

Phrasing Hypothetical Questions to Vocational Experts Training Guide

Manipulative Limitations

Mental Impairment Limitations

SSR 00-4p



Hypothetical Question to VEs

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INTRODUCTION

This workbook contains much of the information in the broadcast you are viewing on Phrasing Hypothetical Questions to Vocational Experts (VEs). We included biographies of our faculty, answers to the questions posed during the broadcast, and forms used in the disability adjudicatory process in the Appendix as reference materials.

The use of a Vocational Expert (VE) at steps 4 and 5 of the sequential evaluation may be necessary to determine whether the claimant can perform any past relevant work or whether other work exists in the national economy that the claimant can perform.

At step 5, we know that use of a VE may be appropriate when a claimant has only exertional limitations and the residual functional capacity (RFC) falls between ranges of exertional levels, i.e., stand/walk four hours a day which is more than sedentary but less than a full range of light, and the appropriate GRID tables would direct different conclusions. VE input may also be appropriate if a claimant has a combination of exertional and nonexertional limitations. Another situation when it would be appropriate to use a VE is if a claimant has solely nonexertional limitations, such as individuals with mental impairments. Part of the process of determining whether an individual can perform past relevant work or other work in the national economy involves posing a hypothetical question or a series of hypothetical questions to the VE.

MANIPULATIVE LIMITATIONS

Many impairments that are frequently seen in our cases result in limitations on the use of the hands and arms. The problem in determining these limitations is often with terminology and the failure to use terms that everyone understands. Phrases like ... no more than “occasional repetitive handling” seem inconsistent and confusing if the terms aren’t understood.

1. Is this an appropriate question to the VE? Assume that the individual has a rotator cuff injury. The Administrative Law Judge asks the VE to assume the claimant has a limited ability to use his arms for handling.

To pose clear and accurate hypothetical questions involving manipulative limitations to the VE, **defining** and **quantifying** those limitations would be helpful.

SSR 85-15 provides definitions of terms used to describe use of the upper extremities in work related activities. **Reaching** is defined as extending the hands and arms in any direction. **Handling** is defined as seizing, holding, grasping, turning or otherwise working primarily with the whole hand or hands. **Fingering** involves picking, pinching, or otherwise working primarily with the fingers. **Feeling** is defined as the use of the fingertips to feel the size shape, temperature, or texture of an object.

SSR 83-10 provides us with the definitions of the frequency of certain activities and these definitions are taken from the DOT. **Occasionally** is defined as occurring from very little up to one-third of the time, or approximately 2 hours in an 8 hour work day. **Frequent** is defined as occurring from one-third to two thirds of the time or approximately 6 hours in an 8 hour work day. Other terms that are used in the DOT but not specifically addressed in the regulations or rulings include **Constant** and **Never**.

2. Is this an appropriate hypothetical question? The Administrative Law Judge asks the VE to assume that because of diabetic neuropathy the claimant cannot perform work involving fine manipulation with the fingers.

Some of the problem areas with manipulative impairments are: Limitations on “fine manipulation” and limitations of repetitive use of the fingers or hands. Use of established terms that quantify the limitation, such as **occasionally** or frequently, may be helpful in avoiding these problem areas.

**MENTAL IMPAIRMENTS AND HYPOTHETICAL QUESTIONS
TO VES**

The RFC portion of the hypothetical question posted to the vocational expert **must** be identical to the RFC finding in the decision. By writing out your RFC posed to the vocational expert, you can ensure that the decision contains the proper language. Some judges draft hypothetical questions before the hearing and make changes where necessary. Remember if a judge finds a “severe” mental impairment, the RFC portion of the VE hypothetical and the findings must include at least one mental limitation.

3. Assume that an individual has major depressive disorder. The claimant reports that he cannot tolerate stress. The ALJ instructs the vocational expert to assume an individual is “limited to low stress work.” Is this a good hypothetical?

The major problem in this phrasing of the stress limitation is the failure to state the limitation in terms of specific, work-related functional abilities.

