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6 **IN THE UNITED STATES DISTRICT COURT**  
7 **FOR THE DISTRICT OF ARIZONA**  
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9 Gail Marie LaCrosse,  
10 Plaintiff,

11 v.

12 Commissioner of Social Security  
13 Administration,  
14 Defendant.

No. CV-16-01995-PHX-DLR

**ORDER**

15  
16 Plaintiff Gail Marie LaCrosse applied for Social Security Disability Insurance  
17 benefits in May 2014, alleging that she became disabled as of August 15, 2012 due to  
18 depression, anxiety, chronic fatigue syndrome, and chronic obstructive pulmonary  
19 disease (“COPD”). After state agency denials, LaCrosse appeared for a hearing before an  
20 administrative law judge (“ALJ”). A vocational expert (“VE”) also was present and  
21 testified. Following the hearing, the ALJ issued a written decision finding that LaCrosse  
22 was not disabled within the meaning of the Social Security Act (“SSA”). The ALJ’s  
23 decision became the agency’s final decision after the Social Security Administration  
24 Appeals Council denied LaCrosse’s request for review. LaCrosse now seeks judicial  
25 review of that decision. For the following reasons, the decision of the Commissioner of  
26 Social Security Administration is affirmed.

27 **STANDARD OF REVIEW**

28 It is not the district court’s role to review the ALJ’s decision de novo or otherwise

1 determine whether the claimant is disabled. Rather, the court is limited to reviewing the  
2 ALJ's decision to determine whether it "contains legal error or is not supported by  
3 substantial evidence." *Orn v. Astrue*, 495 F.3d 625, 630 (9th Cir. 2007). Substantial  
4 evidence is more than a scintilla, less than a preponderance, and relevant evidence that a  
5 reasonable person might accept as adequate to support a conclusion considering the  
6 record as a whole. *Id.* As a general rule, "[w]here the evidence is susceptible to more  
7 than one rational interpretation, one of which supports the ALJ's decision, the ALJ's  
8 conclusion must be upheld." *Thomas v. Barnhart*, 278 F.3d 947, 954 (9th Cir. 2002).  
9 The court, however, "must consider the entire record as a whole and may not affirm  
10 simply by isolating a specific quantum of supporting evidence." *Orn*, 495 F.3d at 630  
11 (internal quotations and citation omitted). Nor may the court "affirm the ALJ on a  
12 ground upon which he did not rely." *Id.*

### 13 DISCUSSION

14 To determine whether a claimant is disabled for purposes of the SSA, the ALJ  
15 follows a five-step process. 20 C.F.R. § 404.1520(a). The claimant bears the burden of  
16 proof on the first four steps, but at step five, the burden shifts to the Commissioner.  
17 *Tackett v. Apfel*, 180 F.3d 1094, 1098 (9th Cir. 1999). At the first step, the ALJ  
18 determines whether the claimant is engaging in substantial gainful activity. 20 C.F.R. §  
19 404.1520(a)(4)(i). If so, the claimant is not disabled and the inquiry ends. At step two,  
20 the ALJ determines whether the claimant has a "severe" medically determinable physical  
21 or mental impairment. § 404.1520(a)(4)(ii). If not, the claimant is not disabled and the  
22 inquiry ends. At step three, the ALJ considers whether the claimant's impairment or  
23 combination of impairments meets or medically equals an impairment listed in Appendix  
24 1 to Subpart P of 20 C.F.R. Pt. 404. § 404.1520(a)(4)(iii). If so, the claimant is  
25 automatically found to be disabled. If not, the ALJ proceeds to step four. At step four,  
26 the ALJ assesses the claimant's residual functional capacity ("RFC") and determines  
27 whether the claimant is still capable of performing past relevant work. §  
28 404.1520(a)(4)(iv). If so, the claimant is not disabled and the inquiry ends. If not, the

1 ALJ proceeds to the fifth and final step, where she determines whether the claimant can  
2 perform any other work based on the claimant's RFC, age, education, and work  
3 experience. § 404.1520(a)(4)(v). If so, the claimant is not disabled. If not, the claimant  
4 is disabled.

