abilities, which was evidenced by Mr. Fried’s testimony that his duties at work changed from executing search warrants to investigations, and Dr. Hammond’s testimony that “Mr. Fried was going to be limited and it was going to [be] permanent in terms of his range of motion, his mobility, his strength and experiencing pain.”

Counsel for Garrison argued that Mr. Fried’s 2015 injury was a “significant new and distinct event.” He stated that Dr. Hammond’s dismissiveness in not making a connection between the 2006 and 2012 injuries, because Mr. Fried “got better and he required no additional medical care,” was significant with respect to the 2015 injury, where Mr. Fried had no medical treatments or consultations regarding his shoulder for two years prior to 2015. Counsel further asserted that if “the record was that over time Mr. Fried’s condition worsened . . . [there would be] something to show some type of gradual deterioration” until the 2015 injury. Moreover, Garrison’s counsel noted that when Dr. Hammond performed the surgery in 2015, he discovered two tears as compared to “2012

[where] there was only one at the superior position of the labrum, which according to Dr. Hammond was intact. There's no evidence that what Dr. Nanavati did in 2012 fell apart, was re-injured, deteriorated, anything."

Counsel conceded that Garrison was responsible for any damages, i.e., lost wages or medical bills, incurred as a result of the 2012 accident, but he disputed responsibility for any claims arising from the 2015 injury. With respect to expert opinion that there was a causal connection between the 2012 and 2015 injuries, counsel stated that, if this had been a jury trial, the court would have given an instruction that it was within the jury's discretion to accept all, part or none of the testimony it received, and the court, as trier of fact, could do the same.

On rebuttal, counsel for Mr. Fried agreed with Garrison that the court was not bound to accept Dr. Hammond's testimony, but he argued that Dr. Hammond was an "exceptional expert." Counsel noted that if the case had been a jury trial, he would have requested instructions on susceptibility to injury and aggravation of a pre-existing condition. Counsel stated:

The susceptibility to injury instruction is important because if someone is susceptible to a future injury, like Mr. Fried and like Dr. Hammond testified to, I think that it makes perfect sense that Dr. Hammond would opine that that injury in 2012 could create the instability that led to this tear in 2015.

And then with regard to the pre-existing condition and the aggravation of pre-existing condition it – like I started my closing with, at best or at worst, depending on your perspective I suppose, if the 2006 injury was a pre-existing condition the fact that he had another event in 2012 to that same body part, I would ask the Court to consider that to be of no moment.

Which I think is why the defense is not contesting it because an aggravation of a pre-existing condition is every bit as compensable and every bit as valuable in terms of what weight should be afforded to it, as if it had been a new injury to a completely unrelated body part.

So when the Court's doing [its] deliberations I would ask that you take those things into consideration when you consider the continuum of testimony that Mr. Fried has experienced.

The court stated that it was going to take some time to consider the testimony and "consider what ramifications, if any, are appropriate where there are no medical records in a case of this nature."

On October 11, 2016, the court provided its ruling, stating as follows:

The Court has struggled with this case for a number of reasons, and the Court will address them as I render the decision.

The law is clear with respect to aggravation of previous conditions. And in short, you take the plaintiff as we find them. According to the case law, the aggravation of a previous condition, a plaintiff may receive damages for the aggravation or worsening of that condition.

And the law as to susceptibility to injury indicates that the effect of an injury upon one person is not really dependent upon another, even if that other person would not have been injured as seriously.

In this case, we have Mr. Fried, Sergeant Fried, age 37, and was in the Baltimore City Police Department. And his latest injury occurred, I believe in 2015, where he was involved in an investigation that resulted in, I believe, an arrest, but also the execution of a search and seizure warrant on a van. And as the Sergeant was crawling across the seat of the van, he heard a pop in his shoulder.

He ended up with surgery and other treatment that has not been challenged. And he has also endured limitations that are significant.

One of the arguments this Court has heard is that the 2015 injury is related in a sense to the June 2012 injury where [Mr. Fried] injured the same shoulder, the right shoulder. If I remember correctly, that was the result of

[Mr. Fried] being a rear passenger while on duty, and a car began to drive in reverse in the direction of the car he was a passenger in, and he braced himself and injured his shoulder, the right shoulder, significantly.

