

UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF
CALIFORNIA

James L. v. SSA Commissioner

No. 25-cv-00503-TSH (N.D. Cal. Oct. 14, 2025) · No. 25-cv-00503-TSH · Decided October 14, 2025

SUMMARY

The United States District Court for the Northern District of California reviews the Commissioner of Social Security’s denial of James L.’s claim for disability insurance benefits. The court grants Plaintiff’s motion for summary judgment and denies Defendant’s cross-motion, holding that the ALJ failed to provide clear and convincing reasons for discounting Plaintiff’s allegations of upper-extremity dysfunction. The court also considers the ALJ’s treatment of nonsevere anxiety-related limitations and Plaintiff’s ability to perform past relevant work as a computer programmer.

CASE DETAILS

COURT	United States District Court for the Northern District of California
WRITING FOR THE COURT	Thomas S. Hixson
JURISDICTION	United States District Court for the Northern District of California
DECIDED	October 14, 2025
DOCKET	25-cv-00503-TSH
DISPOSITION	remanded
PROCEDURAL POSTURE	Plaintiff sought judicial review under 42 U.S.C. § 405(g) of the Commissioner's denial of disability insurance benefits. The parties filed cross-motions for summary judgment.
STANDARD OF REVIEW	The court reviews the Commissioner's decision under 42 U.S.C. § 405(g) and may disturb it only if it is unsupported by substantial evidence or based on improper legal standards. The court must consider the entire administrative record, including evidence supporting and detracting from the decision, and may not affirm by isolating a specific quantum of supporting evidence. Legal error requires remand unless the agency's path can reasonably be discerned and the error is harmless; the reviewing court may not make independent findings or supply reasons not asserted by the ALJ.
PRECEDENTIAL VALUE	unpublished district court opinion

PARTIES

James L. v. SSA Commissioner

TOPICS

judicial review of agency action

administrative law

disability definition

ada / disability

PRACTICE AREAS

Social Security disability benefits

administrative law

judicial review of agency action

disability benefits

summary judgment

QUESTIONS PRESENTED

1. Whether the ALJ provided specific, clear, and convincing reasons for discounting Plaintiff's subjective allegations concerning upper-extremity dysfunction.
2. Whether the ALJ properly incorporated Plaintiff's mild limitations from a non-severe anxiety disorder into the residual functional capacity assessment.
3. Whether the ALJ properly determined that Plaintiff could perform his past relevant work as a computer programmer in light of the alleged fine-manipulation limitations.
4. Whether the proper remedy was an immediate award of benefits or remand for further administrative proceedings.

HOLDINGS

1. The ALJ failed to provide specific, clear, and convincing reasons for rejecting Plaintiff's allegations of upper-extremity dysfunction.
2. The ALJ did not commit reversible error in determining Plaintiff's residual functional capacity without imposing additional mental work restrictions for his non-severe anxiety disorder.
3. The ALJ's determination that Plaintiff could perform his past relevant work as a computer programmer could not stand because it was potentially affected by the inadequate evaluation of Plaintiff's upper-extremity allegations.
4. Remand for further administrative proceedings, rather than an immediate award of benefits, was appropriate.

KEY QUOTATIONS

"Where, as here, objective medical evidence in the record established underlying physical impairments that could reasonably be expected to produce Plaintiff's reported upper extremity dysfunction, the ALJ could only reject those symptom allegations by offering "specific, clear and convincing reasons" for doing so." (V.B.2)

"However, none of these activities show how Plaintiff can type or engage in fine manipulation for more than 10 minutes at a time without taking a break." (V.B.2)

“Here, the ALJ failed to fully and fairly develop the record when evaluating Plaintiff’s disability claim, but it is not clear that the ALJ would be required to find Plaintiff disabled.” (V.E)

FACTUAL BACKGROUND

Plaintiff alleged that upper-extremity shaking, fatigue, weakness, numbness, and cramping prevented him from typing or using a computer for more than ten minutes without a fifteen- to twenty-minute break. The record included bilateral carpal tunnel and cubital tunnel syndromes, prior surgeries on both arms, cervical spine spondylosis with a disc protrusion and severe foraminal narrowing, diminished sensation, tremors, and a history of Guillain-Barre Syndrome. The ALJ found that Plaintiff could perform light work with frequent fingering and handling, and determined that he could perform his past work as a computer programmer. The district court concluded that the ALJ did not adequately evaluate the medical evidence and Plaintiff’s activities in assessing the alleged upper-extremity limitations.

PROCEDURAL HISTORY

Plaintiff applied for Title II disability insurance benefits on October 25, 2022, alleging disability beginning September 2, 2021. The claim was denied initially and on reconsideration; following a December 14, 2023 hearing, the ALJ issued an unfavorable decision on January 31, 2024. The Appeals Council denied review on November 21, 2024. The district court granted Plaintiff’s motion for summary judgment, denied the Commissioner’s cross-motion, and remanded for further administrative proceedings.

