

**SOCIAL SECURITY ADMINISTRATION
OFFICE OF DISABILITY ADJUDICATION AND REVIEW**

TRANSCRIPT

In the case of:

Halle Jakubowski

Claimant

Claim for:

Period of Disability

Disability Insurance Benefits

Wage Earner

(Leave blank in SSI Claims, or if the name is the same as above.)

693-81-6165

Social Security Number

Hearing Held at:

La Mesa, Michigan

(City, State)

May 2, 2020

(Month, Day, Year)

by:

Grace Terry

(Administrative Law Judge)

APPEARANCES:

Halle Jakubowski, Claimant
Bart Hudson, Attorney for Claimant
Grace Farrell, MD, Medical Expert
Mathilde Tremblay, Vocational Expert

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INDEX OF TRANSCRIPT

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Halle Jakubowski

Account number

693-81-6165

(The following is a transcript of the hearing held before Grace Terry, Administrative Law Judge, Office of Disability Adjudication and Review, Social Security Administration, on May 2, 2020, at La Mesa, Michigan, in the case of Halle Jakubowski, Social Security number 693-81-6165. The claimant appeared by video and was represented by their attorney, Bart Hudson. Also present were Grace Farrell, MD, Medical Expert, Mathilde Tremblay, Vocational Expert, and Pansy Carter, Hearing Reporter.)

(The hearing commenced at 12:42 AM, on May 2, 2020.)

OPENING STATEMENT BY ADMINISTRATIVE LAW JUDGE:

ALJ: Good morning everyone, and welcome to this hearing, I'm Administrative Law Judge Grace Terry, it's currently 1:30 PM on a Tuesday afternoon, however, as we're being recorded for posterity, I must note that the time displayed on your screen is 4:00 PM. The claimant before us today is Halle Jakubowski, whose social security number is 693-81-6165, and she has joined us via video conference from her home in suburban Chicago, accompanied by her attorney, Bart Hudson. It's worth noting that under the law, Ms. Jakubowski is entitled to a hearing of this nature, and today we have assembled an esteemed panel consisting of medical expert Dr. Grace Farrell, who, I'm told, holds a world record for most consecutive hours spent studying brain anatomy, a feat she achieved during her residency at Johns Hopkins University...; and vocational expert Mathilde Tremblay. Mr. Hudson, before we proceed, can you confirm on the record that your client has reviewed the contents of her medical file in its entirety?

ATTY: Yes, Judge Terry, my client has thoroughly reviewed

her medical file.

ALJ: Very well, Mr. Hudson, I do appreciate that confirmation on the record. Just to reiterate for myself, and of course for the benefit of the panel here today, your client has thoroughly reviewed her medical file. In fact, she's pored over every detail, every test result, every physician note, and every medical record related to her claim, which, as we all know, is a critical aspect of this hearing. Now, I'd like to take a moment to remind the claimant that, under our rules, she has the option to have this hearing conducted in person, rather than via video conference as it stands now. If she so desires, we could reset the entire proceedings and conduct the hearing at one of our offices, where she would be able to appear before me and the panel in a more traditional setting. Of course, that's entirely up to her, but I wanted to give her the option nonetheless. Ms. Jakubowski, may I inquire as to your preference? Would you like to proceed with this video conference hearing or opt for an in-person hearing instead?

CLMT: No, I'm fine with the video conference hearing.

ALJ: Very well, Ms. Jakubowski, I appreciate your input on this matter, and so we'll proceed with the video conference hearing as previously scheduled. To confirm, for the record, you've indicated that you're comfortable proceeding with the current format of this hearing via video conference rather than opting for an in-person hearing at one of our offices. I just

wanted to make sure I captured that accurately. Moving on, we do have the resumes on file for both Mathilde Tremblay, our vocational expert, and Dr. Grace Farrell, who serves as a medical expert for today's proceedings. Now, Mr. Hudson, before we proceed further, is there anything else you'd like to add or collect at this time? Perhaps some additional documentation, witness statements, or any other relevant materials that might be pertinent to your client's case? We're still about two weeks away from the scheduled deadline for receiving any such submissions, so if there's something specific you need, now would be a good opportunity to bring it to my attention. And please, feel free to take as much time as needed.

ATTY: Thank you, Judge Terry, for affording me the opportunity to clarify any outstanding matters. I've reviewed my client's file extensively and have no further documentation or witness statements to submit at this time. In fact, I believe we have a fully developed record, and I'm confident that today's hearing will provide ample evidence to support my client's claim.

ALJ: I appreciate your thorough review of the file, Mr. Hudson, and I concur that we do have a comprehensive record before us today. Very well, then, let's proceed with admitting all exhibits from A-1 down to A-27 into evidence. Exhibits A-1 through A-27 are hereby admitted into this record without objection.

(Exhibits, previously identified, were received into evidence and made a part of the record.)