There was a 2006 injury, which Dr. Hammond was unable to fully address because the 2012 injury may have covered up whatever damage was done.

And there's – none of these medical records were presented to the Court.

This case comes to this Court on a damages only issue. And as in any case, the trier of fact can believe all, part, or none of the testimony of any witness, including an expert.

While this Court accepts most of what Dr. Hammond had to say, it would have been helpful to have the medical records of 2006, 2012, and 2015 in some sense.

Certainly, the records of 2015 – strike that. The records of 2012 could have potentially shed more light on the doctor's testimony for this Court. As [Mr. Fried]'s counsel has argued that that is not fatal to his case, but it would have been helpful.

The 2006 medical records also could have been helpful to the Court. And the 2015 records may have been helpful.

[Garrison] has not challenged the medical records, other than saying the 2015 records are not relevant to this case. [Garrison] has not challenged the lost wages, other than to say that the 2015 wages are not relevant.

The Court is satisfied that the 2012 injury to [Mr.] Fried made him susceptible to re-injury, as occurred in 2015. But that is not the critical question. The critical question has to do with whether [Garrison] is responsible for a subsequent injury versus a previous injury.

Said differently, had the 2015 injury occurred first, and then the 2012 injury, then the Court – strike that. The Court – not the Court, but I think that the case would be significantly different because [] then you would have been talking about a previous injury to [Mr. Fried] versus a subsequent injury. Here, one injury occurred in 2012, and now another in 2015.

And the question becomes should the 2012 culprit be responsible for the 2015 injury. And this Court is persuaded that [Garrison] is correct, that this Court cannot give damages for what occurred in 2015.

The court ruled in favor of Mr. Fried against Garrison, awarding damages for the 2012 injury in the amount of \$22,109.85 for lost wages, \$15,404.66 for medical expenses, and \$100,000 for non-economic damages, i.e., pain and suffering, for a total award of \$137,514.51. Immediately following the court's ruling, Garrison made a Motion for Remittitur based on the stipulated amount of \$123,867.91 already paid to Mr. Fried. The court then ruled that the judgment would be reduced to \$13,646.60, plus court costs.

On October 19, 2016, Mr. Fried filed a Motion to Alter or Amend the Judgment, arguing: (1) that the court's findings of fact regarding causation of the 2015 injury were clearly erroneous; and (2) that the parties agreed that the amount of the judgment should be increased from \$13,646.60 to \$39,246.07, based on an agreed-upon offset. On January 7, 2017, the court denied the motion regarding its causation ruling, but it granted the consent request to amend the judgment.

DISCUSSION

I.

Mr. Fried contends that “[t]he trial court applied an incorrect legal standard in determining that Garrison could not be held responsible for the 2015 [i]njury.” He asserts that the court, in citing the applicable legal standard, “only referenced the law with regard to aggravation of preexisting injuries and susceptibility to injury” that existed at the time of the 2012 accident, “without any discussion of proximate cause with regard to a

subsequent injury, re-injury or aggravation occurring after the [2012 accident].” Mr. Fried asserts that, because the trial court found that the 2012 injury made him more susceptible to future injury, “as a matter of law, the 2012 [i]njury proximately caused the 2015 [i]njury.”

Garrison disputes that the judge’s decision was a legal conclusion, asserting that the “sole issue to be decided by the [c]ourt in this case was a factual one, the resolution of which depended upon the persuasive power of Fried’s evidence.” It contends that the “trial court was not clearly erroneous in finding that the actor who caused the 2012 injury should not be held responsible for the 2015 injury.” Garrison asserts that “there was ample evidence on which the [c]ourt could conclude that the 2015 injury was a wholly independent occurrence not proximately caused by the 2012 injury.”

The standard of appellate review for an action tried without a jury is set forth in Maryland Rule 8-131(c), which provides as follows:

When an action has been tried without a jury, the appellate court will review the case on both the law and the evidence. It will not set aside the judgment of the trial court on the evidence unless clearly erroneous, and will give due regard to the opportunity of the trial court to judge the credibility of the witnesses.