5 At step one, the ALJ determined that LaCrosse meets the insured status  
6 requirements of the SSA through December 31, 2017, and has not engaged in substantial  
7 gainful activity since her alleged disability onset date. (A.R. 14.) The ALJ found at step  
8 two that LaCrosse's degenerative disc disease is a severe impairment, but concluded at  
9 step three that it does not meet or medically equal the severity of an impairment listed in  
10 Appendix 1 to Subpart P of 20 C.F.R. Pt. 404. (*Id.* at 14-15.) At step four, the ALJ  
11 found that LaCrosse has the RFC to perform:

12 Medium work . . . except the claimant is able to sit for 7-8  
13 hours out of an eight-hour day; and stand and/or walk for 7-8  
14 hours out of an eight-hour day. She is able to lift and/or carry  
15 twenty-five pounds frequently, and fifty pounds occasionally.  
16 Her ability to push and/or pull corresponds to her lifting and  
17 carrying abilities. She can frequently twist, stoop (bend),  
18 crouch/squat, climb ladders or climb stairs, ramps or  
stepstools. She cannot work in a fast-paced production  
environment. She is able to attend and concentrate in two-  
hour blocks of times throughout an eight-hour workday with  
the two customary ten to fifteen minute breaks and the  
customary thirty to sixty minute lunch period.

19 (*Id.* at 16 (footnote omitted).) Based on this RFC, the ALJ found that LaCrosse is  
20 capable of performing past relevant work as an office nurse and as a prison pre-release  
21 coordinator. (*Id.* at 19.) Accordingly, the ALJ found that LaCrosse is not disabled within  
22 the meaning of the SSA. (*Id.* at 20.)

23 On appeal, LaCrosse argues that the ALJ erred at step two by failing to perform  
24 the agency's psychiatric review technique ("PRT") assessment of her mental  
25 impairments, and at step four by relying on jobs that do not meet the definition of past  
26 relevant work. (Doc. 16 at 2.) The Court disagrees.

### 27 **I. Necessity of PRT Analysis**

28 When determining whether a claimant has a medically severe impairment or

1 combination of impairments, agency regulations require the ALJ to follow the PRT. 20  
2 C.F.R. § 404.1520a; *Keyser v. Comm’r of Soc. Sec. Admin.*, 648 F.3d 721, 725 (9th Cir.  
3 2011).

4 Specifically, the reviewer must determine whether an  
5 applicant has a medically determinable mental impairment,  
6 rate the degree of functional limitation for four functional  
7 areas, determine the severity of the mental impairment (in  
8 part based on the degree of functional limitation), and then, if  
the impairment is severe, proceed to step three of the  
disability analysis to determine if the impairment meets or  
equals a specific listed mental disorder.

9 *Keyser*, 648 F.3d at 725 (citations omitted). “An ALJ’s failure to comply with 20 C.F.R.  
10 § 404.1520a is not harmless if the claimant has a ‘colorable claim of mental  
11 impairment.’” *Id.* at 726 (quoting *Gutierrez v. Apfel*, 199 F.3d 1048, 1051 (9th Cir.  
12 2000)). A claim is colorable if it is not “wholly insubstantial, immaterial, or frivolous.”  
13 *Cassim v. Bowen*, 824 F.2d 791, 795 (9th Cir. 1987).

14 As noted, LaCrosse alleged disability due, in part, to depression and anxiety. At  
15 step two, the ALJ thoroughly discussed the medical evidence and concluded that  
16 LaCrosse “does not suffer from a severe mental impairment,” but did not document PRT  
17 findings. (A.R. 15.) The ALJ’s omission is not reversible error, however, because  
18 LaCrosse failed to present a colorable claim of mental impairment. Indeed, agency  
19 regulations state that a medically determinable mental impairment “must result from . . .  
20 psychological abnormalities which can be shown by medically acceptable clinical and  
21 laboratory diagnostic techniques,” and “must be established by medical evidence  
22 consisting of signs, symptoms, and laboratory findings, *not only by [the claimant’s]*  
23 *statement of symptoms.*” 20 C.F.R. § 404.1508 (emphasis added). LaCrosse did not  
24 present such evidence here.

25 To the contrary, LaCrosse testified that she did not seek treatment from a mental  
26 health provider. Instead, she “talk[ed] out things” with her family and saw her “regular  
27 doctor,” Mohammed Zara. (A.R. 34-35.) But neither Dr. Zara nor Dr. Vincent Tapia,  
28 another of LaCrosse’s treating physicians, documented psychological abnormalities other

1 than recording LaCrosse's own statement of her symptoms. LaCrosse's medical records  
2 repeatedly documented normal psychiatric examinations. (*Id.* at 221, 224, 228, 233, 291,  
3 397.) She also denied symptoms of depression during an October 2013 examination by  
4 Dr. Tapa. (*Id.* at 227.)