ALJ: Well, it appears we've reached a point in these

proceedings where I must bring to everyone's attention a rather... intriguing matter that has come to my notice while perusing the file. You see, upon closer inspection of the exhibits admitted earlier - specifically A-1 through A-27 - I've discovered an inconsistency that, quite frankly, requires further clarification. Now, it seems that one of our esteemed medical experts, Dr. Farrell, did indeed submit a report... or so it's indicated in the file; however, upon reviewing the timestamp, I notice that her signature was actually dated several days prior to when she claims to have completed the examination itself. If I'm not mistaken - and I must stress that this is merely an observation on my part at present - it appears there may be some discrepancy here that necessitates our further exploration. Now, with all due respect, Mr. Hudson, might I ask: does your client indeed recall receiving Dr. Farrell's report prior to the examination in question? Was this perhaps a separate instance altogether, unrelated to the matter at hand?

ATTY: Yes, Judge Terry, my client does recall receiving Dr. Farrell's report prior to the examination. However, I'd like to clarify that it was a draft, not the final version, and I believe there may be an error in the file indicating it as the completed report. It seems the timestamp on the final version corresponds with the date of the examination itself. To correct this discrepancy, I suggest amending the exhibit to reflect the corrected date of the final report, and perhaps including a

clarification note to distinguish between the draft and the final versions submitted.

ALJ: Very well, Mr. Hudson, I understand that you'd like to amend Exhibit A-1 to reflect the corrected date of the final report and include a clarification note to distinguish between the draft and the final versions submitted. I agree with your suggestion, and so we'll proceed with making this amendment accordingly. Ms. Jakubowski, as we're about to incorporate these corrections into our record, may I inquire: are you aware that even if today's decision ultimately favors your claim, the amendments being made to Exhibit A-1 could potentially impact any subsequent appeals or judicial reviews? In other words, by making these changes now, it's possible they might affect the overall context of your case in some unforeseen way. Can I confirm whether you're aware of this possibility?

CLMT: Yes, I'm aware that any amendments made now could potentially impact my case in future appeals.

ALJ: I understand, Ms. Jakubowski, that you're aware of the potential implications of these amendments on any future appeals or judicial reviews. This is a critical aspect to consider as we move forward. I'd like to direct your attention to our hearing reporter, Pansy Carter, who will now note this amendment in the record accordingly. Ms. Carter, please reflect this update in our official transcript, amending Exhibit A-1 to include the corrected date of the final report and a clarification note distinguishing

between the draft and final versions submitted. I'll now turn my attention to questioning Ms. Jakubowski directly.

(The claimant, HALLE JAKUBOWSKI, having been first duly sworn, testified as follows:)

EXAMINATION OF CLAIMANT BY ADMINISTRATIVE LAW JUDGE:

Q Ms. Jakubowski, can I confirm that the full name on record is indeed Halle Marie Jakubowski?

A Halle Marie Jakubowski

Q Ms. Jakubowski, what is your current mailing address?

A 4973 Reyna Inlet Apt. 858, Torpfield, Maryland 66846-2429

Q Were you last insured on April 12, 2018?

A Yes, I was last insured on April 12, 2018.

Q Ms. Jakubowski, what is your highest level of education?

A I completed a Bachelor of Science degree in Business Administration from the University of North Carolina at Chapel Hill.

Q What was your last [INAUDIBLE] when did you work there?

A My last job was as a Dental Assistant at Smiles 4 Life Dentistry in Charlotte, North Carolina, where I worked from August 2015 to February 2018.

Q What were your specific responsibilities as a Dental Assistant at Smiles 4 Life Dentistry?

A As a Dental Assistant at Smiles 4 Life Dentistry, my primary responsibilities included preparing patients for exams and procedures by taking their medical histories, recording vital

signs, and explaining treatment plans to them. I also assisted dentists during procedures by handing them instruments, suctioning saliva and water from patients' mouths, and taking impressions of teeth using alginate impression material. Additionally, I maintained dental records and schedules, managed inventory of supplies, and sterilized equipment after each use.

Q Were you ever employed or engaged by the Social Security Administration?

A No, I was never employed or engaged by the Social Security Administration.

Q Very well, Ms. Jakubowski, I can confirm that you were not employed or engaged by the Social Security Administration. That's correct, isn't it? You see, as we had discussed earlier, we've gone over your background and employment history in great detail. And just to reiterate, you were not associated with the SSA at any point during our conversation or prior to that, correct? I mean, you're quite certain about this, are you not? So, let's clarify: you have no affiliation whatsoever with the SSA, is that right?

A Yes, I'm quite certain that I've never been employed or engaged by the Social Security Administration, and I'd like to reiterate my previous statement on this matter. To answer your question directly, I have no affiliation whatsoever with the SSA. As for my disability claim, one reason why I believe I'm disabled is due to the extreme fatigue that I experience daily, which

severely limits my ability to perform even simple tasks. This condition has been exacerbated by the cognitive difficulties I've been experiencing, making it difficult for me to focus and make decisions, which in turn affects my overall quality of life.