The judge needs to determine and state in functional terms the actual limitations of ability to perform work-related activities imposed by the claimant’s mental impairment(s). The judge may do this in several ways. The judge may ask the claimant to identify the situations he or she finds stressful and the results of being exposed to such situations. If the claimant reports any such situations, the judge must of course determine if the record supports the specific limitations. The documentary evidence may also clearly outline the functional limitations imposed by the claimant’s mental impairments. The judge should also carefully elicit testimony and consider the information about the claimant’s daily activities.

Some examples of situations that have been found to be stressful include the following:

- working with co-workers;
- working with the public other than co-workers;
- working with supervisors or co-workers if interpersonal interaction or discussion is required;
- working at a production rate pace;
- working at unprotected heights;
- driving tractor-trailers that transport flammable liquids;

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- making decisions; and
- using judgment.

If the claimant testified that he or she cannot work with the general public other than co-workers because such activity would be too stressful, and the record supports such functional limitation, the hypothetical question posed to the VE should reflect this specific limitation rather than a general restriction to low stress work. A proper hypothetical would be:

Dr. VE, I want you to assume an individual has the same age, education, and work experience as the claimant. Further assume that this individual has no physical impairments or physical limitations, but has a severe mental impairment, depression. As a result, the individual is limited to occupations that do not require working in contact with the public other than co-workers. Are there any occupations such an individual could perform?

4. This is the best way to describe the limitation in a hypothetical? (True or False).

Let's consider another example. Assume that an individual has major depressive disorder. The DDS found that this mental impairment caused a moderate limitation of the individual's ability to maintain concentration, persistence, or pace, but no restriction of activities of daily living or maintenance of social functioning. The ALJ arrives at the same conclusions as the DDS and instructs the vocational expert to assume an individual has a "moderate limitation in ability to maintain concentration, persistence, or pace."

5. Is this best way to describe the limitation in a hypothetical? (Yes or No)

The use of the term "moderate" is problematic because the definition used in the regulations is too broad. Several examples of proper phrasing of a limitation on the capacity to concentrate include the following:

- unable to perform any work activities on average for 2 minutes at a time, once per hour;
- unable to work in close proximity to others because the claimant is too easily distracted; and
- must be reminded of tasks 10 times each day on average by supervisor

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We still must be sure the limitations imposed by symptoms are clearly defined in the VE hypothetical and RFC finding, even though they may difficult to state in specific, work-related terms. Some of the descriptors frequently seen that are often problematic include the following:

- Moderate
- Fair
- Low
- Often
- Mild
- Excessive
- Repetitive
- Reasonable
- Unreasonable

Here's another example: Assume that an individual has major depressive disorder. The DDS found that this mental impairment caused a moderate limitation of the individual's ability to maintain concentration, persistence, or pace for the "B" Criteria of the Listings as outlined on the Psychiatric Review Technique Form. The DDS also found that the claimant's mental impairment caused no restriction of activities of daily living or maintenance of social functioning. The claimant also reports concentration difficulties. The ALJ arrives at the same conclusions as the DDS and instructs the vocational expert to assume an individual has a "moderate limitation in ability to maintain concentration, persistence, or pace."

6. This is the best way to describe the limitation in a hypothetical? Keypad Question: Is this good phrasing for a hypothetical? (True or False)

Mental RFC Assessment Form used by the DDS: Form SSA-4734-F4-SUP

Remember that the first two pages are summary conclusions and that the third page of this form is the RFC determination of the DDS. The introduction on the first page of the

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form describes these summary conclusions as follows. You may wish to follow along in the Appendix of your workbook.

“This section is for recording summary conclusions derived from the evidence in file. Each mental activity is to be evaluated within the context of the individual’s capacity to sustain that activity over a normal workday and workweek, on an ongoing basis. Detailed explanation of the degree of limitation in each category, as well as any other assessment information you deem appropriate, is to be recorded in Section III (Functional Capacity Assessment).”