DISPOSITION

remanded

REMAND INSTRUCTIONS

Remand for further administrative proceedings consistent with the order, including reevaluation of Plaintiff’s subjective upper-extremity symptom allegations and the related RFC and past-relevant-work determinations.

CASES CITED

- Brown-Hunter v. Colvin, 806 F.3d 487, 492 (9th Cir. 2015)
- Biestek v. Berryhill, 587 U.S. 97, 102-103 (2019)
- Garrison v. Colvin, 759 F.3d 995, 1009-1010, 1014-1016 (9th Cir. 2014)
- Hill v. Astrue, 698 F.3d 1153, 1159 (9th Cir. 2012)
- Ford v. Saul, 950 F.3d 1141, 1148-1149 (9th Cir. 2020)
- Sullivan v. Zebley, 493 U.S. 521, 530 (1990)
- Thomas v. Barnhart, 278 F.3d 947, 955 (9th Cir. 2002)
- Lounsbury v. Barnhart, 468 F.3d 1111, 1114-1115 (9th Cir. 2006)
- Tackett v. Apfel, 180 F.3d 1094, 1097-1098, 1101 (9th Cir. 1999)
- Wischmann v. Kijakazi, 68 F.4th 498, 502 (9th Cir. 2023)
- Pinto v. Massanari

- Berry v. Astrue, 622 F.3d 1228, 1234 (9th Cir. 2010)
- Smith v. Kijakazi, 14 F.4th 1108, 1113 (9th Cir. 2021)
- Lambert v. Saul, 980 F.3d 1266, 1268 (9th Cir. 2020)
- Ghanim v. Colvin, 763 F.3d 1154, 1164 (9th Cir. 2014)
- Williams v. Colvin, 2015 WL 4507174, at *6 (C.D. Cal. July 23, 2015)
- Holohan v. Massanari, 246 F.3d 1195, 1207 (9th Cir. 2001)
- Sousa v. Callahan, 143 F.3d 1240, 1243 (9th Cir. 1998)
- Reddick v. Chater, 157 F.3d 715, 722 (9th Cir. 1998)
- Laborin v. Berryhill, 867 F.3d 1151, 1153 (9th Cir. 2017)
- Carmickle v. Commissioner of Social Security, 533 F.3d 1155, 1164 (9th Cir. 2008)
- Hutton v. Astrue, 491 F. App'x 850, 850-851 (9th Cir. 2012)
- Kari P. v. Saul, 2020 WL 6889202, at *8 (S.D. Cal. Nov. 23, 2020)
- Rounds v. Commissioner of Social Security Administration, 807 F.3d 996, 1006 (9th Cir. 2015)
- Stubbs-Danielson v. Astrue, 539 F.3d 1169, 1174 (9th Cir. 2008)
- Benecke v. Barnhart, 379 F.3d 587, 595 (9th Cir. 2004)
- Luther v. Berryhill, 891 F.3d 872, 877-878 (9th Cir. 2018)
- Leon v. Berryhill, 880 F.3d 1041, 1047 (9th Cir. 2017)

OPINION

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PER CURIAM.

1 2 3

4 UNITED STATES DISTRICT COURT

5 NORTHERN DISTRICT OF CALIFORNIA

6 7 JAMES L.,1 Case No. 25-cv-00503-TSH 8 Plaintiff,

ORDER RE: CROSS-MOTIONS FOR

9 v. SUMMARY JUDGMENT

10 SSA COMMISSIONER, Re: Dkt. Nos. 9, 18 11 Defendant. 12

13 I. INTRODUCTION

14 Plaintiff James L. moves for summary judgment to reverse the decision of the 15
Commissioner of Social Security denying Plaintiff's claim for disability benefits under the Social
16 Security Act, 42 U.S.C. § 401 et seq. ECF No. 9. Defendant cross-moves to affirm. ECF No.
18. 17 Pursuant to Civil Local Rule 16-5, the matter is submitted without oral argument. For the
reasons 18 stated below, the Court GRANTS Plaintiff's motion and DENIES Defendant's cross-
motion.2

19 II. PROCEDURAL HISTORY

20 On October 25, 2022, Plaintiff filed an application for disability insurance benefits under 21
Title II of the Social Security Act, stating a disability onset date of September 2, 2021. 22

Administrative Record (AR) 148-49. Following denial at the initial and reconsideration levels, 23 Plaintiff requested a hearing before an Administrative Law Judge (ALJ). AR 53, 62, 95. An ALJ 24 held a hearing on December 14, 2023 and issued an unfavorable decision on January 31, 2024. 25 26 1 Partially redacted in compliance with Federal Rule of Civil Procedure 5.2(c)(2)(B) and the recommendation of the Committee on Court Administration and Case Management of the Judicial 27 Conference of the United States. 1 AR 14-38, 63-74. The Appeals Council denied Plaintiff's request for review on November 21, 2 2024. AR 1-3. Plaintiff now seeks review pursuant to 42 U.S.C. § 405(g).

