

UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF
CALIFORNIA

Cruz v. Commissioner of Social Security

No. 1:24-cv-00169-JLT-GSA (E.D. Cal. Mar. 5, 2025) · No. No. 1:24-cv-00169-JLT-GSA · Decided March 6,
2025

SUMMARY

The document contains findings and recommendations in Ronnie Cruz’s action seeking judicial review of the Commissioner of Social Security’s denial of disability insurance benefits. The magistrate judge recommends granting Cruz’s motion for summary judgment and remanding under sentence four of 42 U.S.C. § 405(g) for further proceedings, including evaluation of Listing 2.02 and reconsideration of the residual functional capacity. The recommendations identify deficiencies in the ALJ’s treatment of worsening vision and foot impairments.

CASE DETAILS

COURT	United States District Court for the Eastern District of California
WRITING FOR THE COURT	Gary S. Austin, United States Magistrate Judge
JURISDICTION	United States District Court for the Eastern District of California
DECIDED	March 6, 2025
DOCKET	No. 1:24-cv-00169-JLT-GSA
DISPOSITION	remanded
PROCEDURAL POSTURE	Plaintiff sought judicial review of the Commissioner's final decision denying disability insurance benefits and moved for summary judgment. The magistrate judge issued findings and recommendations recommending that Plaintiff's motion be granted, the Commissioner's cross-motion be denied, and the matter be remanded under sentence four of 42 U.S.C. § 405(g).
STANDARD OF REVIEW	Under 42 U.S.C. § 405(g), the court may set aside the Commissioner's decision when the ALJ's findings are based on legal error or are not supported by substantial evidence in the record as a whole. The court must consider the record as a whole and may not substitute its judgment for the Commissioner's where the evidence reasonably supports two conclusions.

PRECEDENTIAL VALUE	Nonprecedential findings and recommendations; subject to adoption, modification, or rejection by the assigned district judge.
PARTIES	Ronnie Cruz v. Commissioner of Social Security

TOPICS

judicial review of agency action summary judgment administrative law disability definition remedies

PRACTICE AREAS

Social Security disability administrative law federal civil procedure

QUESTIONS PRESENTED

1. Whether the ALJ adequately evaluated whether Cruz's visual impairment met or medically equaled Listing 2.02 for loss of central visual acuity.
2. Whether the ALJ's residual functional capacity finding was supported by substantial evidence in light of worsening vision, foot ulcers, and advice to limit standing and walking.
3. Whether the ALJ was required to further develop the record by obtaining updated medical opinion evidence regarding Cruz's visual acuity and functional limitations.

HOLDINGS

1. The ALJ's step-three analysis was inadequate because it omitted and did not evaluate the November 2022 finding of 20/400 vision with no improvement from pinhole correction, leaving unresolved whether Cruz's best corrected visual acuity in the better eye satisfied Listing 2.02.
2. The RFC finding was not supported by substantial evidence because the ALJ recognized worsening vision and foot conditions yet imposed only a depth-perception limitation and no limitation on standing or walking, despite evidence potentially inconsistent with those findings.
3. Remand was appropriate for the ALJ to obtain medical opinion evidence concerning Cruz's best corrected visual acuity and to reconsider the impact of the visual and foot impairments on the RFC.

KEY QUOTATIONS

“Remand is appropriate for the ALJ to obtain a medical opinion concerning the same, to affirmatively state what the ALJ concludes was Plaintiff’s best corrected visual acuity during the relevant period, and to explain the evidentiary basis for that finding.” (at 5)

“Substantial evidence and applicable law do not support the ALJ’s conclusion that Plaintiff was not disabled.” (at 9-10)

FACTUAL BACKGROUND

Cruz alleged disability beginning February 9, 2021, based principally on severe diabetic and ophthalmic conditions, including blindness or low vision, diabetic retinopathy, macular edema, retinal detachment, vitreous

hemorrhage, peripheral neuropathy, and toe amputations. The record contained conflicting evidence regarding vision in Cruz's better eye: earlier examinations reflected corrected acuity of approximately 20/40 to 20/50, while a November 29, 2022 emergency visit recorded 20/400 vision with no improvement from pinhole correction. The record also reflected worsening foot ulcers and advice to limit standing and walking, but the ALJ adopted an RFC for light work without standing or walking limitations.