In reviewing the circuit court’s decision, this Court “must consider evidence produced at the trial in a light most favorable to the prevailing party.” *Friedman v. Hannan*, 412 Md. 328, 335 (2010) (quoting *Ryan v. Thurston*, 276 Md. 390, 392 (1975)). “If there is any competent evidence to support the factual findings below, those findings cannot be held to be clearly erroneous.” *Id.* at 335-36 (quoting *Solomon v. Solomon*, 383 Md. 176, 202

(2004)). “As long as the trial court’s findings of fact are not clearly erroneous and the ultimate decision is not arbitrary, we will affirm it, even if we might have reached a different result.” *Malin v. Mininberg*, 153 Md. App. 358, 415 (2003).

The deference given to the trial court’s factual findings, however, does not apply to legal conclusions. *Clancy v. King*, 405 Md. 541, 554 (2008). Instead, we “must determine whether the lower court’s conclusions are legally correct.”” *White v. Pines Cnty. Improvement Ass’n, Inc.*, 403 Md. 13, 31 (2008) (quoting *YIVO Inst. for Jewish Research v. Zaleski*, 386 Md. 654, 662 (2005)).

Although Mr. Fried argues that the court erred in applying the law, the issue presented, whether the 2012 accident was the proximate cause of the 2015 injury, was a factual question. *See Pittway Corp. v. Collins*, 409 Md. 218, 253 (2009) (“It is well established that, ‘unless the facts admit of but one inference . . . the determination of proximate cause . . . is for the jury.’”) (quoting *Caroline v. Reicher*, 269 Md. 125, 133 (1973)); *Palmer v. State*, 223 Md. 341, 352 (1960) (“[T]he question of proximate cause is usually a question of fact for the determination of the jury, or other trier of the facts.”). *Accord Kiriakos v. Phillips*, 448 Md. 440, 470 (2016) (“[P]roximate cause is ordinarily a jury question.”).⁸ And the burden of proof on the issue of proximate cause was on Mr. Fried. *See Rowhouses, Inc. v. Smith*, 446 Md. 611, 631 (2016) (in a negligence action, the

⁸ Mr. Fried argues that, once the court found that the 2012 accident made him susceptible to re-injury, the court had to find, as a matter of law, that the 2015 injury was caused by the 2012 accident. He cites no cases, and we have not found any, to support this proposition.

burden of proving the plaintiff's injury was the proximate cause of the defendant's actions is on the plaintiff).

To be sure, Mr. Fried did present evidence that the 2012 accident was the proximate cause of his 2015 injury. Dr. Hammond testified that, after an injury such as the one Mr. Fried sustained in 2012, a person can be susceptible to shoulder instability problems. He further testified that Mr. Fried was more susceptible to injury, and the 2015 injury was causally related to the 2012 accident.

The circuit court, however, was not persuaded by this evidence. It was not persuaded that Mr. Fried has met his burden of showing that the 2012 accident was a proximate cause of his 2015 injuries.⁹ As this Court has stated, it is difficult to conclude on appellate review that the trial judge was clearly erroneous when the judge was not persuaded, as opposed to being affirmatively persuaded, of a fact.

[I]t is far easier to sustain as not clearly erroneous the decisional phenomenon of not being persuaded than it is to sustain the very different decisional phenomenon of being persuaded. Actually to be persuaded of something requires a requisite degree of certainty on the part of the fact finder (the use of a particular burden of persuasion) based on legally adequate evidentiary support (the satisfaction of a particular burden of production by the proponent). There are with reasonable frequency reversible errors in those regards. Mere non-persuasion, on the other hand, requires nothing but a state of honest doubt. It is virtually, albeit perhaps not totally, impossible to find reversible error in that regard.

⁹ As Garrison notes, there was evidence indicating that the 2015 injury was a new and separate injury. Dr. Hammond testified that Mr. Fried's testimony regarding feeling a "pop" indicated that the 2015 injury was an acute event. And the 2015 surgery involved the repair of the anterior and posterior labrum, with the 2012 repair of the superior labrum appearing intact.