Let’s look at a specific example. Look at item number 11 on page 2 of the form: “The ability to complete a normal work day and workweek without interruptions from psychologically based symptoms and to perform at a consistent pace without an unreasonable number and length of rest periods.” It would appear on its face that such claimant should have been found disabled if the DDS found the claimant’s capacity in this area is “moderately limited.” But when the DDS states the claimant has moderate difficulty with this activity, the DDS usually means the claimant has significant difficulty in performing certain types of occupations or certain specific work activities. For example, and only as an example, the DDS may conclude the claimant is unable to work with the general public other than co-workers. If the form is properly completed, the actual limitations should be outlined on page 3 of the form, although sometimes there is not as much detail as we might like to see. If the “moderate” block were checked for this entry, how would you determine the actual limitation or capacity associated with this factor?

Mental MSS Form used by Hearing Offices (Form HA-1152)

Once again, it is essential to understand the entries on this form, like the first two pages of the Mental RFC Assessment Form used by the DDS, are medical conclusions, not statements of functional abilities. A “moderate” capacity to “understand and remember short, simple instructions” means different things to different people. As we stated previously, the actual capacity in this area must be stated in terms of specific, work-related functional abilities.

The claimant’s actual functional limitation or capacity in this area must be clearly stated so everyone who considers the hypothetical, such as the VE, the claimant, claimant’s representative, the Administrative Appeals Judge, United States District Judge, and so on, has the same understanding.

“B” Criteria from the PRTF (SSA-2506)

The “B” criteria on the PRTF are gross measures of impairment severity; they are not stated in terms of specific, work-related functional abilities that are sufficient to make a decision at step 4 or 5. Attempts by claimants’ representatives to ask the VE questions may include an inadequate RFC.

Advise the representative that the DDS Mental RFC Assessment Form includes summary conclusions about functioning, not vocationally relevant functional capacities.

SSR 96-8p reminds us that, by regulation, “...the limitations in the paragraph B and paragraph C criteria are not an RFC assessment but are used to rate the severity of mental impairments at steps 2 and 3 of the sequential evaluation process. The mental RFC assessment used at steps 4 and 5 of the sequential evaluation process requires a more detailed assessment by itemizing various functions contained in the broad categories found in paragraphs B and C....”

It is up to the judge and counsel to phrase VE hypotheticals in terms of specific, work-related functional abilities.

ISSUES CONCERNING SOCIAL SECURITY RULING 00-4P

Social Security Ruling 00-4p is a policy interpretation ruling regarding the use of vocational expert and vocational specialist evidence and other reliable occupational information in disability decisions that became effective on December 4, 2000.

SSA issued SSR 00-4p to clarify our standards on identifying and resolving conflicts or apparent conflicts between evidence provided by a vocational expert and the information published by the Department of Labor in the Dictionary of Occupational Titles, or DOT. This also includes its companion publication, the Selected Characteristics of Occupations Defined in the Revised Dictionary of Occupational Titles, or SCO.

In SSR 00-4p, SSA explained that although we rely primarily on the DOT and SCO for information about the requirements of work in the national economy at steps 4 and 5, we may use VE testimony to resolve complex issues. This policy was affirmed in the recent amendments to 20 CFR 404.1560 and 416.960 of the regulations that were effective September 25, 2003. The SSR states that occupational evidence provided by the VE should generally be consistent with occupational information in the DOT. When a conflict or apparent conflict between the VE evidence and the DOT is identified, the ALJ must obtain a reasonable explanation for the conflict before relying on the VE evidence to support a decision about whether the claimant is disabled.

SSR 00-4p states the Commissioner's policy that an ALJ has an affirmative duty to ask the VE on the record whether his or her testimony conflicts with the information in the DOT. SSR 00-4p states that "When a VE or VS provides evidence about the requirements of a job or occupation, the adjudicator has an affirmative responsibility to ask about any possible conflict between the VE or VS evidence and the information provided in the DOT."

If a conflict is identified, then the ALJ must obtain a reasonable explanation for the conflict and explain the resolution of the conflict in the written decision. Here is a question that was raised during the broadcast.

Let's assume that:

- The ALJ poses a hypothetical question involving a younger individual, with a high school education and unskilled past work experience.
- The individual can perform the full range of sedentary work activity as defined in the regulations with the exception that she must be allowed the opportunity every

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hour to get up and stand or walk for approximately 5 minutes in her work area (sit/stand option).