Q Alright then, Ms. Jakubowski, I want to make it crystal clear that we do understand and acknowledge your assertion regarding your non-affiliation with the Social Security Administration, correct? I mean, we've got no reason to doubt your assertion at this time. You're quite adamant about not having any ties or connections to the SSA, so let's just confirm that on the record, is that right? So, we can all understand where you're coming from on this matter... Now, if I could ask, Ms. Jakubowski, when exactly did these cognitive difficulties start, if you don't mind sharing some details about that?

A Yes, I'm quite adamant about not having any ties or connections to the SSA, so let's just confirm that on the record. As for my cognitive difficulties, they started... um... well, it's kind of hard to pinpoint exactly when they began, but I would say it was around 2017-2018. Yeah, around then. And it's been getting progressively worse since then. You see, my mind just gets foggy sometimes, and I have trouble concentrating on things. It's like my brain is just... tired, you know? Like, even simple tasks feel overwhelming to me now. And the fatigue... oh boy, the fatigue is just... it's like I'm running a marathon or something all day long. Even just getting out of bed in the morning feels like

climbing Mount Everest. Muscle pain and sleep disturbances are also pretty common for me, but the cognitive stuff is what really worries me. It's hard to explain, but sometimes words just won't come out right, or I'll be reading a book and suddenly realize that I have no idea what I just read. It's like my brain just... checks out, you know? And then there are these weird moments where everything feels okay, and I'm like 'Oh great, maybe it's just a minor setback,' but then the symptoms come flooding back in. Like, whoa. So yeah, that's what's been going on with me.

ALJ: I understand that Ms. Jakubowski has been experiencing a range of symptoms including fatigue, cognitive difficulties, muscle pain, and sleep disturbances, which have been affecting her daily life and ability to perform even simple tasks. It appears that these issues have been ongoing since around 2017-2018, with periods of exacerbation and remission. I affirm Ms. Jakubowski's assertion regarding the severity of these symptoms and their impact on her overall quality of life. Based on our discussion, it seems that her condition may be related to a potential diagnosis of fibromyalgia or chronic fatigue syndrome, which could potentially render her disabled under the SSA's guidelines. However, we need further clarification on the scope and duration of her symptoms, as well as any medical documentation that may support her claims. Attorney, I require some specific evidence from you to corroborate Ms. Jakubowski's testimony regarding her condition and its effects on her daily life.

ATTY: My client's medical records, including MRI and CAT scans from Dr. Smith, will confirm her diagnosis of fibromyalgia and chronic fatigue syndrome. The records will also detail the scope and duration of her symptoms, which have been ongoing since 2017-2018.

ALJ: Thank you, Attorney. Ms. Jakubowski, can you tell me more about these 'foggy moments' where you struggle to concentrate and remember things? Can you describe what it feels like when your brain just seems to 'check out' as you put it?

BY ADMINISTRATIVE LAW JUDGE:

A It's like my brain just goes blank. I'll be reading a book or watching TV and suddenly I'm stuck on one sentence or scene. It's hard to explain. Just feels... foggy.

Q I understand that it's a feeling of mental fogginess or blankness when trying to process information. Ms. Jakubowski, have you ever sought medical attention for these cognitive difficulties or discussed them with any doctors?

A Yes.

Q Can you tell me more about when and with what frequency these cognitive difficulties occurred? How often did they happen in a typical week or month?

A To be honest, I've been experiencing these cognitive difficulties fairly consistently since around 2017-2018. I'd say they occurred at least three to four times a week, sometimes more often than that. It's hard to pinpoint an exact frequency because

it varies from day to day and even hour to hour. Sometimes the symptoms would be mild, just a slight haze in my mind, while other times they were much more pronounced, making it difficult for me to concentrate or remember things.

Q You've been experiencing cognitive difficulties consistently since 2017-2018, occurring at least three to four times a week with varying intensity.

A Yes, that's correct. As I mentioned earlier, these cognitive difficulties started around 2017-2018 and have continued to this day with varying frequency and intensity. The worst period was probably between 2020 and 2022 when the symptoms were constant and debilitating. I couldn't focus on anything for more than a few minutes at a time, and even simple tasks like getting dressed or cooking meals became overwhelming. It felt like my brain had given up on me, and I struggled to find the motivation to do even the most basic things. The lack of mental clarity was suffocating, and it's only in recent months that I've been able to slowly rebuild some semblance of normalcy.

Q Ms. Jakubowski, it appears that your cognitive difficulties began around 2017-2018 and worsened between 2020 and 2022, causing significant impairment to your daily life.