PROCEDURAL HISTORY

Cruz applied for disability insurance benefits on March 17, 2021. The Commissioner denied the claim initially and on reconsideration; following a December 8, 2022 hearing, the ALJ issued an unfavorable decision on January 25, 2023. The Appeals Council denied review on December 4, 2023, and Cruz sought judicial review. The magistrate judge recommended remand for further proceedings; the findings and recommendations were subject to objections and referral to the assigned district judge under 28 U.S.C. § 636(b)(1).

DISPOSITION

remanded

REMAND INSTRUCTIONS

The ALJ must obtain a medical opinion concerning Cruz's best corrected visual acuity for purposes of Listing 2.02 and reconsider and explain the evidence concerning Cruz's visual and foot impairments, their worsening, and their impact on the RFC. The findings and recommendations directed entry of judgment in favor of Cruz and against the Commissioner, subject to review by the assigned district judge.

CASES CITED

- Tackett v. Apfel, 180 F.3d 1094, 1097 (9th Cir. 1999)
- Richardson v. Perales, 402 U.S. 389, 401 (1971)
- Saelee v. Chater, 94 F.3d 520, 522 (9th Cir. 1996)
- Robbins v. Social Security Admin., 466 F.3d 880, 882 (9th Cir. 2006)
- Jamerson v. Chater, 112 F.3d 1064, 1066 (9th Cir. 1997)
- Garrison v. Colvin, 759 F.3d 995, 1011 (9th Cir. 2014)
- Lewis v. Apfel, 236 F.3d 503, 512 (9th Cir. 2001)
- Marcia v. Sullivan, 900 F.2d 172, 176 (9th Cir. 1990)
- Kruchek v. Barnhart, 125 F. App'x 825, 827 (9th Cir. 2005)
- Magallanes v. Bowen, 881 F.2d 747, 751 (9th Cir. 1989)
- DeLorme v. Sullivan, 924 F.2d 841, 849 (9th Cir. 1991)
- McLeod v. Astrue, 640 F.3d 881, 885 (9th Cir. 2011)
- Rounds v. Comm'r Soc. Sec. Admin., 807 F.3d 996, 1006 (9th Cir. 2015)
- Wilkerson v. Wheeler, 772 F.3d 834, 838-39 (9th Cir. 2014)

OPINION

2 UNITED STATES DISTRICT COURT 3 EASTERN DISTRICT OF CALIFORNIA 4 5 Ronnie
Cruz, No. 1:24-cv-00169-JLT-GSA 6 Plaintiff, 7 v. FINDINGS AND RECOMMENDATIONS 8
TO GRANT PLAINTIFF’S MOTION FOR Commissioner of Social Security, SUMMARY
JUDGMENT, TO REMAND 9 FOR FURTHER PROCEEDINGS, AND TO DIRECT ENTRY OF
JUDGMENT IN 10 Defendant. FAVOR OF PLAINTIFF AND AGAINST DEFENDANT
COMMISSIONER OF 11 SOCIAL SECURITY 12 (Doc.

12, 16) 13 14 I. Introduction 15 Plaintiff Ronnie Cruz seeks judicial review of a final decision of
the Commissioner of Social 16 Security denying his application for disability insurance benefits
(“DIB”) pursuant to Title II of the 17 Social Security Act.1 18 II. Factual and Procedural
Background 19 On March 17, 2021, Plaintiff applied for DIB alleging disability as of February 9,
2021 due 20 to blindness/low vision, 3 toe amputations (right foot), high blood pressure and
diabetes.

AR 204. 21 The Commissioner denied the claim initially and on reconsideration. AR 103–108;
110–116. The 22 ALJ held a hearing on December 8, 2022. AR 23–42. The ALJ issued an
unfavorable decision on 23 January 25, 2023. AR 7–22.

The Appeals Council denied review on December 4, 2023 (AR 1-6), 24 and this appeal followed.
25 III. The Disability Standard 26 Pursuant to 42 U.S.C. §405(g), “This court may set aside the
Commissioner’s denial of 27 disability insurance benefits when the ALJ’s findings are based on
legal error or are not supported 28 1 The parties did not consent to the jurisdiction of a United
States Magistrate Judge.

Doc. 4, 9. by substantial evidence in the record as a whole.” Tackett v. Apfel, 180 F.3d 1094, 1097
(9th Cir. 2 1999). Substantial evidence is evidence that could lead a reasonable mind to accept a
conclusion. 3 See Richardson v. Perales, 402 U.S. 389, 401 (1971). It is more than a scintilla but
less than a 4 preponderance. Saelee v. Chater, 94 F.3d 520, 522 (9th Cir.