- The VE replies that such an individual can perform numerous occupations and provides the following examples: addresser (DOT code 209.587-010) and dowel inspector (DOT code 669.687-014). He also provides the number of these jobs in the national economy.
- The ALJ asks the VE if there are any conflicts between his testimony and the DOT.
- The VE says that these jobs are described in the DOT as sedentary. However, he says the DOT does not include information about an option for changing positions, or a sit/stand option.
- The VE also says that in his experience placing employees in these jobs and performing job surveys, about one-half of employers allow the job to be performed with this limitation.
- The VE also states that he already reduced the numbers by 50 percent in providing his earlier answer.
- The ALJ finds the claimant not disabled at Step 5, relying on jobs named by the VE, and using the medical-vocational guidelines, or Grids, as a framework for decision making.
- The hearing decision summarizes the VE testimony and provides rationale for how the conflict was resolved.
- In filing a request for review with the Appeals Council, the claimant's representative argues that the ALJ should not have relied on the VE evidence because it conflicts with the DOT which lists the jobs as requiring sedentary exertion.

7. True or False, the Appeals Council will agree with the representative on this issue?

SSR 00-4p makes it clear that the ALJ cannot rely on evidence provided by the VE if that evidence is based on underlying assumptions or definitions that are inconsistent with SSA's regulatory policies or definitions. Examples of this include the VE using a different definition for exertional levels; for skill levels; or for transferability of skills.

Here is a multiple choice question from the broadcast. Specific vocational preparation (SVP) is defined in the DOT as the amount of lapsed time required by a typical worker

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to learn the techniques, acquire the information, and develop the facility needed for average performance in a specific job-worker situation. SVP levels range from 1 to 9, with 1 being the shortest period of time. Look at the following SVP levels and the time involved with learning the average job:

- SVP level 1 is a short demonstration only
- SVP level 2 is anything beyond short demonstration up to and including 1 month
- SVP level 3 is over 1 month up to and including 3 months
- SVP level 4 is over 3 months up to and including 6 months.

8. Which of the above is consistent with SSA's definition of "unskilled" work?

- A. SVP level of 1 only,
- B. SVP levels of 1 and 2,
- C. SVP levels 1 through 3, or
- D. All of the SVP levels shown.

Here is a situation involving SSR 00-4p that appears at the Appeals Council frequently. What if in response to an ALJ's question about possible conflicts with the DOT the VE testifies that there are no conflicts? But based on the ALJ's own experience with evidence provided by VEs in other cases or the ALJ's own experience using the DOT, the ALJ suspects that there may be a conflict. Should the ALJ rely on the VE's answer about conflicts without further inquiry? To illustrate, let's look at a true/false question.

Let's assume for purposes of this question that:

- The ALJ poses a hypothetical question involving a younger individual, with a high school education and unskilled past work experience.
- The individual can perform the full range of sedentary work activity as defined in the regulations except that the claimant has bilateral upper extremity limitations and can only occasionally reach and occasionally handle objects.
- The VE replies that such an individual can perform numerous occupations and provides the following examples: addresser and dowel inspector. He also provides the number of these jobs in the national economy.
- In response to the ALJ's question as to whether there are any conflicts between his testimony and the information shown in the DOT, the VE replies "No."

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- The ALJ strongly suspects that the testimony may not be accurate. He seems to remember that other VEs have testified that these jobs require using the hands and arms most of the day. But presented with the VE testimony, neither he nor the claimant's representative questions the VE further regarding conflicts.
- The ALJ finds the claimant not disabled at Step 5, relying on jobs named by the VE, and using the Grids as a framework for decision making.
- In filing a request for review with the Appeals Council, the claimant's representative argues that the VE evidence conflicts with the DOT, which shows that both jobs require frequent reaching and handling.

9. True or false, the Appeals Council will agree with the representative on this issue?

The best way to avoid a remand is to be alert to possible conflicts even when the VE says the testimony is consistent. If an ALJ suspects that there is a conflict, even if the VE says there is not, then the ALJ should attempt to resolve the issue at the hearing. Of course an ALJ may decide to check the DOT and SCO after the hearing and discover at that point that there is an apparent conflict. In that situation, the ALJ should consider issuing interrogatories or holding a supplemental hearing to obtain a reasonable explanation for the apparent conflict.