Starke v. Starke, 134 Md. App. 663, 680-81 (2000). *Accord Byers v. State*, 184 Md. App. 499, 531 (2009) (“[I]t is nearly impossible for a verdict to be clearly erroneous or an abuse of discretion or legally in error when it is based not on a fact finder’s being persuaded of something but only the fact finder’s being unpersuaded.”).

The circuit court here was not persuaded that the 2012 accident was the proximate cause of the 2015 injury. The court was not clearly erroneous.

II.

Motion to Alter or Amend the Judgement

Mr. Fried next contends that the court’s decision denying his Motion to Alter or Amend was an abuse of discretion, asserting that “the trial court again relied on and applied an incorrect legal standard with regard to proximate cause.”¹⁰ Garrison disagrees, asserting that “there were ample facts from which the trier of fact could conclude that the causal connection between the 2012 injury and the 2015 injury was so weak as to leave the trier of fact unpersuaded.”

We review a court’s denial of a motion to alter or amend a judgment for an abuse of discretion. *See, e.g., Miller v. Mathias*, 428 Md. 419, 438 (2012); *Mahler v. Johns Hopkins Hosp., Inc.*, 170 Md. App. 293, 321, *cert. denied*, 396 Md. 13 (2006). ““There is an abuse of discretion where no reasonable person would take the view adopted by the [circuit] court, or when the court acts without reference to any guiding rules or principles.””

¹⁰ The court did not give any explanation for its ruling, stating only that the motion was denied “in regards to the causation ruling.”

Bord v. Baltimore Cty., 220 Md. App. 529, 566 (2014) (quoting *In re Adoption/Guardianship No. 3598*, 347 Md. 295, 312 (1997)). The Court of Appeals has recognized, however, “that trial judges do not have discretion to apply inappropriate legal standards, even when making decisions that are regarded as discretionary in nature.” *Wilson-X v. Dep’t of Human Res.*, 403 Md. 667, 675 (2008).

Mr. Fried’s argument here is merely a reiteration of his earlier argument, which we have rejected. Accordingly, we conclude that the court did not abuse its discretion in denying the Motion to Alter or Amend the Judgment regarding its causation ruling.

III.

2006 Injury

Mr. Fried’s final contention is that, “[t]o the extent that the trial court considered the 2006 [i]njury in rendering its decision that Garrison was not responsible for the 2015 [i]njury, such a consideration was clearly erroneous in light of the evidence in the record.” He recognizes that the court did not explicitly articulate a finding that the 2006 injury was the cause of the 2015 injury. The court did, however, mention it during its ruling, and Mr. Fried argues that, to the extent there was an implicit finding “that the 2006 [i]njury somehow caused the 2015 [i]njury, with no medical expert testimony in support thereof,” that would “constitute a factual finding that is not supported by the record and is clearly erroneous.”

Garrison contends that “[t]he trial court did not rely on evidence of a 2006 injury” in rendering its decision. It asserts that Mr. Fried’s argument calls for “this Court

to reverse the trial court's decision based on nothing more than speculation and conjecture.” We agree.

The record reflects that the court did inquire about the relationship of the 2006 injury to the 2012 and 2015 injuries and commented on the lack of medical records for all the injuries. In response to the court’s questions, however, Dr. Hammond testified that he did not think that the 2006 injury had a distinct impact on the 2012 injury because Mr. Fried got significantly better after the 2006 injury and did not require further treatment. Nothing in the court’s decision reflects a finding that the 2006 injury had any bearing on its decision that the 2012 injury was not a proximate cause of the 2015 injury.¹¹ Mr. Fried’s contention in this regard is without merit.

**JUDGMENT OF THE CIRCUIT
COURT FOR BALTIMORE CITY
AFFIRMED. COSTS TO BE PAID
BY APPELLANT.**

¹¹ The court indicated that it was persuaded by Garrison’s argument, which did not include any argument that the 2006 injury caused the 2015 injury.