1996). The court must consider the 5 record as a whole and may not affirm by isolating supporting
evidence. Robbins v. Social Security 6 Admin., 466 F.3d 880, 882 (9th Cir. 2006). If the evidence
could reasonably support two 7 conclusions, the court “may not substitute its judgment for that of
the Commissioner” and must 8 affirm the decision. Jamerson v. Chater, 112 F.3d 1064, 1066 (9th
Cir.

1997). 9 To qualify for benefits under the Social Security Act, a plaintiff must establish that 10 he
or she is unable to engage in substantial gainful activity due to a medically determinable physical
or mental impairment that has lasted or can be expected to 11 last for a continuous period of not
less than twelve months. 42 U.S.C. § 12 1382c(a)(3)(A). An individual shall be considered to have
a disability only if... his physical or mental impairment or impairments are of such severity that he
is not 13 only unable to do his previous work, but cannot, considering his age, education, and

work experience, engage in any other kind of substantial gainful work which exists 14 in the national economy, regardless of whether such work exists in the immediate area in which he lives, or whether a specific job vacancy exists for him, or whether 15 he would be hired if he applied for work.

42 U.S.C. §1382c(a)(3)(B). 16 To achieve uniformity in the decision-making process, the Commissioner has established a 17 sequential five-step process for evaluating a claimant's alleged disability. 20 C.F.R. §§ 416.920(a)- 18 (f).

The ALJ proceeds through the steps and stops upon reaching a dispositive finding that the 19 claimant is or is not disabled. 20 C.F.R. §§ 416.927, 416.929. 20 Specifically, the ALJ is required to determine: 1- whether a claimant engaged in substantial 21 gainful activity during the period of alleged disability, 2- whether the claimant had medically 22 determinable "severe impairments," 3- whether these impairments meet or are medically equivalent 23 to one of the listed impairments set forth in 20 C.F.R. § 404, Subpart P, Appendix 1, 4- whether the 24 claimant retained the residual functional capacity ("RFC") to perform past relevant work, and 5- 25 whether the claimant had the ability to perform other jobs existing in significant numbers at the 26 national and regional level.

See, 20 C.F.R. § 416.920(a)-(f). While the Plaintiff bears the burden 27 of proof at steps one through four, the burden shifts to the commissioner at step five to prove that 28 Plaintiff can perform other work in the national economy given her RFC, age, education and work experience. *Garrison v. Colvin*, 759 F.3d 995, 1011 (9th Cir. 2014). 2 IV.

The ALJ's Decision 3 At step one the ALJ found that Plaintiff had not engaged in substantial gainful activity since 4 the alleged disability onset date of February 9, 2021. AR 13. At step two the ALJ found that 5 Plaintiff had the following severe impairments: diabetes mellitus; hypertension; peripheral 6 neuropathy; bilateral proliferative diabetic retinopathy and bilateral diabetic macular edema; 7 diabetic tractional retinal detachment involving the macula right eye; and vitreous hemorrhage of 8 both eyes.

AR 13. The ALJ found that Plaintiff had the non-severe impairment of malignant 9 neoplasm of the colon. AR 13. At step three the ALJ found that Plaintiff did not have an 10 impairment or combination thereof that met or medically equaled the severity of one of the 11 impairments listed in 20 C.F.R. Part 404, Subpart P, Appendix 1. AR 14. 12 Prior to step four, the ALJ evaluated Plaintiff's residual functional capacity (RFC) and 13 concluded that Plaintiff had the RFC to perform light work as defined in 20 CFR 404.1567(b) with 14 the following limitations: 15 occasional climbing ramps/stairs, no climbing ladders, ropes or scaffolds; unlimited 16 balancing, stooping, kneeling, crouching, and crawling; avoid concentrated exposure to extreme heat and extreme cold, unprotected height and hazardous machinery; must avoid 17 work environments

requiring good bilateral vision for safety; and has only monocular vision 18 and is therefore unable to perform work requiring depth perception AR 14–18.