Here is a recap as to what Social Security Ruling 00-4p requires.

The SSR places an affirmative duty on the ALJ to inquire about the consistency of VE evidence and occupational information in the DOT, including its companion publication the SCO.

- The ALJ must ask the VE, on the record, if the evidence he or she has provided conflicts with the DOT. **Reminder:** Always ask the question -even if you don't think there are any conflicts.
- If following this questioning of the VE, the VE evidence appears to conflict with the DOT, the ALJ must obtain a reasonable explanation for the apparent conflict. **Reminder:** Ask the VE the basis for the information he or she has provided that conflicts with the DOT. Also, remain alert to situations when the VE does not recognize the conflict but you know from your own experience with prior VE testimony or using the DOT, that a conflict is likely.
- The ALJ must resolve such conflicts before relying on VE evidence to support a decision of disabled or not disabled. **Reminder:** Determine whether the VE's explanation is reasonable.

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- Finally, the ALJ must explain the resolution of the conflict in the decision.
Reminder: Put it all in writing!

Remember also that the ALJ may not rely on VE evidence that is inconsistent with SSA's regulatory policies or definitions.

APPENDIX: FACULTY BIOGRAPHIES

Frank Cristaudo

Under the executive leadership of the Deputy Commissioner of Office of Disability and Adjudication and Review, as Chief Administrative Law Judge, Judge Cristaudo is responsible for the administration of the national hearing operations of the Social Security Administration. With almost 1,100 federal Administrative Law Judges and more than 5,000 support staff in the Office of the Chief Administrative Law Judge, 10 regional offices, and over 140 hearing offices throughout the country, Social Security's hearing operation is one of the largest administrative judicial systems in the world.

Prior to his appointment as Chief Administrative Law Judge in 2006, Judge Cristaudo served as the Acting Deputy Chief Administrative Law Judge, Regional Chief Administrative Law Judge for the Philadelphia Region, Hearing Office Chief Administrative Law Judge in the Voorhees, New Jersey, Hearing Office, and as an Administrative Law Judge in the Voorhees and Savannah, Georgia, Hearing Offices.

He lectures and writes frequently on Social Security, leadership, and management topics, and is the author of "**The Vocational Expert Manual: The Use, Questioning, and Testimony of Vocational Experts**", and "**27 Practices for Effective Leadership in Public Service**".

Prior to his appointment as an Administrative Law Judge in 1990, he started his own general law practice and practiced law for twelve years with a specialty in Social Security Law. He also served as a Municipal Court Judge, Township Attorney, and instructor at LaSalle University and Rowan University. While engaged in the private practice of law, he argued a number of Social Security cases before the Court of Appeals for the Third Circuit, including **Wallace v. Sec. HHS**, 722 F.2d 1150 (3rd Cir. 1983), and **Woody v. Sec. HHS**, 859 F.2d 1156 (3rd Cir. 1988).

Before entering the practice of law, he was employed by the Social Security Administration at headquarters in Woodlawn, Maryland, as a Social Insurance Claims Examiner (Disability); Computer Specialist (Systems); and Methods and Procedures Analyst (Medicare). Judge Cristaudo has a B.A. from McDaniel College and a J.D. (cum laude) from Widener University School of Law.

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Dianne Egan Bobowski

Dianne Egan Bobowski was appointed an Administrative Appeals Judge in 1996. Judge Bobowski received her Bachelor of Arts degree from the University of New Orleans, a degree of Juris Doctor from George Mason University School of Law, and is a member of the Virginia State Bar. She started her career with SSA as a claims representative in the New Orleans, LA District Office in 1976. In 1983 she moved to Virginia to work for the Office of Hearings and Appeals, where she has worked as an analyst, attorney advisor, and policy staff director before her appointment to the Appeals Council.

Judge Bobowski is the founding chairperson of ODAR's Hispanic Affairs Advisory Council (HAAC) and a member of the Limited English Proficient (LEP) Agency workgroup. She also is a member of the Agency's Disability Training and Steering Committee.