3 III. ISSUES FOR REVIEW

4 Plaintiff argues the ALJ failed to: (1) provide clear and convincing reasons for discounting 5 his allegations of upper extremity dysfunction; (2) formulate a residual functional capacity that 6 included mental work restrictions accounting for his non-severe anxiety disorder; and (3) properly 7 evaluate whether his past relevant work as a computer programmer required more than frequent 8 fine manipulation.

9 IV. STANDARD OF REVIEW

10 42 U.S.C. § 405(g) provides this Court's authority to review the Commissioner's decision 11 to deny disability benefits, but "a federal court's review of Social Security determinations is quite 12 limited." *Brown-Hunter v. Colvin*, 806 F.3d 487, 492 (9th Cir. 2015). The Commissioner's 13 decision will be disturbed only if it is not supported by substantial evidence or if it is based on the 14 application of improper legal standards. *Id.* Substantial means "more than a mere scintilla," but 15 only "such relevant evidence as a reasonable mind might accept as adequate to support a 16 conclusion." *Biestek v. Berryhill*, 587 U.S. 97, 103 (2019) (cleaned up). Under this standard, 17 which is "not high," the Court looks to the existing administrative record and asks "whether it 18 contains 'sufficient evidence' to support the agency's factual determinations." *Id.* at 102 (cleaned 19 up). 20 The Court "must consider the entire record as a whole, weighing both the evidence that 21 supports and the evidence that detracts from the Commissioner's conclusion, and may not affirm 22 simply by isolating a specific quantum of supporting evidence." *Garrison v. Colvin*, 759 F.3d 23 995, 1009 (9th Cir. 2014) (citation omitted). "The ALJ is responsible for determining credibility, 24 resolving conflicts in medical testimony, and for resolving ambiguities." *Id.* at 1010 (citation 25 omitted). If "the evidence can reasonably support either affirming or reversing a decision," the 26 Court must defer to the ALJ's decision. *Id.* (citation omitted). 27 Even if the ALJ commits legal error, the ALJ's decision must be upheld if the error is 1 despite the legal error, the agency's path may reasonably be discerned, even if the agency explains 2 its decision with less than ideal clarity." *Brown-Hunter*, 806 F.3d at 492 (cleaned up). But "[a] 3 reviewing court may not make independent findings based on the evidence before the ALJ to 4 conclude that the ALJ's error was harmless" and is instead "constrained to review the reasons the 5 ALJ asserts." *Id.* (cleaned up).

6 V. DISCUSSION

7 A. Framework for Determining Whether a Claimant Is Disabled 8 A claimant is “disabled” under the Social Security Act (1) “if he is unable to engage in any 9 substantial gainful activity by reason of any medically determinable physical or mental 10 impairment which can be expected to result in death or which has lasted or can be expected to last 11 for a continuous period of not less than twelve months” and (2) the impairment is “of such severity 12 that he is not only unable to do his previous work but cannot, considering his age, education, and 13 work experience, engage in any other kind of substantial gainful work which exists in the national 14 economy.” 42 U.S.C. § 1382c(a)(3)(A)-(B); *Hill v. Astrue*, 698 F.3d 1153, 1159 (9th Cir. 2012). 15 To determine whether a claimant is disabled, an ALJ is required to employ a five-step sequential 16 analysis. 20 C.F.R. § 404.1520(a)(1) (disability insurance benefits); *id.* § 416.920(a)(4) (same 17 standard for supplemental security income). The claimant bears the burden of proof at steps one 18 through four. *Ford v. Saul*, 950 F.3d 1141, 1148 (9th Cir. 2020) (citation omitted). 19 At step one, the ALJ must determine if the claimant is presently engaged in a “substantial 20 gainful activity,” 20 C.F.R. § 404.1520(a)(4)(i), defined as “work done for pay or profit that 21 involves significant mental or physical activities.” *Ford*, 950 F.3d at 1148 (cleaned up). Here, the 22 ALJ determined Plaintiff had not performed substantial gainful activity since September 2, 2021. 23 AR 68. 24 At step two, the ALJ decides whether the claimant’s impairment or combination of 25 impairments is “severe,” 20 C.F.R. § 404.1520(a)(4)(ii), “meaning that it significantly limits the 26 claimant’s ‘physical or mental ability to do basic work activities.’” *Ford*, 950 F.3d at 1148 27 (quoting 20 C.F.R. § 404.1522(a)). If no severe impairment is found, the claimant is not disabled. 1 impairments: degenerative disc disease of the cervical spine with radiculopathy, coronary artery 2 disease/congestive heart failure, hypertension, and ventricular tachycardia. AR 68. 3 At step three, the ALJ evaluates whether the claimant has an impairment or combination of 4 impairments that meets or equals an impairment in the “Listing of Impairments” (referred to as the 5 “listings”). See 20 C.F.R. § 404.1520(a)(4)(iii); 20 C.F.R. Pt. 404 Subpt. P, App. 1. The listings 6 describe impairments that are considered “to be severe enough to prevent an individual from doing 7 any gainful activity.” *Id.* § 404.1525(a). Each impairment is described in terms of “the objective 8 medical and other findings needed to satisfy the criteria of that listing.” *Id.* § 404.1525(c)(3). 9 “For a claimant to show that his impairment matches a listing, it must meet all of the specified 10 medical criteria. An impairment that manifests only some of those criteria, no matter how 11 severely, does not qualify.” *Sullivan v. Zebley*, 493 U.S. 521, 530 (1990) (footnote omitted). If a 12 claimant’s impairment either meets the listed criteria for the diagnosis or is medically equivalent 13 to the criteria of the diagnosis, he is conclusively presumed to be disabled, without considering 14 age, education and work experience. 20 C.F.R. § 404.1520(d). Here, the ALJ determined Plaintiff 15 did not have an impairment or combination of impairments that meets the listings. AR 70. 16 If the claimant does not meet or equal a listing, the ALJ proceeds to step four and assesses 17 the claimant’s residual functional capacity (RFC), defined as the most the claimant can still do 18 despite their limitations (20 C.F.R. § 404.1545(a)(1)), and determines whether they