19 At step four the ALJ found that Plaintiff could perform his past relevant work as an 20 advertising sale representative. AR 18. The ALJ therefore concluded that Plaintiff was not disabled 21 since the alleged disability onset date of February 9, 2021. AR 18. 22 V. Issues Presented 23 Plaintiff asserts two claims of error: 1- The ALJ failed to properly evaluate Plaintiff's 24 impairments at Step Three because he failed to evaluate evidence establishing that Plaintiff's 25 impairment met Listing 2.02 "Loss of Central Visual Acuity"; and 2- The ALJ failed to develop 26 the record regarding Plaintiff's functional limitations despite acknowledging that Plaintiff's 27 conditions medically worsened subsequent to the opinions of record.

28 2 A. Listing 2.02 3 1. Legal Standard 4 At step three, the ALJ is to determine whether the claimant's impairment or combination of 5 impairments is of a severity to meet or medically equal the criteria of an impairment listed in 20 6 7 CFR Part 404, Subpart P, Appendix 1 (20 CFR 404.1520(d), 404.1525, and 404.1526). If the 8 claimant's impairment or combination of impairments is of a severity to meet or medically equal 9 the criteria of a listing and meets the duration requirement (20 CFR 404.1509), the claimant is 10 disabled.

If it does not, the analysis proceeds to the next step. 11 The ALJ must evaluate the relevant evidence in concluding that an impairment does not 12 meet or equal a listing impairment. *Lewis v. Apfel*, 236 F.3d 503, 512 (9th Cir. 2001) (citing *Marcia v. Sullivan*, 900 F.2d 172, 176 (9th Cir. 1990)). Boilerplate findings are generally insufficient to 14 15 support a conclusion that an impairment does not meet or equal a listing.

Id. However, the ALJ 16 may meet this burden by adequately analyzing the evidence pertinent to the listing in other sections 17 of the ALJ's decision. See *Kruchek v. Barnhart*, 125 F. App'x 825, 827 (9th Cir. 2005) (finding 18 ALJ's discussion sufficient where the ALJ provided a boilerplate conclusion at step three but 19 adequately analyzed the pertinent evidence in the "Rationale" section of the decision).

20 2. Analysis 21 There is no dispute that Plaintiff has lost essentially all vision in his right eye. See MSJ at 22 23 7, ECF No. 12 (citing AR 601, 713); Resp. at 1–5, ECF No. 16 (not disputing the same). 24 Listing 2.02 (loss of central visual acuity) requires that the claimant's "Remaining vision in 25 the better eye after best correction is 20/200 or less." 20 C.F.R. Pt 404, Subpt.

P, App. 1, § 2.02 26 (emphasis added). 27 Plaintiff emphasizes an ER treatment note dated November 29, 2022, which reflects 20/400 28 uncorrected in his left eye, "PHNI" (pinhole offered no improvement). MSJ at 8 (citing AR 713). 2 Defendant, by contrast, relies on the June 15, 2021, consultative examination with Dr. Wagner— 3 and a July 29, 2022, exam to the same effect— indicating left eye visual acuity of 20/50 uncorrected, 4 5 and 20/40 with pinhole correction.

Resp. at 1 (citing AR 601, 655). 6 Defendant further emphasizes that the 20/400 figure from Plaintiff's ER visit was 7 uncorrected, whereas Listing 2.02 refers to best corrected visual acuity. Resp. at 2, ECF No. 16. 8 This is not particularly responsive.

The ER visit reflected 20/400 "PHNI" (pinhole no 9 improvement), suggesting 20/400 was both best uncorrected acuity and best corrected acuity. AR 10 713. Defendant does not acknowledge the PHNI notation that followed 20/400. 11 Defendant further suggests that the ALJ discussed all pertinent exams in detail. That is not 12 13 accurate.

The ALJ discussed the findings from the July 29, 2022, exam reflecting "visual acuity 14 right eye HM and left eye 20/50+1" (AR 655) and cited but did not describe the similar findings 15 from the June 2021 consultative exam (AR 601). AR 16. Most importantly, the ALJ's description 16 of the November 2022 ER visit—despite containing considerable detail—omitted any discussion of 17 the 20/400 "PHNI" finding: 18 On November 29, 2022, the claimant was seen for emergency visit for PDR OS.

He 19 was given Avastin injection, which was tolerated well. He was diagnosed with PDR OU, DME OU, TRD involving the OD, epiretinal membrane OD, vitreous 20 hemorrhage OU, diabetes type II with ocular complications, not insulin dependent; 21 pseudophakia OD, and nuclear sclerosis OS (Ex. B15F:2-5). 22 AR 16. 23 Clearly there is a discrepancy between: 1- the June 2021/July 2022 exams reflecting best 24 corrected of 20/40 and 20/50+, respectively; and 2- the November 2022 ER visit reflecting 20/400 25 PHNI.