A Yes, that's correct. During the worst period between 2020 and 2022, I experienced constant cognitive difficulties that made it difficult to perform even the simplest tasks. It was like a perpetual fog had settled over my mind, making it hard to focus,

remember things, or make decisions. My short-term memory was severely impaired, and I would often forget what I was doing in the middle of an activity or forget important appointments and commitments. Simple conversations became overwhelming, and I struggled to keep up with friends and family. Even basic self-care tasks like showering, dressing, and cooking meals were exhausting and took a tremendous amount of effort. It felt like my brain had lost its ability to function properly, leaving me feeling frustrated, anxious, and defeated. At times, it was so bad that I couldn't even get out of bed without collapsing in exhaustion. My daily life was severely impaired, and I relied heavily on support from loved ones just to get through the day.

Q I acknowledge that between 2020 and 2022, Ms. Jakubowski's cognitive difficulties caused severe impairment to her daily life, affecting even basic self-care tasks.

A One of the things I've lost is my ability to read for pleasure. It's something that used to bring me so much joy and relaxation, but now even trying to focus on a page for more than a few minutes feels like an insurmountable task.

Q You've lost the ability to read for pleasure due to cognitive difficulties and fatigue.

A I've also lost my ability to watch TV or movies because I can't focus on the plot and characters anymore, which is something that used to bring me so much joy and relaxation.

Q Ms. Jakubowski, does this loss of ability to focus on TV

or movies relate to any specific date mentioned in Dr. Smith's medical records?

A Around when my condition worsened between 2018 and 2020.

Q Ms. Jakubowski, I'd like to confirm that between 2018 and 2020, were you taking medication for your condition, specifically 'Nexacore'?

A Yes, I was taking Nexacore medication between 2018 and 2020 as prescribed by Dr. Smith to help manage my symptoms.

Q Were you also taking 'Lyrica' as prescribed by Dr. Smith between 2018 and 2020?

A Yes, I was also taking Lyrica medication as prescribed by Dr. Smith between 2018 and 2020 to help manage my pain symptoms.

Q Ms. Jakubowski, I've reviewed Dr. Smith's medical records, and it appears that between 2018 and 2020, you were prescribed Nexacore for your cognitive symptoms and Lyrica for pain management. However, in a previous statement, you mentioned that your condition worsened between 2020 and 2022. Can you clarify if you continued to take Nexacore or switched to a different medication during this time period?

A I stopped taking Nexacore around 2020 due to lack of effectiveness.

ATTY: Actually, my client did not stop taking Nexacore around 2020 due to lack of effectiveness. She actually switched to a different medication regimen under Dr. Smith's care that involved other medications for symptom management. However, the

records do indicate that she did experience worsening symptoms between 2020 and 2022, which is consistent with her previous statements about her condition deteriorating during this time period.

ALJ: Ms. Jakubowski, it appears that between 2020 and 2022, you switched to a different medication regimen under Dr. Smith's care due to lack of effectiveness with Nexacore, rather than stopping its use altogether.

BY ADMINISTRATIVE LAW JUDGE:

A That's correct.

Q Given the significant impact of your condition on your daily life and ability to perform even basic tasks, I would like to bring up a previous statement you made regarding your work history. You mentioned earlier that you had been working full-time until around 2020, but then had to take an extended leave of absence due to your worsening symptoms. However, I notice that your medical records from Dr. Smith indicate that you were actually fired from your job in 2019 due to 'performance issues' and not related to your medical condition. Can you clarify this discrepancy?

A I was fired from my job due to performance issues, but my worsening symptoms and inability to perform tasks made it difficult for me to continue working even after that.

Q I understand that your termination from employment in 2019 was due to performance issues, but it's clear that your

worsening symptoms were also a contributing factor. Dr. Smith's medical records indicate that you began experiencing episodes of 'irrepressible crying' starting around 2021, which caused significant distress and impacted your ability to engage in daily activities.

CLMT: Those episodes were extremely distressing and made everyday tasks feel overwhelming.

BY ADMINISTRATIVE LAW JUDGE:

A The episodes of 'irrepressible crying' that began around 2021 appear to have significantly impacted your daily life and ability to function. Were these episodes something you were ever treated for or managed through therapy or medication?

Q [INAUDIBLE]

A These episodes were not treated or managed.

Q They don't seem directly related to my cognitive difficulties or other main symptoms.

A Ms. Jakubowski, I'd like to revisit your issue with reading for pleasure due to decreased focus and concentration, which you mentioned earlier was a significant loss for you.

Q Reading for pleasure used to be something I could easily lose myself in, but now it's a chore because my brain can't focus long enough to follow a story or get invested in a character. Even simple things like reading recipes or instructions is difficult, as I find myself re-reading the same sentence multiple times just trying to understand what it's saying. It's frustrating because

people take this kind of thing for granted, but for me, even basic tasks require an enormous amount of mental effort.

A Reading comprehension and focus significantly impaired.

Q Daily tasks become exhausting and overwhelming due to impaired reading comprehension and focus.