5 To show that her medically determinable mental impairment claim is colorable,  
6 LaCrosse relies primarily on five sources: (1) Dr. Zara's opinion that LaCrosse suffers  
7 symptoms of severe anxiety, extreme fatigue, and forgetfulness, which affect her  
8 concentration and ability to handle stressful situations (*Id.* at 367, 369); (2) consultative  
9 psychologist Dr. Jonna Krabbenhoft's diagnosis of adjustment disorder and mixed mood  
10 (*Id.* at 357); (3) Dr. Tapia's February 2014 diagnosis of acute reaction to stress (*Id.* at  
11 230); (4) consultative examiner Dr. Jerome Rothbaum's diagnoses of anxiety, depression,  
12 and possible early chronic brain syndrome (*Id.* at 362); and (5) treating physician Dr.  
13 Eleanor Clark's opinion that LaCrosse's chronic fatigue syndrome results in social  
14 interaction difficulties and memory loss, and that LaCrosse cannot handle any stressors,  
15 including those of low stress jobs (*Id.* at 245, 268). This evidence, however, does not  
16 hold up to close inspection.

17 First, as previously noted, Dr. Zara's treatment records consistently reported  
18 normal psychiatric examinations. The lone exception is a treatment record from April  
19 2015, in which Dr. Zara notes LaCrosse's own subjective statement of her anxiety and  
20 stress and also objectively reports that LaCrosse was "extremely nervous and jittery,"  
21 though "[t]hought processes are normal." (*Id.* at 399, 401.)

22 Next, though Dr. Krabbenhoft diagnosed LaCrosse with adjustment disorder with  
23 mixed mood and noted that she appeared tearful and anxious, his report also reflects that  
24 LaCrosse scored 28/30 on a mini-mental state examination, maintained appropriate eye  
25 contact, was oriented, and had normal thought content and intact insight and judgment.  
26 (*Id.* at 354, 356.) Moreover, the social interaction limitations assessed by Dr.  
27 Krabbenhoft are based primarily on LaCrosse's own subjective symptom reports, rather  
28 than objective observations or the results of laboratory findings or other diagnostic

1 techniques. (*Id.* at 358.)

2 The same holds true for Dr. Tapia’s February 2014 diagnosis of acute reaction to  
3 stress. Though his treatment records note that LaCrosse subjectively reported “some  
4 increase and intermittent stress and anxiety,” Dr. Tapia observed that LaCrosse was  
5 “[o]riented to person, place, time and general circumstances. Mood and affect  
6 appropriate. Recent and remote memory grossly intact.” (*Id.* at 230.) Moreover, in the  
7 same treatment record Dr. Tapia reported that LaCrosse “comes in today for followup  
8 (sic) evaluation with a concern regarding stress that she has been under[] for the past  
9 couple years. . . . [LaCrosse] has never brought this issue up to us in the time that this has  
10 occurred and has never followed with psychiatry[.]”<sup>1</sup> (*Id.* at 229.) It is apparent, then,  
11 that Dr. Tapia’s diagnosis is based solely on LaCrosse’s subjective symptom reports.

12 Likewise, though Dr. Rothbaum recorded impressions of anxiety and depression,  
13 his report is devoid of abnormal objective mental status findings. Instead, Dr. Rothbaum  
14 noted LaCrosse’s own statement regarding her symptoms, but objectively observed that  
15 she was “alert, oriented, appropriate, cooperative with adequate recall, adequately  
16 groomed, and in no acute distress.” (*Id.* at 360-61.) Further, Dr. Rothbaum’s medical  
17 source statement regarding LaCrosse’s work-related limitations characterized her chronic  
18 brain syndrome as “questionable.” (*Id.* at 363.)

19 Dr. Clark—who is an OB/GYN, not a mental health provider—conducted no tests  
20 or evaluations of LaCrosse’s psychiatric state. (*Id.* at 246-47.) Though Dr. Clark  
21 identified depression as a symptom of LaCrosse’s chronic fatigue (*Id.* at 266), this  
22 finding appears, again, to be based solely on LaCrosse’s own statements rather than on  
23 objective observations, laboratory findings, or other acceptable diagnostic techniques.