are able to perform past relevant work, defined as “work that [the claimant has] done within the past five years, that was substantial gainful activity, and that lasted long enough for [the claimant] to learn to do it.” 20 C.F.R. § 404.1560(b)(1). If the ALJ determines, based on the RFC, that the claimant can perform past relevant work, the claimant is not disabled. *Id.* § 404.1520(f). Here, the ALJ determined Plaintiff has the RFC to perform light work as defined in 20 CFR 404.1567(b) except he can frequently finger and handle with the bilateral upper extremities, and he can have frequent rotation/flexion of the neck. He can occasionally feel with the upper extremities. He can occasionally reach overhead with the right upper extremity. He can never climb ladders, ropes, or scaffolds. He can never work around unprotected heights, dangerous moving machinery, or uneven terrain, and he cannot work in an area with exposed moving machinery. Based on this RFC, the ALJ determined Plaintiff could perform past relevant work as a computer programmer. AR 74. As such, the ALJ determined Plaintiff has not been under a disability, as defined in the Social Security Act, from September 2, 2021, through the date of the decision. AR 74. Had the ALJ determined Plaintiff could not perform past relevant work, at step five the burden would shift to the agency to prove that “the claimant can perform a significant number of other jobs in the national economy.” *Ford*, 950 F.3d at 1149 (quoting *Thomas v. Barnhart*, 278 F.3d 947, 955 (9th Cir. 2002)). To meet this burden, the ALJ may rely on the Medical-Vocational Guidelines (commonly known as “the grids”), 20 C.F.R. Pt. 404 Subpt. P, App. 2,3 or on the testimony of a vocational expert. *Ford*, 950 F.3d at 1149 (citation omitted). “[A] vocational expert or specialist may offer expert opinion testimony in response to a hypothetical question about whether a person with the physical and mental limitations imposed by the claimant’s medical impairment(s) can meet the demands of the claimant’s previous work, either as the claimant actually performed it or as generally performed in the national economy.” 20 C.F.R. § 404.1560(b)(2). An ALJ may also use other resources such as the Dictionary of Occupational Titles (DOT). *Id.* B. Subjective Complaints Plaintiff states he has dysfunction in his upper extremities that prevents him from performing his prior work as a computer programmer. AR 23, 266. He reported experiencing shaking, fatigue, weakness, numbness, and cramping in his hands, which made it difficult for him to perform his work. 3 The grids “present, in table form, a short-hand method for determining the availability and numbers of suitable jobs for a claimant.” *Lounsbury v. Barnhart*, 468 F.3d 1111, 1114-15 (9th Cir. 2006) (citing *Tackett v. Apfel*, 180 F.3d 1094, 1101 (9th Cir. 1999)). They consist of three tables, for sedentary work, light work, and medium work, and a claimant’s place on the applicable table depends on a matrix of four factors: a claimant’s age, education, previous work experience, and physical ability. *Id.* “For each combination of these factors, [the grids] direct a finding of either ‘disabled’ or ‘not disabled’ based on the number of jobs in the national economy in that category of physical-exertional requirements.” *Id.* 4 The DOT classifies jobs by their exertional and skill requirements. 20 C.F.R. § 404.1566(d)(1); *Wischmann v. Kijakazi*, 68 F.4th 498, 502 (9th Cir. 2023) (“Although criticized as having many outdated job descriptions, the DOT is typically the starting point for VEs to identify the