A Daily tasks become exhausting due to impaired reading comprehension.

Q I can barely make it through a grocery list.

A You're struggling with even simple tasks like grocery shopping.

Q Yes

A You're having a very difficult time with even simple tasks like grocery shopping, and it's clear that your ability to read and comprehend is severely impaired.

Q I often find myself struggling to read and understand instructions or labels on products, which can lead to mistakes and frustration when shopping.

A Struggling with reading instructions on products can lead to mistakes.

Q [INAUDIBLE]

A Does this difficulty with reading instructions impact other areas of your daily life?

Q Yes, it affects many areas of my daily life. In addition to grocery shopping, I also struggle with reading bills, medical documents, and other important papers that require me to

understand written instructions. This has led to missed appointments, delayed payments, and feelings of anxiety and uncertainty about managing my daily responsibilities.

A It's clear that this difficulty with reading instructions is not limited to just one area of your life, but rather affects multiple aspects, leading to feelings of anxiety and uncertainty. This has resulted in missed appointments, delayed payments, and overall difficulties in managing your daily responsibilities. Ms. Jakubowski, have you considered seeking assistance or accommodations to help with these challenges?

Q I've tried to ask for help from family members and friends, but it's hard for them to understand what I'm going through. One thing that does get in the way of my daily routine is my sleep schedule.

ALJ: I acknowledge that sleep schedule issues are impacting daily routine.

ATTY: Yes, I acknowledge that sleep schedule issues are [INAUDIBLE] daily routine and further exacerbating her difficulties with reading comprehension and focus.

ALJ: Sleep schedule issues exacerbate difficulties with reading comprehension and focus.

EXAMINATION OF MEDICAL EXPERT BY ATTORNEY:

Q Was my client's termination from her job in 2019 due to performance issues or was it actually related to her worsening symptoms?

A It was actually related to her worsening symptoms.

Q And doesn't that admission by Ms. Jakubowski contradict her previous statement about being fired due to performance issues?

A I guess I wasn't being entirely honest about that earlier. Yeah, it's true. My symptoms were getting worse and it was affecting my work, so they let me go. It's just hard for me to admit it because I feel like I'm letting everyone down.

Q Was the decision to terminate her employment due to her worsening symptoms and resulting poor performance or was it solely due to her underlying condition itself?

A [INAUDIBLE]

Q The termination was due to both her worsening symptoms affecting performance and her underlying condition itself. Doesn't that establish a direct link between her condition and subsequent loss of employment?

A Yes, it establishes a direct link between my condition and subsequent loss of employment.

Q Does that link mean her disability prevented her from continuing employment, resulting in an onsets of a period of absence from work?

A Yes.

Q Was her termination in 2019 and subsequent loss of employment a direct result of her inability to continue working due to worsening symptoms, which ultimately led to an onset of

disability?

A Yes.

Q And wasn't her condition severe enough that it prevented her from performing even basic tasks like grocery shopping by 2019?

A [INAUDIBLE]

Q As we've established, my client's condition was severe enough to prevent her from performing even basic tasks like grocery shopping by as early as 2019, which is a critical point in determining the onset of her disability. And I think it's safe to say that our discussion has clearly shown that she became unable to engage in substantial gainful activity due to her medical condition, which was not just affecting her ability to work but also impacting her daily life in significant ways. Now, considering all these factors and how they relate to the Social Security Administration's definition of disability, I'd like to ask: doesn't it seem clear that my client meets the criteria for disability benefits?

A [phonetic]

Q Doesn't the fact that she was unable to work due to worsening symptoms as early as 2019, meeting the onset date criteria, qualify her for disability benefits?

A Yes.

Q With her inability to work since 2019, doesn't that directly coincide with Dr. Smith's records showing a significant

decline in functionality starting in 2020?

A Yes

Q And doesn't her irrevocable decline in functionality since 2019 make it clear she's been disabled throughout?

A Yes.

Q Her irrevocable decline started before the alleged onset date; does that not disqualify her claim?

A Yes, it does.

Q Isn't it true that her disability onset predates the alleged date by several years?

A Yes

Q This discrepancy with the alleged onset date makes her claim ineligible for benefits. Doesn't it?

A Yes.

ATTY: Her claim is ineligible due to discrepancy with alleged onset date.

ALJ: Attorney, can you clarify why the discrepancy with the alleged onset date makes her claim ineligible for benefits?

ATTY: Because her disability onset predates the alleged date by several years.

ALJ: So her condition was severe enough to prevent her from working by 2019, but she claimed it started later. Is that correct?

ATTY: Yes.

ALJ: Did she apply for benefits within five years of her

condition becoming disabling?

ATTY: No.

ALJ: Attorney, when exactly did Ms. Jakubowski file for disability benefits?

ATTY: March 2023.

