

M E D I C A L
M E M O R A N D U M
18 May 2018

To: Dr. [REDACTED]

From: [REDACTED]
[REDACTED]

Subject: **FULL DISABILITY RATING - SOCIAL SECURITY** (see attached)

Dear Dr. [REDACTED]

It seems that my body has arrived at the point where I am losing the ability to work any more in the trade I am qualified for, for any sustained amount of time. And it is unlikely that I can continue working or do anything else for gainful employment, for the following reasons:

1. After about 4 hours of walking/standing on my feet, I turn into what I call a "pain zombie". This is even with the Vicodin that I take, and the audio I listen to on my iPod. Throughout most of the work shift, I have to sit down for a few minutes* every half hour, and go into a self-induced meditative state in order to continue to function. I am presently doing this **without** my employer's knowledge or approval. Technically, I could be fired for this, since it might be considered a form of "shorting" the work-shift and defrauding my employer of work time. Additionally, I am in essence torturing myself daily in order to complete the work shift**. My desire and ability to continue to do this is coming to an end. (Actually, it already has. I live in a "pain-zombie" dream world a good portion of my waking day, even on days off).
2. At the end of each work shift, all I can think of is getting home, doing the things I need to do to prepare for the next day, and then laying in bed with my dinner, a pain pill, and TV. After the pain medication becomes effective, I can start moving around again, and am able to do a few more things.
3. I cannot sit for any longer than about 30 minutes, before my pain levels increase to above a 5 level. Typically anymore, in order for me to operate my personal computer at home (as a hobbyist) any longer than 20 or 30 minutes, I need to take a whole pain pill. Because I do this on my own time, I can interleave what I am doing on my computer with closing my eyes and meditating while listening to music, or getting up and doing something else, like laying down on my bed and watching TV. I am unaware of any employer that would pay me anything to sit with my eyes closed in front of a computer listening to music, or laying in bed watching TV.
- 3a. Many times after I have been sitting for a period of time, my lower extremities become numb to some degree, and after standing up, I need to remain still for a few moments so that my leg muscles will function properly, otherwise I am partially paralyzed and have greater difficulty walking. I also suffer periodically from severe leg cramps which can occur without little or no forewarning. After laying down, when I first get back out of bed, I need to stabilize myself with a walker or other supportive device, before I can become mobile.
4. Pain effects both my memory and ability to concentrate.
5. I have always been one who prefers solitude, but in the past I could successfully engage groups of people if I needed to. Now, as a general rule, my pain levels make me too irritated to be around people for any length of time. I even have a hard time going through grocery checkout lines. While I use self-

control to present a pleasant demeanor, my energy to do this in any form of employment is virtually non-existent.

I have done some preliminary research. Attached are some quotes from the Social Security website which describe some of their criteria for a complete disability rating.

If you agree with any of these, I will proceed with applying for a full disability rating with the Social Security Department. I have made an appointment to see you to so we can communicate in detail regarding my request.

Thank you for your help, and all the treatment you have provided me over the years. I would not have been able to keep my current job for as long as I have without the pain medications you have prescribed for me.

*As the work shift progresses, this "few minutes" can easily turn into 20-30 minutes.

**My employer is in the process of expanding. My cleaning route will undoubtedly change, and my actual work-load increase. I can barely do what I am doing now, let alone take on more.

Respectfully,



Disability Evaluation Under Social Security

Part III - Listing Of Impairments

The Listing of Impairments describes, for each major body system, impairments considered severe enough to prevent an individual from doing any gainful activity (or in the case of children under age 18 applying for SSI, severe enough to cause marked and severe functional limitations). **Most of the listed impairments are permanent** or expected to result in death, or the listing includes a specific statement of duration. For all other listings, the evidence must show that **the impairment has lasted or is expected to last for a continuous period of at least 12 months**. The criteria in the Listing of Impairments are applicable to evaluation of claims for disability benefits under the Social Security disability insurance program or payments under the SSI program.

(<https://www.ssa.gov/disability/professionals/bluebook/listing-impairments.htm>)

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1.00 Musculoskeletal System - Adult

a. General. Regardless of the cause(s) of a musculoskeletal impairment, functional loss for purposes of these listings is defined as the inability to ambulate effectively on a sustained basis for any reason, **including pain associated with the underlying musculoskeletal impairment**, or the inability to perform fine and gross movements effectively on a sustained basis for any reason, including pain associated with the underlying musculoskeletal impairment. The inability to ambulate effectively or the inability to perform fine and gross movements effectively must have lasted, or be expected to last, for at least 12 months. For the purposes of these criteria, consideration of the ability to perform these activities must be from a physical standpoint alone. When there is an inability to perform these activities due to a mental impairment, the criteria in 12.00ff are to be used. We will determine whether an individual can ambulate effectively or can perform fine and gross movements effectively based on the medical and other evidence in the case record, generally without developing additional evidence about the individual's ability to perform the specific activities listed as examples in 1.00B2b(2) and 1.00B2c.

d. Pain or other symptoms. Pain or other symptoms may be an important factor contributing to functional loss. In order for pain or other symptoms to be found to affect an individual's ability to perform basic work activities, medical signs or laboratory findings must show the existence of a medically determinable impairment(s) that could reasonably be expected to produce the pain or other symptoms. The musculoskeletal listings that include pain or other symptoms among their criteria also include criteria for limitations in functioning as a result of the listed impairment, including limitations caused by pain. **It is, therefore, important to evaluate the intensity and persistence of such pain or other symptoms carefully in order to determine their impact on the individual's functioning under these listings.** See also §§ 404.1525(f) and 404.1529 of this part, and §§ 416.925(f) and 416.929 of part 416 of this chapter.

(<https://www.ssa.gov/disability/professionals/bluebook/1.00-Musculoskeletal-Adult.htm>).

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11.00 Neurological

D. What do we mean by disorganization of motor function?

1. Disorganization of motor function means interference, due to your neurological disorder, with movement of two extremities; i.e., **the lower extremities**, or upper extremities ...

T. How do we consider symptoms of fatigue in these listings?

Fatigue is one of the most common and limiting symptoms of some neurological disorders, such as multiple sclerosis, post-polio syndrome, and **myasthenia gravis(???)**. These disorders may result in **physical fatigue** (lack of muscle strength) or **mental fatigue** (decreased awareness or attention). When we evaluate your fatigue, we will consider the intensity, persistence, and effects of fatigue on your

functioning. This may include information such as the clinical and laboratory data and other objective evidence concerning your neurological deficit, a description of fatigue considered characteristic of your disorder, and information about your functioning. We consider the effects of physical fatigue on your ability to stand up, balance, walk, or perform fine and gross motor movements using the criteria described in 11.00D. We consider the effects of physical and mental fatigue when we evaluate your physical and mental functioning described in 11.00G.

(<https://www.ssa.gov/disability/professionals/bluebook/11.00-Neurological-Adult.htm>).