Mary Kunz

Mary Kunz was appointed as an Administrative Law Judge in 2001. Judge Kunz received her Bachelor of Arts Degree from the University of Minnesota and Juris Doctor degree from William Mitchell College of Law in St. Paul Minnesota. She also received a Masters degree from St. Cloud State University.

In addition to being an attorney for ODAR, she also worked as an Appeals Officer for the Appeals Council. She also was the Regional Attorney in the Philadelphia Region prior to her selection as an administrative law judge. She has served as one of the primary trainers for new decision writers for many years and is known nationwide for her technical expertise in the area of Social Security disability law.

APPENDIX: ANSWERS TO QUESTIONS

1. Is this an appropriate question to the VE?

The answer is no. As we have seen with mental impairments, the term “limited” doesn’t quantify the degree of limitation.

2. Is this an appropriate hypothetical question?

The answer is No. As we will see, the term “fine manipulation” is not defined in the regulations, rulings, or the DOT. As a result, it is not clear what is meant by the use of that term.

3. Is this a good hypothetical?

No, the major problem in this phrasing of the stress limitation is the failure to state the limitation in terms of specific, work-related functional abilities. A restriction to low stress work is problematic as it does not state in terms of specific, work-related functional abilities what it is the claimant can or cannot do.

4. This is the best way to describe the limitation in a hypothetical? (True or False).
The answer is false. The use of the term “moderate” is problematic because the definition used in the regulations is too broad.

5. Is this best way to describe the limitation in a hypothetical? (Yes or No)

6. This is the best way to describe the limitation in a hypothetical? Is this good phrasing for a hypothetical? (True or False) The answer is basically true, but with an explanation. Some of you may wonder why I think that “occasional” is OK when terms such as “moderate” and “often” are not. The reason is that the word “occasional” is a term that’s defined in the Dictionary of Occupational Titles—the DOT—and related publications, and in our rulings.

7. True or False, the Appeals Council will agree with the representative on this issue?
The answer is FALSE. The Council will not agree with the claimant’s representative because the ALJ is allowed to rely on the VE’s testimony since the VE provided a reasonable explanation and the ALJ explained the resolution of the apparent conflict in the decision.

8. Which of the above is consistent with SSA’s definition of “unskilled” work?

- A. SVP level of 1 only,
B. SVP levels of 1 and 2,

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- C. SVP levels 1 through 3, or
- D. All of the SVP levels shown.

The answer is B. As explained in SSR 00-4p, using the skill level definitions in 20 CFR 404.1568 and 416.968, unskilled work corresponds to SVP levels 1 and 2.

9. True or false, the Appeals Council will agree with the representative on this issue?

The answer is TRUE. Judge Bobowski would agree with the representative. Despite the VE's testimony that there were no conflicts between the evidence he provided and the information shown in the DOT, there is an apparent conflict. The claimant's limitations in reaching and handling do not match the SCO's information on these nonexertional factors. Although SSR 00-4p does not require an ALJ to ensure the accuracy of VE testimony, the unidentified conflict and the incorrect VE testimony raise questions about the reliability of the VE evidence and whether the ALJ's decision is supported by substantial evidence.

APPENDIX: AGENCY FORMS

This section of the Appendix contains copies of the two forms referenced during Judge Cristaudo's presentation.

- Mental RFC Assessment Form used by the DDS: Form SSA-4734-F4-SUP SA-4734
- ODAR Mental Medical Source Statement HA-1152
- Psychiatric Review Technique Form (PRTF) Form SSA-2506

PHRASING HYPOTHETICAL QUESTIONS TO YES

MENTAL RESIDUAL FUNCTIONAL CAPACITY ASSESSMENT

NAME		SOCIAL SECURITY NUMBER	
CATEGORIES (From IB of the PRTF)		ASSESSMENT IS FOR:	
		<input type="checkbox"/> Current Evaluation <input type="checkbox"/> 12 Months After Onset: _____ (Date)	
		<input type="checkbox"/> Date Last Insured: _____ (Date)	
		<input type="checkbox"/> Other: _____ (Date) to _____ (Date)	

I. SUMMARY CONCLUSIONS

This section is for recording summary conclusions derived from the evidence in file. Each mental activity is to be evaluated within the context of the individual's capacity to sustain that activity over a normal workday and workweek, on an ongoing basis. Detailed explanation of the degree of limitation for each category (A through D), as well as any other assessment information you deem appropriate, is to be recorded in Section III (Functional Capacity Assessment).