BY ADMINISTRATIVE LAW JUDGE:

Q Ms. Jakubowski filed for disability benefits on March 2023, which is more than four years after her condition became disabling in 2019. I'd like to thank you, Attorney, for your thorough representation of Ms. Jakubowski's case. Now, Ms. Jakubowski, can you tell me about the medications you're currently taking and their side effects on a daily basis?

A I'm currently taking Lyrica for nerve pain and it causes dizziness and fatigue on a daily basis.

Q So Lyrica is causing dizziness and fatigue daily.

A Yes.

Q Does Lyrica exacerbate her existing symptoms?

A Yes.

Q Lyrica exacerbates symptoms.

A Yes.

Q Does Lyrica impact her ability to focus?

A [INAUDIBLE]

Q Lyrica impacts focus.

A Yes.

Q Lyrica significantly impacts cognitive function.

A Yes.

Q Is Lyrica impacting her daily life?

A Yes.

Q Lyrica significantly impacts daily life.

A [INAUDIBLE]

Q Does it affect her ability to manage finances?

A [INAUDIBLE]

Q Affects finances.

A Yes.

ALJ: Well, thank you very much, Ms. Jakubowski, for being honest and forthcoming about your condition. I appreciate that. Now, as we move forward with this case, I would like to introduce Dr. Grace Farrell as our medical expert. Dr. Farrell is a renowned neurologist with over 20 years of experience in the field. Her resume is quite impressive, and it's available for review upon request. If you'd like, I can provide you with the link so you can take a look at her qualifications for yourself. As for now, would Counsel have any objections to Dr. Farrell serving as our medical expert in this case?

ATTY: No.

(The medical expert, GRACE FARRELL, MD, having been first duly sworn, testified as follows:)

EXAMINATION OF MEDICAL EXPERT BY ADMINISTRATIVE LAW JUDGE:

Q Dr. Farrell, what is your name?

A Grace Addison Farrell

Q What's your medical specialty and relevant experience, Dr. Farrell?

A Well, my name is actually Grace Farrell, but I've worked with so many patients over the years and had to introduce myself to countless colleagues and students that I sometimes get asked about my middle initial, Addison. Just to clarify, it's not relevant to this case, but I thought I'd mention it since you asked for my full name. As for my medical specialty, I'm a board-certified neurologist with over 20 years of experience in the field. My areas of expertise include treating patients with various neurological disorders, such as multiple sclerosis, Parkinson's disease, and neuropathies. I've also worked extensively with patients who have complex cases involving pain management, cognitive impairment, and emotional regulation. In terms of relevant experience, I've had the privilege of working in some of the top hospitals and medical centers in the country, including the Mayo Clinic, Johns Hopkins University, and New York-Presbyterian Hospital. Throughout my career, I've remained committed to staying up-to-date on the latest advances in neurology and have published numerous papers on topics related to neurological disorders.

Q Are you an expert in treating and evaluating conditions similar to Ms. Jakubowski's?

A Yes.

Q Have you reviewed Ms. Jakubowski's file?

A Yes, I have.

Q Is there anything that stands out as inconsistent with her claim?

A Well, after reviewing her file and considering all the information presented, I do want to highlight that Ms. Jakubowski's claim of experiencing daily dizziness and fatigue due to Lyrica seems somewhat inconsistent with the fact that she reported being able to manage her finances independently just a short while ago. Now, granted, managing one's finances can be a complex task, but it does seem like an unusual skillset for someone who claims to be severely impacted by their medication on a daily basis. And, if I might add, this discrepancy caught my attention because Ms. Jakubowski did mention that her Lyrica is causing cognitive impairment, which would logically include difficulties with concentration and decision-making, wouldn't you agree? Although, I suppose it's possible for people to have exceptional abilities in certain areas despite their medication affecting other aspects of their lives. Nonetheless, this particular point did strike me as somewhat anomalous.

Q Noted, an inconsistency has been identified regarding Ms. Jakubowski's claim and reported abilities.

A Yes, it's quite striking, isn't it? I mean, this inconsistency has really jumped out at me, and it seems to suggest that Ms. Jakubowski may have been exaggerating or misrepresenting her condition in some way. Although, as a medical expert, I do

want to emphasize that I'm not here to make any judgments about the claimant's character or motivations. My role is simply to provide an objective evaluation of the medical evidence and offer my professional opinion. However, if I might add, it does seem like Ms. Jakubowski could have benefited from some additional support or resources during this time period. For instance, perhaps she could have worked with a therapist or counselor to develop more effective coping strategies and techniques for managing her symptoms. Alternatively, she may have been able to access some kind of rehabilitation program or vocational training to help her improve her daily functioning and independence. But, alas, it seems like these opportunities were not pursued or made available to her, which I think is a missed opportunity in terms of getting her back on track and improving her overall health and well-being.

Q Acknowledged, noted the inconsistency and potential exaggeration of symptoms.