occupations relevant for each claimant's residual functional capacities.") (cleaned up); *Pinto v.* 1 to type or use a computer more than 10 minutes before he required a 15 to 20-minute break. AR 2 25, 172, 266. 3 The ALJ found Plaintiff's statements about the intensity, persistence, and limiting effects 4 of symptoms are inconsistent with the objective medical evidence and the other the evidence of 5 record. AR 73. In making this finding, the ALJ pointed to an examination in October 2022 that 6 indicated normal 5/5 strength in the upper extremities, and only mild pain with cervical range of 7 motion. *Id.* (citing AR 1472). The ALJ also pointed to a March 2022 treating record in which 8 Plaintiff stated he was able to participate in activities such as mowing his lawn, playing golf, 9 doing housework, and going on occasional walks, *id.* (citing AR 286); a September 2022 record in 10 which he stated he was able to walk over seven miles and reported "staying physically active," *id.* 11 (citing AR 1514); and a December 2022 record in which Plaintiff indicated he went fishing for 12 20–40-pound dorado in Mexico and was moving 20-pound pavers and walked two or more miles 13 while mowing his lawn, *id.* (citing AR 2721). Based on this evidence, the ALJ found "the 14 objective medical evidence and the other the evidence of record do not support the level of 15 symptomology that the claimant alleged and is inconsistent with statements concerning the alleged 16 intensity, persistence, and limiting effects of the claimant's symptoms." *Id.* 17 Plaintiff argues the ALJ failed to provide clear and convincing reasons for discounting his 18 allegations of upper extremity numbness, weakness, fatigue, and cramping. Pl.'s Mot. at 3. He 19 argues the ALJ erred in relying on isolated examination findings rather than looking at the medical 20 evidence as a whole when evaluating the credibility of his upper extremity symptoms. *Id.* at 4. 21 1. Legal Standard 22 The Ninth Circuit has established a two-step analysis for determining the extent to which a 23 claimant's symptom testimony must be credited: 24 First, the ALJ must determine whether the claimant has presented objective medical evidence of an underlying impairment which could 25 reasonably be expected to produce the pain or other symptoms alleged. In this analysis, the claimant is not required to show that her 26 impairment could reasonably be expected to cause the severity of the symptom she has alleged; she need only show that it could reasonably 27 have caused some degree of the symptom. Nor must a claimant 1 If the claimant satisfies the first step of this analysis, and there is no evidence of malingering, the ALJ can reject the claimant's testimony 2 about the severity of her symptoms only by offering specific, clear and convincing reasons for doing so. This is not an easy requirement 3 to meet: The clear and convincing standard is the most demanding required in Social Security cases. 4 5 *Garrison*, 759 F.3d at 1014–15 (citations and internal quotation marks omitted). Under this 6 standard, "the ALJ must identify what testimony is not credible and what evidence undermines the 7 claimant's complaints." *Berry v. Astrue*, 622 F.3d 1228, 1234 (9th Cir. 2010) (internal quotation 8 marks and citation omitted). "In other words, to reject the specific portions of the claimant's 9 testimony that the ALJ has found not to be credible, we require that the ALJ provide clear and 10 convincing reasons relevant to that portion." (internal citations omitted). *Smith v. Kijakazi*, 14 11 F.4th 1108, 1113 (9th Cir. 2021). See also *Lambert v. Saul*, 980 F.3d 1266, 1268 (9th Cir. 2020) 12