If rating category 5 is checked for any of the following items, you **MUST** specify in Section II the evidence that is needed to make the assessment. If you conclude that the record is so inadequately documented that no accurate functional capacity assessment can be made, indicate in Section II what development is necessary, but **DO NOT COMPLETE SECTION III.**

	Not Significantly Limited	Moderately Limited	Markedly Limited	No Evidence of Limitation in this Category	Not Ratable on Available Evidence
A. UNDERSTANDING AND MEMORY					
1. The ability to remember locations and work-like procedures.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
2. The ability to understand and remember very short and simple instructions.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
3. The ability to understand and remember detailed instructions.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
B. SUSTAINED CONCENTRATION AND PERSISTENCE					
4. The ability to carry out very short and simple instructions.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
5. The ability to carry out detailed instructions.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
6. The ability to maintain attention and concentration for extended periods.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
7. The ability to perform activities within a schedule, maintain regular attendance, and be punctual within customary tolerances.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
8. The ability to sustain an ordinary routine without special supervision.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
9. The ability to work in coordination with or proximity to others without being distracted by them.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
10. The ability to make simple work-related decisions.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>

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	Not Significantly Limited	Moderately Limited	Markedly Limited	No Evidence of Limitation in this Category	Not Ratable on Available Evidence
Continued— <u>SUSTAINED CONCENTRATION AND PERSISTENCE</u>					
11. The ability to complete a normal workday and workweek without interruptions from psychologically based symptoms and to perform at a consistent pace without an unreasonable number and length of rest periods.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
C. <u>SOCIAL INTERACTION</u>					
12. The ability to interact appropriately with the general public.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
13. The ability to ask simple questions or request assistance.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
14. The ability to accept instructions and respond appropriately to criticism from supervisors.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
15. The ability to get along with coworkers or peers without distracting them or exhibiting behavioral extremes.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
16. The ability to maintain socially appropriate behavior and to adhere to basic standards of neatness and cleanliness.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
D. <u>ADAPTATION</u>					
17. The ability to respond appropriately to changes in the work setting.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
18. The ability to be aware of normal hazards and take appropriate precautions.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
19. The ability to travel in unfamiliar places or use public transportation.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
20. The ability to set realistic goals or make plans independently of others.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
II. <u>REMARKS:</u> If you checked box 5 for any of the preceding items or if any other documentation deficiencies were identified, you MUST specify what additional documentation is needed. Cite the item number(s), as well as any other specific deficiency, and indicate the development to be undertaken.					
					<input type="checkbox"/> Continued on Page 3
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PHRASING HYPOTHETICAL QUESTIONS TO YES

Continued on Page 4

III. FUNCTIONAL CAPACITY ASSESSMENT

Record in this section the elaborations on the preceding capacities. Complete this section **ONLY** after the **SUMMARY CONCLUSIONS** section has been completed. Explain your summary conclusions in narrative form. Include any information which clarifies limitation or function. Be especially careful to explain conclusions that differ from those of treating medical sources or from the individual's allegations.

Continued on Page 4

MEDICAL CONSULTANT'S SIGNATURE

DATE

PHRASING HYPOTHETICAL QUESTIONS TO YES

MEDICAL SOURCE STATEMENT OF ABILITY TO DO WORK-RELATED ACTIVITIES (MENTAL)

NAME OF INDIVIDUAL

SOCIAL SECURITY NUMBER

Please assist us in determining this individual's ability to do work-related activities on a sustained basis. "Sustained basis" means the ability to perform work-related activities eight hours a day for five days a week, or an equivalent work schedule. (SSR 96-8p). Please give us your professional opinion of what the individual can still do despite his/her impairment(s). The opinion should be based on your findings with respect to medical history, clinical and laboratory findings, diagnosis, prescribed treatment and response, and prognosis.