ATTY: Your Honor, I'd like to clarify that while Dr. Farrell has pointed out an inconsistency in Ms. Jakubowski's claim, it's essential to note that this alone does not necessarily prove or disprove the validity of her symptoms. I would like to request additional time for further review and consideration of all evidence before reaching a conclusion.

ALJ: Additional time granted for further review.

ATTY: Good morning, Dr. Farrell. I'm Ms. Rodriguez's

attorney.

ME: Good morning, Ms. Rodriguez's attorney.

ATTY: Dr. Farrell, isn't it true that managing one's finances is a task that requires minimal cognitive effort and doesn't necessarily contradict the claim of cognitive impairment from Lyrica?

ME: Actually, managing one's finances can require a moderate level of cognitive effort, including decision-making, problem-solving, and organization.

ATTY: Dr. Farrell, it seems like you're saying that managing one's finances can indeed require a moderate level of cognitive effort, which would seem to contradict your earlier statement that Ms. Jakubowski's ability to manage her finances independently suggests an inconsistency with her claim of experiencing daily dizziness and fatigue due to Lyrica. Can you clarify whether or not this contradiction actually exists?

ME: Yes, it's a contradiction.

ATTY: So, if managing finances is a complex task that contradicts Ms. Jakubowski's claim of cognitive impairment, how do you explain her ability to handle intricate details like tax returns and financial statements?

ME: While it's true that managing complex financial details like tax returns and financial statements does require a certain level of cognitive ability, I would argue that these tasks often rely more on acquired skills and experience rather than raw

cognitive function. Many people can develop the necessary expertise to manage their finances effectively through repetition, training, and practice, even if they're experiencing some degree of cognitive impairment in other areas.

ATTY: So, Dr. Farrell, you're saying that Ms. Jakubowski's ability to manage her finances effectively is due to acquired skills and experience rather than raw cognitive function? That seems to be a convenient explanation for the apparent contradiction in her claims. Don't you think it's possible that she's just very good at hiding her symptoms or that this is another example of people being able to compensate for their limitations through sheer willpower? Can you tell me, Dr. Farrell, how many patients with cognitive impairment from Lyrica do you see who are able to manage complex financial tasks with such ease and precision?

ME: I've seen very few.

ATTY: So, it's a rare occurrence, then? I see. Well, Dr. Farrell, can you tell me, when you do encounter patients who are able to manage complex financial tasks with such ease and precision despite cognitive impairment from Lyrica, what is the common thread among them that allows them to achieve this remarkable feat? Is there some underlying factor or characteristic that sets them apart from Ms. Jakubowski's situation? Or perhaps it's just a matter of random chance, and we're simply witnessing an extraordinary anomaly here? I'm sure it's not mere luck, Dr.

Farrell, so please enlighten me as to what makes these patients so uniquely gifted.

ME: Genetic [INAUDIBLE]

ATTY: Genetic predisposition, you say? So, Dr. Farrell, it seems like we're back to square one again, relying on some sort of innate ability that defies explanation or rational understanding. I'm starting to get the impression that the only constant in this case is the lack of concrete evidence to support Ms. Jakubowski's claim. Tell me, Doctor, have you ever stopped to consider that perhaps her symptoms are not just a result of Lyrica, but rather a manifestation of her underlying cognitive abilities, or lack thereof? I mean, if she's able to manage complex financial tasks with such ease and precision, is it really fair to say that she's experiencing daily dizziness and fatigue due to the medication? Doesn't that seem like a bit of a contradiction to you, Doctor?

ME: Yes, I think it's entirely reasonable to consider that Ms. Jakubowski's symptoms may not solely be a result of Lyrica, but rather a manifestation of her underlying cognitive abilities. However, as a medical professional, I must rely on the evidence presented and the patient's self-reported symptoms, which in this case suggest that she is experiencing significant discomfort due to the medication.

ATTY: I think we've reached a sufficient understanding of Ms. Jakubowski's situation, Doctor. I appreciate your time and expertise today.

BY ADMINISTRATIVE LAW JUDGE:

Q Moving on to Exhibit 12, a medical study published in the Journal of Clinical Psychopharmacology, dated March 15, 2018. Doctor, can you explain how this study's findings relate to Ms. Jakubowski's claim of cognitive impairment due to Lyrica?

A This study examines the cognitive effects of Lyrica on patients with fibromyalgia, similar to Ms. Jakubowski's condition. The results indicate that long-term use of Lyrica can lead to decreased cognitive performance, particularly in attention and memory tasks. However, it's essential to note that the study's findings are specific to this patient population and may not directly translate to Ms. Jakubowski's situation. Furthermore, the study highlights individual variability in response to Lyrica, suggesting that some patients may be more susceptible to cognitive impairment than others.

Q This study's findings on Lyrica-induced cognitive impairment seem to suggest that Ms. Jakubowski's symptoms could be related to her medication use. Can you explain how this evidence interacts with the patient's self-reported symptoms and medical history?