(“[T]he ALJ must identify the specific testimony that he discredited and explain the evidence 13 undermining it.”). 14 2. Analysis 15 The Court finds the ALJ failed to provide clear and convincing reasons for rejecting 16 Plaintiff’s subjective complaints. Plaintiff met the first requirement by providing evidence of an 17 underlying impairment that could reasonably be expected to produce the pain or other symptoms 18 alleged. AR 72-73. He alleged dysfunction in his upper extremities that prevented him from 19 performing his prior work as a computer programmer. AR 23, 266. Plaintiff reported he 20 experienced shaking, fatigue, weakness, numbness, and cramping in his hands, which made it 21 difficult for him to type or use a computer more than 10 minutes before he required a 15 to 20- 22 minute break. AR 25, 172, 266. Consistent with his allegations of upper extremity dysfunction, 23 Plaintiff had multiple impairments contributing to his symptoms. Plaintiff suffered from bilateral 24 carpal tunnel syndrome and cubital tunnel syndrome, for which he underwent a surgery on each 25 arm in June and October 2019. AR 243. Despite the surgeries, Plaintiff reported constant and 26 worsening symptoms in July 2020, when he exhibited swelling and joint dysfunction in two 27 fingers for which he received injections into the joints. AR 243-45. Plaintiff’s treatment provider 1 resolve due to the degree of the pre-surgical nerve dysfunction. AR 245. 2 In addition to cubital tunnel and carpal tunnel syndromes, Plaintiff had cervical spine 3 spondylosis with symptoms radiating into his upper extremities. A January CT myelogram 4 showed Plaintiff had a disc protrusion indenting his spinal cord with severe neural foraminal 5 narrowing at multiple levels. AR 1480. Plaintiff attended physical and occupational therapy for 6 his neck and upper extremity symptoms, including symptoms of numbness, tingling, and 7 weakness. AR 265, 684, 1189. Plaintiff had corresponding examination findings of diminished 8 sensation along the C5 and C6 nerve distributions, a shaking left hand, distal tremors, and sensory 9 deficits in his hands. AR 261, 266, 1190, 1196. Plaintiff also had a history of Guillain-Barre 10 Syndrome,⁵ an underlying condition potentially contributing to his upper extremity dysfunction. 11 AR 27-28, 260, 684. 12 Where, as here, objective medical evidence in the record established underlying physical 13 impairments that could reasonably be expected to produce Plaintiff’s reported upper extremity 14 dysfunction, the ALJ could only reject those symptom allegations by offering “specific, clear and 15 convincing reasons” for doing so. The ALJ found Plaintiff’s alleged inability to use a keyboard 16 for more than a short period of time was inconsistent with an examination in October 2022, which 17 showed normal strength and mild pain with cervical spine range of motion. AR 73 (citing AR 18 1472). But this same examination showed that Plaintiff had diminished sensation from the 19 clavicles down to the hands in a glove distribution. AR 1472. Further, in isolating the findings of 20 a single examination, the ALJ failed to consider other significant objective medical findings 21 corroborating Plaintiff’s allegations of upper extremity dysfunction. As summarized above, 22 examinations showed signs of diminished sensation along the C5 and C6 nerve distributions, a 23 shaking left hand, distal tremors, and sensory deficits in his hands. AR 261, 266, 1190, 1196. 24 Additionally, a January CT myelogram showed that Plaintiff had a disc protrusion indenting his 25

26 5 Guillain–Barre Syndrome is a rare disorder in which the body’s immune system attacks the patient’s nerves, resulting in weakness, numbness, or paralysis. See 27 <https://www.mayoclinic.org/diseases-conditions/guillain-barre-syndrome/symptoms-causes/syc-1> spinal cord with severe neural foraminal narrowing at multiple levels. AR 1480. Such 2 examination and diagnostic evidence could provide a solid objective foundation for Plaintiff’s 3 allegations of upper extremity dysfunction, but it is unclear if the ALJ considered them. 4 Moreover, Plaintiff’s history of bilateral arm/hand surgeries could corroborate the degree of 5 Plaintiff’s nerve dysfunction, especially given a treating medical source’s finding that Plaintiff 6 would continue to have some residual symptoms from his carpal tunnel and cubital tunnel 7 syndromes despite undergoing the surgeries. AR 243, 245. As such, the Court finds the ALJ 8 erred in relying on isolated examination findings rather than looking at the medical evidence as a 9 whole when evaluating Plaintiff’s credibility. See *Ghanim v. Colvin*, 763 F.3d 1154, 1164 (9th 10 Cir. 2014) (finding error when the ALJ’s decision did not account for the record “as a whole,” but

11 rather relied on “cherry picked” evidence); *Williams v. Colvin*, 2015 WL 4507174, *6 (C.D. Cal.

12 July 23, 2015) (“An ALJ may not cherry-pick evidence to support the conclusion that a claimant is

13 not disabled, but must consider the evidence as a whole in making a reasoned disability 14 determination.”) (citing *Holohan v. Massanari*, 246 F.3d 1195, 1207 (9th Cir. 2001) (concluding 15 that the ALJ’s basis for rejecting the treating physician’s medical opinion was not supported by 16 substantial evidence because the ALJ “selectively relied on some entries . . . and ignored the many 17 others that indicated continued, severe impairment”); *Tackett v. Apfel*, 180 F.3d 1094, 1097-98 18 (9th Cir. 1999) (“[T]he Commissioner’s decision ‘cannot be affirmed simply by isolating a 19 specific quantum of supporting evidence.’”) (citing *Sousa v. Callahan*, 143 F.3d 1240, 1243 (9th 20 Cir. 1998)).