26 The ALJ's discussion was insufficient as the ALJ did not identify the 20/400 PHNI finding 27 28 or indicate what—in the ALJ's view—the recorded demonstrated concerning Plaintiff's best corrected visual acuity for the purposes of Listing 2.02. 2 Further, the November 2022 ER visit discussed a recent onset (1 week) worsening of 3 Plaintiff's vision, though it is not clear what —if anything—was identified as the cause of the 4 5 worsening, or whether the 20/400 PHNI reading was expected to persist thereafter.

6 Remand is appropriate for the ALJ to obtain a medical opinion concerning the same, to 7 affirmatively state what the ALJ concludes was Plaintiff's best corrected visual acuity during the 8 relevant period, and to explain the evidentiary basis for that finding. 9 B. RFC; Development of the Record 10 1. Applicable Law 11 Before proceeding to steps four and five, the ALJ determines the claimant's residual 12 13 functional capacity (RFC) which is "the most [one] can still do despite [his or her] limitations" and 14 represents an assessment "based on all the relevant evidence." 20 C.F.R. § 416.945(a)(1).

The 15 RFC must consider all the claimant's impairments, severe or not. 20 C.F.R. §§ 416.920(e), 16 416.945(a)(2). "The ALJ can meet this burden by setting out a detailed and thorough summary of 17 the facts and conflicting evidence, stating his interpretation thereof, and making findings."

18 *Magallanes v. Bowen*, 881 F.2d 747, 751 (9th Cir. 1989). 19 The ALJ has a duty to develop the record ... even when the claimant is represented by 20 21 counsel.” *DeLorme v. Sullivan*, 924 F.2d 841, 849 (9th Cir.

1991). The duty is triggered where the 22 evidence is ambiguous or inadequate for adjudication. *Id.* “A specific finding of ambiguity or 23 inadequacy of the record is not necessary to trigger this duty to inquire, where the record establishes 24 ambiguity or inadequacy.”). *McLeod v. Astrue*, 640 F.3d 881, 885 (9th Cir. 2011). 25 2. Analysis 26 Plaintiff emphasizes that the ALJ did not credit any medical opinions because the records 27 28 “suggest that the claimant is more limited than found by state agency medical consultants,” and that treatment notes subsequent to Dr. Wagner’s opinion “clearly show worsening vision for which 2 the claimant underwent injections.” MSJ at 10 (AR.

17–18). 3 Plaintiff also emphasizes that “the ALJ also acknowledged new and worsening ulcers on 4 5 Plaintiff’s feet, suspicious for osteomyelitis, and that Plaintiff was advised to limit walking and 6 standing, further showing Plaintiff is more than limited than found by Dr. Wagner.” *Id.* 7 Plaintiff then explains that rather than developing the record with an updated medical 8 opinion as to the extent of the worsening of Plaintiff’s impairments and the functional limitations 9 arising therefrom, the ALJ instead played doctor, interpreted raw medical data, substituted her 10 opinion for that of medical professional, and reached her own interpretation of clinical findings.

11 MSJ at 9–11. Plaintiff does not explain the applicability of the caselaw concerning interpretation 12 13 of raw medical data. “Raw medical data” is not synonymous with “all medical records” or “all 14 clinical findings.” Simply put, “the ALJ is responsible for translating and incorporating clinical 15 findings into a succinct RFC.” See *Rounds v. Comm’r Soc.*

Sec. Admin., 807 F.3d 996, 1006 (9th 16 Cir. 2015). 17 The argument that the RFC was unsupported by the record is a distinct issue that Plaintiff 18 also touches on, one which does not hinge on whether the ALJ had a “duty to develop the record,” 19 or whether counsel forfeited that argument at the hearing level—which was exhaustively addressed 20 21 by both counsel.

22 The ALJ found the opinions of the state agency consultants—who found Plaintiff was 23 capable of medium work—unpersuasive in part due to worsening of Plaintiff’s vision. AR 17. Yet, 24 the ALJ found that the only aspect of Plaintiff’s vision that was limited was his depth perception 25 due to monocular vision, but did not find Plaintiff was otherwise limited in his visual acuity.

