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**UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA**

DANETTE T. RECIO,)	NO. CV 18-2954-E
)	
Plaintiff,)	
)	
v.)	MEMORANDUM OPINION
)	
NANCY A. BERRYHILL, Acting)	AND ORDER OF REMAND
Commissioner of Social Security,)	
)	
Defendant.)	
)	
)	

Pursuant to sentence four of 42 U.S.C. section 405(g), IT IS
HEREBY ORDERED that Plaintiff's and Defendant's motions for summary
judgment are denied and this matter is remanded for further
administrative action consistent with this Opinion.

PROCEEDINGS

Plaintiff filed a complaint on April 9, 2018, seeking review of
the Commissioner's denial of benefits. The parties filed a consent to
proceed before a United States Magistrate Judge on May 22, 2018.
Plaintiff filed a motion for summary judgment on August 27, 2018.
Defendant filed a motion for summary judgment on September 26, 2018.
The Court has taken both motions under submission without oral

1 argument. See L.R. 7-15; "Order," filed April 17, 2018.

2
3 **BACKGROUND**
4

5 Plaintiff, a former reservation clerk and retail manager, claims
6 disability since January 5, 2014, based on a host of alleged
7 impairments (Administrative Record ("A.R.") 12-760). In evaluating
8 Plaintiff's claim, the Administrative Law Judge ("ALJ") did not have
9 the benefit of opinions from any state agency review physician. The
10 ALJ did not order that any consultative physicians examine Plaintiff.
11 The ALJ also did not retain any medical expert. The ALJ did examine
12 Plaintiff's treatment records, however, and found that Plaintiff
13 suffers from numerous severe impairments: "diabetes mellitus with
14 peripheral neuropathy; cervical spine spondylosis and stenosis; status
15 post cervical discectomy and interbody fusion of C3-C5 in September
16 2015; cervical spine radiculopathy; cubital syndrome left ulnar nerve
17 elbow; cervical myelopathy; left bundle branch block; hypertension;
18 left hip osteopenia; right shoulder tendinosis; rheumatoid arthritis;
19 obesity; fibromyalgia; lumbago with lumbar degenerative changes; and
20 chronic fatigue syndrome" (A.R. 12).

21
22 At the December 7, 2016 hearing before the ALJ, Plaintiff
23 testified to allegedly disabling functional limitations from her
24 severe impairments, including an asserted inability to stand more than
25 "a minute or two" and an asserted inability to walk without a walker
26 (A.R. 36-37). More than two years earlier, on October 7, 2014,
27 Plaintiff had reported greater functionality, including an ability to
28 walk approximately half a mile (A.R. 186).

1 Over the period of alleged disability, Plaintiff's treatment
2 records have been inconsistent and ambiguous regarding her capacity to
3 ambulate. For example, records sometimes indicated an ataxic or
4 abnormal gait and sometimes indicated a normal gait (A.R. 301, 306,
5 435, 436). The very same page of one treatment record indicated both
6 that Plaintiff's gait was ataxic and that Plaintiff's gait was normal
7 (A.R. 436). Records sometimes reflected an alleged need for a walker
8 or even a wheelchair (A.R. 310, 466, 494). Other records (from the
9 same provider who recommended a wheelchair) reflected recommendations
10 that Plaintiff walk up to 30 minutes each day (A.R. 463, 477, 485).
11

12 The ALJ concluded that, despite Plaintiff's constellation of
13 severe impairments, Plaintiff retains the residual functional capacity
14 to perform light work, including the capacity to "stand/walk for about
15 6 hours out of 8" (A.R. 15). Based on this conclusion, the ALJ deemed
16 Plaintiff not disabled (A.R. 18-19). The Appeals Council denied
17 review (A.R. 1-3).
18

19 STANDARD OF REVIEW

20
21 Under 42 U.S.C. section 405(g), this Court reviews the
22 Administration's decision to determine if: (1) the Administration's
23 findings are supported by substantial evidence; and (2) the
24 Administration used correct legal standards. See Carmickle v.
25 Commissioner, 533 F.3d 1155, 1159 (9th Cir. 2008); Hoopai v. Astrue,
26 499 F.3d 1071, 1074 (9th Cir. 2007). Substantial evidence is "such
27 relevant evidence as a reasonable mind might accept as adequate to
28 support a conclusion." Richardson v. Perales, 402 U.S. 389, 401

1 (1971) (citation and quotations omitted); see Widmark v. Barnhart,
2 454 F.3d 1063, 1067 (9th Cir. 2006).

3
4 **DISCUSSION**

5
6 On the present record, substantial evidence does not support the
7 ALJ's conclusion regarding Plaintiff's residual functional capacity.
8 No medical opinion of record addresses Plaintiff's work-related
9 functional capacity. The ALJ could not properly rely on the ALJ's own
10 lay understanding to interpret the medical records and the medical
11 examination results so as to gauge the functional seriousness of
12 Plaintiff's severe impairments. See Tackett v. Apfel, 180 F.3d 1094,
13 1102-03 (9th Cir. 1999); Balsamo v. Chater, 142 F.3d 75, 81 (2d Cir.
14 1998); Rohan v. Chater, 98 F.3d 966, 970 (7th Cir. 1996); Day v.
15 Weinberger, 522 F.2d 1154, 1156 (9th Cir. 1975). Thus, absent expert
16 assistance, the ALJ could not competently translate the medical
17 evidence in this case into a residual functional capacity assessment.
18 See Tackett v. Apfel, 180 F.3d at 1102-03 (ALJ's residual functional
19 capacity assessment cannot stand in the absence of evidentiary
20 support); Rohan v. Chater, 98 F.3d at 970 ("ALJs must not succumb to
21 the temptation to play doctor and make their own independent medical
22 findings"); Ferguson v. Schweiker, 765 F.2d 31, 37 (3d Cir. 1995)
23 (same); Day v. Weinberger, 522 F.2d at 1156 (an ALJ is forbidden from
24 making his or her own medical assessment beyond that demonstrated by
25 the record).