For each activity shown below:

(1) Respond to the questions about the individual's ability to perform the activity. When doing so, use the following definitions for the rating terms:

- None --Absent or minimal limitations. If limitations are present they are transient and/or expectable reactions to psychological stresses.
- Slight --There is some mild limitations in this area, but the individual can generally function well.
- Moderate--There is moderate limitation in this area but the individual is still able to function satisfactorily.
- Marked --There is serious limitation in this area. The ability to function is severely limited but not precluded.
- Extreme --There is major limitation in this area. There is no useful ability to function in this area.

(2) Identify the factors (e.g., the particular medical signs, laboratory findings, or other factors described above) that support your assessment.

IT IS VERY IMPORTANT TO DESCRIBE THE FACTORS THAT SUPPORT YOUR ASSESSMENT.

WE ARE REQUIRED TO CONSIDER THE EXTENT TO WHICH YOUR ASSESSMENT IS SUPPORTED.

(1) Is ability to understand, remember, and carry out instructions affected by the impairment? No Yes
If "no," go to question #2. If "yes," please check the appropriate block to describe the individual's restriction for the following work-related mental activities.

	<u>None</u>	<u>Slight</u>	<u>Moderate</u>	<u>Marked</u>	<u>Extreme</u>
Understand and remember short, simple instructions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carry out short, simple instructions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understand and remember detailed instructions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carry out detailed instructions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The ability to make judgements on simple work-related decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What medical/clinical finding(s) support this assessment?

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PHRASING HYPOTHETICAL QUESTIONS TO YES

(2) Is ability to respond appropriately to supervision, co-workers, and work pressures in a work setting affected by the impairment? No Yes

If "no," go to question #3. If "yes," please check the appropriate block to describe the individual's restriction for the following work-related mental activities.

	<u>None</u>	<u>Slight</u>	<u>Moderate</u>	<u>Marked</u>	<u>Extreme</u>
Interact appropriately with the public.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interact appropriately with supervisor(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interact appropriately with co-workers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respond appropriately to work pressures in a usual work setting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respond appropriately to changes in a routine work setting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What supports this assessment?

(3) Are any other capabilities affected by the impairment? No Yes

If "yes," please identify the capability and describe how it is affected.

Capability	Effect
_____	_____
_____	_____
_____	_____

What medical/clinical findings support this assessment?

(4) If the claimant's impairment(s) include alcohol and/or substance abuse, do these impairments contribute to any of the claimant's limitations as set forth above? If so, please list the specific limitations caused.

(5) If you have concluded that the medical record indicates that the claimant's alcohol and/or substance use/abuse contributes to any limitations as set forth above, please identify and explain what changes you would make to your answers if the claimant was totally abstinent from alcohol and/or substance use/abuse.

(6) Can the individual manage benefits in his/her own best interest? No Yes

 Physician's/Psychologist's Signature Medical Specialty Date

PHRASING HYPOTHETICAL QUESTIONS TO VES

Psychiatric Review Technique Form "B" Criteria

RATING OF FUNCTIONAL LIMITATIONS

A. "B" Criteria of the Listings

Indicate to what degree the following functional limitations (which are found in paragraph B of listings 12.02-12.04, 12.06-12.08 and 12.10 and paragraph D of 12.05) exist as a result of the individual's mental disorder(s). NOTE: Item 4 below is more than a measure of frequency and duration. See 12.00C4 and also read carefully the instructions for this section.

Specify the listing(s) (i.e., 12.02 through 12.10) under which the items below are being rated _____

FUNCTIONAL LIMITATION DEGREE OF LIMITATION

Insufficient

1. Restriction of Activities None Mild Moderate Marked* Extreme* Evidence of Daily Living

Insufficient

2. Difficulties in Maintaining None Mild Moderate Marked* Extreme* Evidence Social Functioning

Insufficient

3. Difficulties in Maintaining None Mild Moderate Marked* Extreme* Evidence Concentration, Persistence, or Pace One Four* or Insufficient

4. Repeated Episodes of None Two Three* More Evidence Decompensation, Each of Extended Duration

*Degree of limitation that satisfies the functional criterion.