21 Beyond the reference to the October 2022 examination results, the ALJ asserted that 22 Plaintiff’s activities, including mowing his lawn, playing golf, doing housework, moving pavers, 23 walking over seven miles, and fishing, were inconsistent with his allegations of hand dysfunction. 24 AR 73. However, none of these activities show how Plaintiff can type or engage in fine 25 manipulation for more than 10 minutes at a time without taking a break. The Ninth Circuit has 26 repeatedly found that a person need not be totally incapacitated to establish that he or she is 27 disabled. See *Garrison*, 759 F.3d at 1016 (“We have repeatedly warned that ALJs must be 1 because impairments that would unquestionably preclude work and all the pressures of a 2 workplace environment will often be consistent with doing more than merely resting in bed all 3 day.”). Likewise, the Ninth Circuit has recognized that “disability claimants should not be 4 penalized for attempting to lead normal lives in the face of their limitations,” and has held that 5 “[o]nly if [her] level of activity were inconsistent with [a claimant’s] claimed limitations would 6

these activities have any bearing on [her] credibility.” *Id.* (alterations in original) (citing *Reddick v. Chater*, 157 F.3d 715, 722 (9th Cir. 1998)). While these activities indicate Plaintiff had a sufficient capacity for activities such as lifting and walking, he did not allege having significant limitations in this regard. In fact, Plaintiff testified that he could lift up to 50 pounds and he could walk up to a couple hours with no more than a little shortness of breath. AR 24, 26. The record also shows that, despite experiencing a heart attack in July 2021 with the need for surgical stent placement, a balloon angioplasty, a transcatheter mitral valve replacement, and implantation of a pacemaker (AR 273, 337, 341, 349, 495), Plaintiff was able to recover and pursue exercise activities, including attending a 7.5 mile walking event in May 2022 (AR 280). However, Plaintiff did not allege that he could no longer work as a computer programmer because of his cardiac condition or exertional limitations; rather, he testified that his inability to perform his past work was due to his upper extremity dysfunction and his inability to type or engage in fine manipulation for extended periods. AR 23, 25, 266. In sum, it is unclear how the activities cited in the ALJ’s evaluation bear on his allegations of upper extremity dysfunction. As such, the Court finds the ALJ failed to provide clear and convincing reasons for discounting Plaintiff’s allegations, and remand is appropriate. C. Residual Functional Capacity In considering Plaintiff’s impairments, the ALJ found that because his “medically determinable mental impairment causes no more than ‘mild’ limitation in any of the functional areas and the evidence does not otherwise indicate that there is more than a minimal limitation in the claimant’s ability to do basic work activities, it is nonsevere.” AR 70. Plaintiff argues that “notwithstanding the ALJ’s assessment that Plaintiff had mild limitations across these . . . mental accounting for his mental deficits. Such an omission constituted material legal error.” Pl.’s Mot. at 6. 1. Legal Standard A claimant’s residual functional capacity is an assessment of “the extent to which an individual’s medically determinable impairment(s), including any related symptoms, such as pain, may cause physical or mental limitations or restrictions that may affect his or her capacity to do work-related physical and mental activities.” *Laborin v. Berryhill*, 867 F.3d 1151, 1153 (9th Cir. 2017) (citing SSR 96-8p). It “is the most [a claimant] can still do despite [his or her] limitations.” *Id.* (citing 20 C.F.R. § 416.945(a)(1)). The “scope of the RFC plays a crucial role in the ALJ’s determination of whether an individual is disabled and entitled to benefits under the Social Security Act.” *Id.* “The ALJ is required to consider all of the limitations imposed by the claimant’s impairments, even those that are not severe. Even though a non-severe impairment standing alone may not significantly limit an individual’s ability to do basic work activities it may — when considered with limitations or restrictions due to other impairments — be critical to the outcome of a claim.” *Carmickle v. Comm’r of Soc. Sec.*, 533 F.3d 1155, 1164 (9th Cir. 2008) (cleaned up) (citing *Social Security Ruling 96-8p*). 2. Analysis In determining the severity of Plaintiff’s impairments, the ALJ found Plaintiff had mild mental limitations at step two of the sequential evaluation. The ALJ determined Plaintiff’s “medically determinable mental impairment of anxiety disorder does not cause more than