26
27 For example, the ALJ appears to have inferred from Plaintiff's
28 "conservative" treatment that Plaintiff's severe fibromyalgia does not

1 reduce her functionality below the capacity to perform light work
2 (A.R. 17). The ALJ apparently reasoned that, if Plaintiff's
3 fibromyalgia had been so profound as to limit Plaintiff's capacity
4 further, her physicians would have done something other than prescribe
5 medications and physical therapy (A.R. 17). The ALJ lacks the medical
6 expertise to draw this speculative inference. The ALJ is not
7 competent to opine regarding the relationship, if any, between
8 particular fibromyalgia treatments and the particular limiting effects
9 of fibromyalgia symptoms. See, id.; see also Revels v. Berryhill, 874
10 F.3d 648, 662 (9th Cir. 2017) ("In evaluating whether a claimant's
11 residual functional capacity renders them [sic] disabled because of
12 fibromyalgia, the medical evidence must be construed in light of
13 fibromyalgia's unique symptoms and diagnostic methods . . ."); cf.
14 Rudder v. Colvin, 2014 WL 3773565, at *12 (N.D. Ill. July 30, 2014)
15 ("The ALJ may be correct that disabling limitations from multiple
16 sclerosis would result in more frequent treatment or need for
17 medication. However, the ALJ must include evidence to support such a
18 conclusion in his opinion because he is not qualified, on his own, to
19 make such determinations.") (citations and quotations omitted).

20
21 For further example, the record contains scans and x-rays
22 pertaining to Plaintiff's severe orthopedic impairments (A.R. 269-70,
23 335, 361, 390). Inferring functional capacity from the radiologists'
24 readings of these scans and x-rays would also appear to be beyond the
25 medical expertise of the ALJ.

26
27 The ALJ should have more fully and fairly developed the
28 inconsistent and ambiguous record in the present case. See Sims v.

1 Apfel, 530 U.S. 103, 110-11 (2000) ("Social Security proceedings are
2 inquisitorial rather than adversarial. It is the ALJ's duty to
3 investigate the facts and develop the arguments both for and against
4 granting benefits. . . ."); Mayes v. Massanari, 276 F.3d 453, 459-60
5 (9th Cir. 2001) (ALJ's duty to develop the record further is triggered
6 "when there is ambiguous evidence or when the record is inadequate to
7 allow for the proper evaluation of the evidence") (citation omitted);
8 Brown v. Heckler, 713 F.2d 441, 443 (9th Cir. 1983) ("[T]he ALJ has a
9 special duty to fully and fairly develop the record to assure the
10 claimant's interests are considered. This duty exists even when the
11 claimant is represented by counsel."). In particular, the ALJ should
12 have ordered examinations and evaluations of Plaintiff by consultative
13 physicians having the appropriate specialties. See Reed v. Massanari,
14 270 F.3d 838, 843 (9th Cir. 2001) (where available medical evidence is
15 insufficient to determine the severity of the claimant's impairment,
16 the ALJ should order a consultative examination by a specialist);
17 accord Kish v. Colvin, 552 Fed. App'x 650, 651 (9th Cir. 2014).

18
19 The Court is unable to deem the errors in the present case to
20 have been harmless. See Molina v. Astrue, 674 F.3d 1104, 1115 (9th
21 Cir. 2012) (an error "is harmless where it is inconsequential to the
22 ultimate non-disability determination") (citations and quotations
23 omitted); McLeod v. Astrue, 640 F.3d 881, 887 (9th Cir. 2011) (error
24 not harmless where "the reviewing court can determine from the
25 'circumstances of the case' that further administrative review is
26 needed to determine whether there was prejudice from the error").

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1 Remand is appropriate because the circumstances of this case
2 suggest that an expansion of the record and further administrative
3 review could remedy the error discussed herein. McLeod v. Astrue, 640
4 F.3d at 888; see also INS v. Ventura, 537 U.S. 12, 16 (2002) (upon
5 reversal of an administrative determination, the proper course is
6 remand for additional agency investigation or explanation, except in
7 rare circumstances); Leon v. Berryhill, 880 F.3d 1041, 1044 (9th Cir.
8 2018) (“an automatic award of benefits in a disability benefits case
9 is a rare and prophylactic exception to the well-established ordinary
10 remand rule”); Dominquez v. Colvin, 808 F.3d 403, 407 (9th Cir. 2015)
11 (“Unless the district court concludes that further administrative
12 proceedings would serve no useful purpose, it may not remand with a
13 direction to provide benefits”); Treichler v. Commissioner, 775 F.3d
14 at 1101 n.5 (remand for further administrative proceedings is the
15 proper remedy “in all but the rarest cases”); Harman v. Apfel, 211
16 F.3d 1172, 1180-81 (9th Cir.), cert. denied, 531 U.S. 1038 (2000)
17 (remand for further proceedings rather than for the immediate payment
18 of benefits is appropriate where there are “sufficient unanswered
19 questions in the record”). There remain significant unanswered
20 questions in the present record relating to Plaintiff’s residual
21 functional capacity.

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