24 Moreover, the ALJ assigned only partial weight to Dr. Krabbenhoft’s opinion  
25 because “there is insufficient medical evidence of record to substantiate [LaCrosse’s]  
26 alleged social limitations, other than [her] self-report. [LaCrosse] has not engaged in

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27 <sup>1</sup> By July 2014, LaCrosse still had not followed up with psychiatry per Dr. Tapia’s  
28 recommendation. (A.R. 270.)

1 mental health treatment and her activities of daily living belie her self-reported  
2 limitations.” (*Id.* at 18.) Likewise, the ALJ assigned reduced weight to Dr. Zara’s  
3 opinion because it “appears to be based, primarily, on [LaCrosse’s] self-report,” Dr.  
4 Zara’s “own treatment records do not contain support for his assessed limitations,” and  
5 “there is little to no evidence that [he] was able to evaluate [LaCrosse’s] alleged anxiety  
6 (if any)[.]” (*Id.*) Lastly, the ALJ gave no weight to Dr. Clark’s opinion in part because it  
7 is “based solely on [LaCrosse’s] self-report[.]” (*Id.*) This Court reviews only those  
8 issues raised by the party challenging the ALJ’s decision, *see Lewis v. Apfel*, 236 F.3d  
9 503, 517 n.13 (9th Cir. 2001), and LaCrosse notably does not challenge the ALJ’s  
10 weighing of the medical opinion evidence.

11 In sum, the record lacks sufficient evidence to support a colorable mental  
12 impairment claim. LaCrosse’s subjective statements regarding her symptoms are not  
13 equivalent to laboratory findings, signs, and symptoms, or the results of clinically  
14 acceptable diagnostic techniques simply because they are recorded by her physicians.  
15 Accordingly, the ALJ was not required to document the PRT analysis and did not err in  
16 concluding that LaCrosse failed to establish a medically determinable mental impairment.  
17 *See Coleman v. Colvin*, 524 F. App’x 325, 326 (9th Cir. 2013) (“[T]he ALJ’s  
18 determination that [claimant] failed to establish a medically determinable mental  
19 impairment is supported by substantial evidence because [claimant] failed to present any  
20 evidence of signs or laboratory findings establishing that [she] suffered from a mental  
21 impairment.”).

## 22 **II. Past Relevant Work**

23 A claimant is not disabled within the meaning of the SSA if she has the RFC to  
24 perform past relevant work, defined by agency regulations as “work . . . done within the  
25 past 15 years, that was substantial gainful activity, and that lasted long enough for [the  
26 claimant] to learn to do it.” 20 C.F.R. § 404.1560(b)(1). In making this determination,  
27 the ALJ may rely on vocational experts and other resources, such as the Dictionary of  
28 Occupational Titles (“DOT”), provided that these sources do not rely on assumptions or

1 definitions that are inconsistent with other agency regulations. *Id.* at (b)(2); SSR-004p,  
2 2000 WL 1898704, at \*3.

3 For each job title, the DOT provides a specific vocational preparation (“SVP”) measurement, defined as “the amount of lapsed time required by a typical worker to learn  
4 the techniques, acquire the information, and develop the facility needed for average  
5 performance in a specific job-worker situation.” DOT, App’x C, 1991 WL 688702.  
6 SVPs range from 1 to 9, with 1 being the shortest duration of training and 9 being the  
7 highest. *Id.* Training may be acquired from any of the following:

- 9 a. Vocational education (high school; commercial or shop  
10 training; technical school; art school; and that part of college  
11 training which is organized around a specific vocational  
12 objective);
- 12 b. Apprenticeship training (for apprenticeable jobs only);
- 13 c. In-plant training (organized classroom study provided by  
14 an employer);
- 14 d. On-the-job training (serving as learner or trainee on the  
15 job under the instruction of a qualified worker);
- 16 e. *Essential experience in other jobs (serving in less  
17 responsible jobs which lead to the higher grade job or  
18 serving in other jobs which qualify).*

18 *Id.* (emphasis added).