That 26 finding is unsupported for the reasons discussed above and for the additional reasons the ALJ 27 28 herself identified as the basis for rejecting the state agency opinions, namely worsening vision— not just monocular vision which it appears was present at the time the state agency

consultants 2 rendered their opinions. See AR 55, 72. 3 The ALJ also found the state agency opinions unpersuasive due to the development of foot 4 5 ulcers on both feet.

Yet the ALJ found Plaintiff could stand and walk 6 of 8 hours—as required by 6 light work—just as the state agency consultants found. Thus, the ALJ’s departure from the state 7 agency consultant’s opinions—light work opposed to medium—was not logically tethered to the 8 worsening of Plaintiff’s foot conditions given the only difference between light and medium 9 exertional work is weight lifting capacity.

10 Further, the ALJ discounted the June 2021 consultative opinion of Dr. Wagner for similar 11 reasons, namely that Plaintiff was more limited than suggested by Dr. Wagner. However, as the 12 13 ALJ acknowledged, Dr. Wagner explained that Plaintiff’s ability to stand and walk 6 of 8 hours 14 “may be modified somewhat should his wound care doctors recommend lesser ambulation due to 15 the current wound on the right foot,” AR 603.

As the ALJ elsewhere acknowledged, Plaintiff “was 16 advised to limit standing and walking.” AR 17 (citing Ex. B14F). It is not clear if this 17 recommendation was from his wound care doctor(s) or related to the development of foot ulcers. 18 But the recommendation to limit standing and walking has potentially broader evidentiary 19 significance than the “worsening” of Plaintiff impairments.

As such, it is thus in tension with the 20 21 RFC for unlimited standing and walking. 22 Further, the ALJ cited the recommendation for Plaintiff to limit standing and walking as the 23 final example of Plaintiff’s “Nonadherence” to treatment recommendations. AR 17. 24 Nonadherence has been described.

The record reflects that he never went to get right 25 foot x-rays when recommended by podiatrist in April and May 2021 (Ex. B14F:2- 7, 10). He was prescribed atorvastatin by urgent cared but he did not start it (Ex. 26 B11F:7). He did not follow up for a blood pressure check when his hypertension was uncontrolled (Ex. B11F:7). He does have osteomyelitis of the toe on his left 27 foot and was told to wear diabetic shoes, but he does not want to.

He was advised to 28 limit walking and standing (Ex. B14F:9, 11, 13, 15) AR 17. Importantly, the ALJ cited no evidence that Plaintiff was non-complaint with the 2 recommendation to limit standing and walking, as such the recommendation is in tension with the 3 RFC which does not limit standing and walking. 4 5 VI. Findings 6 Substantial evidence and applicable law do not support the ALJ’s conclusion that Plaintiff 7 was not disabled.

Remand is warranted for the ALJ to: 1- obtain a medical opinion concerning 8 Plaintiff’s best corrected visual acuity for the purposes of Listing 2.02; and 2- to reconsider and 9 explain the evidence of Plaintiff’s visual and foot impairments, worsening of the same, and the 10 impact

thereof on his RFC. 11 VII. Recommendations 12 13 For the reasons stated above, the recommendation is that: 14 1.

Plaintiff's motion for summary judgment (Doc. 12) be GRANTED. 15 2. Defendant's cross-motion (Doc. 16) be DENIED. 16 3. The matter be remanded to the Commissioner under sentence four of 42 U.S.C. § 17 405(g) for further proceedings consistent with the Findings and Recommendations. 18 4. That the Court Clerk of Court be directed to enter judgment in favor of Plaintiff 19 and against Defendant Commissioner of Social Security.

20 21 VIII. Objections Due Within 14 Days 22 These Findings and Recommendations will be submitted to the U.S. District Judge assigned 23 to the case per 28 U.S.C. § 636(b)(1). Within 14 days of these Findings and Recommendations, any 24 party may file written objections.

The document should be titled "Objections to Magistrate Judge's 25 Findings and Recommendations." The failure to file objections within the specified time may result 26 in the waiver of rights on appeal. *Wilkerson v. Wheeler*, 772 F.3d 834, 838-39 (9th Cir. 2014). 27 28 2 IT IS SO ORDERED. 3 Dated: March 5, 2025 /s/ Gary S. Austin 4 UNITED STATES MAGISTRATE JUDGE 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28