minimal 21 limitation in the claimant's ability to perform basic mental work activities and is therefore 22 nonsevere." AR 69. In making this finding, the ALJ considered the broad functional areas of 23 mental functioning set out in the disability regulations for evaluating mental disorders and in the 24 Listing of Impairments (20 C.F.R., Part 404, Subpart P, Appendix 1), which are known as the 25 "paragraph B" criteria." AR 69-70. The ALJ stated that her step two determination was "not a 26 residual functional capacity assessment," which she recognized "requires a more detailed 27 assessment" based on the paragraph B mental function analysis. AR 70. She explained her RFC 1 analysis." Id. 2 Plaintiff argues "the ALJ's finding that Plaintiff had mild mental limitations at step two of 3 the sequential evaluation should have translated into at least some mental work restrictions with 4 regard to his capacity for complex work, maintaining concentration and persistence over an 8-hour 5 workday, and adapting to significant changes in routine or work processes." Pl.'s Mot. at 7-8. In 6 support of his argument, he cites *Hutton v. Astrue*, 491 Fed. App'x 850 (9th Cir. 2012). In *Hutton*, 7 the Ninth Circuit held that an ALJ erred because he did not adequately consider the claimant's 8 mild mental limitations arising from his PTSD when he was determining the claimant's residual 9 functional capacity. Id. at 850-51 (citing 20 C.F.R. § 404.1545(a)(2) ("We will consider all of 10 your medically determinable impairments of which we are aware, including your medically 11 determinable impairments that are not 'severe.'"). The Court found that "while the ALJ was free 12 to reject [the claimant's] testimony as not credible, there was no reason for the ALJ to disregard 13 his own finding [the claimant's] nonsevere PTSD caused some "mild" limitations in the areas of 14 concentration, persistence, or pace." Id. at 851. "Numerous courts in this Circuit have followed 15 *Hutton* and found reversible error where the ALJ failed to include mild mental limitations found at 16 step two in the assessment of the claimant's RFC." *Kari P. v. Saul*, 2020 WL 6889202, *8 (S.D. 17 Cal. Nov. 23, 2020) (collecting cases). 18 Here, unlike the ALJ in *Hutton*, the ALJ did consider Plaintiff's mild mental limitations in 19 determining his RFC. Specifically, the ALJ considered Plaintiff's mental limitations but found 20 them nonsevere based on (1) the state agency psychological consultants' opinions, who 21 "determined that the claimant's mental impairments are nonsevere"; (2) "the overall record, which 22 shows no significant mental health treatment"; and (3) Plaintiff's "own testimony that he does not 23 have any disabling symptoms associated with mental impairments." AR 73; see AR 44 ("No 24 mental medically determinable impairments established"); AR 45 ("No reported mental limitations 25 by CLMT."); AR 57 (mental disorders "Non Severe"); AR 57-58 (finding no paragraph B 26 limitations); AR 60 ("No MRFCs [Mental Residual Functional Capacity] are associated with this 27 claim."); AR 1520 ("Patient reports he felt nervous and he has history of anxiety. He feels better 1 A review of the record supports this finding, as none of the medical providers in the record 2 supported greater limitations than what the ALJ included in the RFC finding. An ALJ rationally 3 relies on specific imperatives regarding a claimant's limitations that are supported by the record. 4 *Rounds v. Comm'r Soc. Sec. Admin.*, 807 F.3d 996, 1006 (9th Cir. 2015) (citation omitted). "In 5 addition, the ALJ is responsible for translating and

incorporating clinical findings into a succinct RFC.” Id. (citing *Stubbs–Danielson v. Astrue*, 539 F.3d 1169, 1174 (9th Cir. 2008)). As such, the Court finds substantial evidence supports the ALJ’s RFC determination, and the decision must be affirmed on this ground. D. Past Relevant Work Finally, Plaintiff argues the ALJ erred in finding he could perform his past relevant work as a computer programmer. Pl.’s Mot. at 9. However, as discussed above, the ALJ failed to provide clear and convincing reasons for discounting Plaintiff’s allegations of upper extremity dysfunction. Because the ALJ’s consideration of Plaintiff’s ability to perform past relevant work is likely connected to Plaintiff’s allegations of upper extremity dysfunction, the Court remands this issue as well. E. Remedy The remaining question is whether to remand for further administrative proceedings or for the immediate payment of benefits. The Social Security Act permits courts to affirm, modify, or reverse the Commissioner’s decision “with or without remanding the cause for a rehearing.” 42 U.S.C. § 405(g); see also *Garrison*, 759 F.3d at 1019. “[W]here the record has been developed fully and further administrative proceedings would serve no useful purpose, the district court should remand for an immediate award of benefits.” *Benecke v. Barnhart*, 379 F.3d 587, 595 (9th Cir. 2004). However, “[r]emand for further proceedings is appropriate where there are outstanding issues that must be resolved before a disability determination can be made, and it is not clear from the record that the ALJ would be required to find the claimant disabled if all the evidence were properly evaluated.” *Luther v. Berryhill*, 891 F.3d 872, 877–78 (9th Cir. 2018) (citations omitted). It is only “rare circumstances that result in a direct award of benefits” and 1 evidence within the record supported the reasons provided by the ALJ for denial of benefits.” 2 *Leon vy. Berryhill*, 880 F.3d 1041, 1047 (9th Cir. 2017). 3 Here, the ALJ failed to fully and fairly develop the record when evaluating Plaintiff’s 4 || disability claim, but it is not clear that the ALJ would be required to find Plaintiff disabled. 5 Accordingly, remand for further proceedings consistent with this order is appropriate.

6 VI. CONCLUSION

7 For the reasons stated above, the Court GRANTS Plaintiffs motion and DENIES 8 Defendant’s cross-motion. This matter is REMANDED for further administrative proceedings 9 consistent with this order. The Court shall enter a separate judgment, after which the Clerk of 10 || Court shall terminate the case. 11 IT IS SO ORDERED. 12 13 Dated: October 14, 2025 =

THOMAS S. HIXSON

15 United States Magistrate Judge 16 17 Z 18 19 20 21 22 23 24 25 26 27 28