19 Prior to her alleged onset of disability, LaCrosse’s prior jobs all were in the  
20 nursing field. Specifically, she worked as a general duty nurse in a hospital from 1998 to  
21 2001, an office clinic nurse for four months from June to October 2001, a staff nurse  
22 coordinator from 2002 to 2011, and a pre-release mental health coordinator for five  
23 months from March to August 2012. (A.R. 46, 196.) All of these jobs have SVPs of 7,  
24 meaning they require anywhere between two and four years of training time. (*Id.* at 46.);  
25 DOT, App’x C; DOT 075.364-010, 1991 WL 646751; DOT 075.374-014, 1991 WL  
26 646753; DOT 195.107-030, 1991 WL 671574. Relying on testimony from the VE, the  
27 ALJ found at step four that, despite her impairments, LaCrosse has the RFC to return to  
28 her past relevant work as an office nurse and a pre-release coordinator. (A.R. 46.)



1 LaCrosse contends that these jobs do not constitute past relevant work because she  
2 held neither for sufficient time to learn it. (Doc. 16 at 12.) “SVP, however, does not  
3 refer to the length of time a job was held, but the approximate length of training time it  
4 takes to learn how to do it. As noted above, essential experience in other jobs may  
5 constitute vocational training.” *Bustamante v. Colvin*, No CV-13-02080-PHX-ESW,  
6 2015 WL 136016, at \*10 (D. Ariz. Jan 9, 2015). At least with respect to the office clinic  
7 nurse position, there is substantial evidence that, through her many years of work in other  
8 nursing jobs, LaCrosse acquired sufficient vocational training such that her briefer stint  
9 as an office clinic nurse may be deemed past relevant work. *See id.* at \*10-11 (affirming  
10 ALJ’s finding that that claimant’s prior nine-month stint as a project manager constituted  
11 past relevant work because he “became a project manager after approximately ten years  
12 of being a construction superintendent,” and therefore his “time working as a  
13 construction superintendent may be considered as vocational training”).

14 LaCrosse argues that the DOT’s definition of SVP as including essential  
15 experience in other jobs is inapplicable for two reasons, neither of which is persuasive.

16 First, she contends that that the “essential experience” provision applies only to  
17 promotional situations. (Doc. 18 at 4-5.) By its own terms, however, the DOT defines  
18 “essential experience” as either “serving in less responsible jobs which lead to the higher  
19 grade job” (i.e., promotions) or “serving in other jobs which qualify.” DOT, App’x C.

20 Second, LaCrosse argues that the DOT’s definition of SVP cannot apply because  
21 it conflicts with the agency’s definition of past relevant work. (Doc. 18 at 5-6.) But  
22 LaCrosse fails to identify a specific agency definition that conflicts with the DOT, and  
23 the Court finds none. Under agency regulations, a prior job qualifies as past relevant  
24 work if it “lasted long enough for [the claimant] to learn to do it.” 20 C.F.R.  
25 404.1560(b)(1). Similarly, the DOT defines SVP as the “the amount of lapsed time  
26 required by a typical worker to learn the techniques, acquire the information, and develop  
27 the facility needed for average performance in a specific job-worker situation.” DOT,  
28 App’x C. Though the DOT provision is wordier, the Court sees no conflict in these

1 definitions.

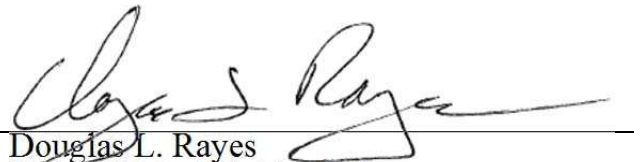
2 LaCrosse nonetheless argues that a conflict exists because agency regulations do  
3 not speak to “essential experience in other jobs.” But agency regulations do not  
4 specifically define how the length of training time is to be calculated. A conflict does not  
5 exist simply because the DOT supplements agency regulations. Stated differently, there  
6 is a meaningful difference between contradicting a specific agency definition and filling  
7 gaps left by the agency’s silence. For these reasons, the Court finds that the ALJ did not  
8 err at step four.

9 **CONCLUSION**

10 For the foregoing reasons, the ALJ’s decision is free of legal error and supported  
11 by substantial evidence.

12 **IT IS ORDERED** that the final agency decision is **AFFIRMED**. The Clerk shall  
13 enter judgment accordingly and terminate this case.

14 Dated this 26th day of September, 2017.

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19 Douglas L. Rayes  
United States District Judge