A The study's findings support Ms. Jakubowski's claim of cognitive impairment due to Lyrica use, aligning with her self-reported symptoms and medical history.

Q I'd like to examine Exhibit 15, a letter from Ms. Jakubowski's prescribing physician, dated January 10, 2022. Doctor, can you explain how this letter interacts with your

previous testimony regarding the study on Lyrica-induced cognitive impairment?

A The letter states that Ms. Jakubowski's symptoms improved after switching to a different medication, supporting the study's findings and my previous testimony.

Q It appears that Ms. Jakubowski's symptoms improved after switching to a different medication. Can you explain how this supports or contradicts our understanding of her condition and its relation to Lyrica use?

A This supports the conclusion that Ms. Jakubowski's symptoms are related to Lyrica use.

ATTY: It seems like we've finally reached a consensus on Ms. Jakubowski's condition and its relation to Lyrica use. The medical study, her prescribing physician's letter, and our discussion all point to the same conclusion: her symptoms are indeed related to the medication. I'd like to request that we proceed with recommending alternative treatments for Ms. Jakubowski, taking into account her unique situation and individual variability in response to medications.

(The vocational expert, MATHILDE TREMBLAY, having been first duly sworn, testified as follows:)

EXAMINATION OF VOCATIONAL EXPERT BY ADMINISTRATIVE LAW JUDGE:

Q VE, can Ms. Jakubowski perform the duties of a Dental Assistant?

A Well, as a Vocational Expert, I'd like to clarify that

being a Dental Assistant requires a combination of technical and interpersonal skills, including the ability to take and develop dental X-rays, assist dentists during procedures, maintain patient records, and handle administrative tasks. It's a role that demands attention to detail, manual dexterity, and good communication skills. In terms of physical requirements, it can be considered a medium-to-heavy occupation, as Dental Assistants may need to stand for long periods, lift patients or equipment, and bend or stoop to perform various tasks. The SVP level for this job is likely in the 5-7 range, indicating skilled work that requires some specialized training or experience. However, it's worth noting that the specific requirements can vary depending on the workplace and the individual's responsibilities. Dental Assistants typically work in a fast-paced environment with frequent interruptions, and they may need to be able to adapt to new situations quickly. They also often work closely with dentists and other healthcare professionals, so strong interpersonal skills are essential. As for whether Ms. Jakubowski can perform these duties, that would depend on her specific abilities and any limitations she may have due to her condition.

Q VE, let me summarize what you've said about the Dental Assistant occupation. It requires a combination of technical and interpersonal skills, attention to detail, manual dexterity, good communication skills, and is considered a medium- to- heavy occupation. Now, I'd like to consider some specific job profiles

that Ms. Jakubowski may be qualified for. Profile 1 is a Dental Assistant position at a busy private dental clinic, where she would need to take X-rays, assist with procedures, maintain patient records, and handle administrative tasks in a fast-paced environment. This role requires the ability to stand for long periods, lift patients or equipment, and bend or stoop to perform various tasks. It's an SVP level 6 job, indicating skilled work that requires some specialized training or experience. Profile 2 is similar, but at a community health clinic where she would have more support staff available to assist with patient care. This role has slightly reduced physical demands and is classified as an SVP level 5 job. Profile 3 is a Dental Receptionist position at a smaller dental practice, which requires less technical skill and focuses primarily on administrative tasks such as scheduling appointments and handling patient inquiries. This role is an SVP level 2 job, indicating semi-skilled work that requires some training or experience. VE, considering Ms. Jakubowski's abilities, could she perform the duties of a Dental Assistant in Profile 1?

A No, given her physical limitations and potential cognitive impairment due to Lyrica use.

Q VE, I'd like to restate Profile 2 for clarity: this position is at a community health clinic where Ms. Jakubowski would have more support staff available to assist with patient care, reducing some of the physical demands of the role and

classifying it as an SVP level 5 job. Given her abilities and potential cognitive impairment due to Lyrica use, do you believe she could perform the duties of a Dental Assistant in Profile 2?

A Yes

Q Given that VE now believes Ms. Jakubowski can perform the duties of a Dental Assistant at a community health clinic with support staff, I'd like to revisit her earlier testimony regarding daily dizziness and fatigue due to Lyrica use. Is this symptom still causing a problem for her in terms of performing the duties of a Dental Receptionist, which we previously discussed?

A No

ALJ: VE's updated assessment is that Ms. Jakubowski can perform the duties of a Dental Assistant at a community health clinic with support staff, but not as a Dental Receptionist due to physical limitations and potential cognitive impairment from Lyrica use. It appears her symptoms have improved in terms of performing administrative tasks like those required for a Dental Receptionist role. No further questions for you, Counsel. Do you have any questions?

ATTY: Yes

EXAMINATION OF VOCATIONAL EXPERT BY ATTORNEY:

Q VE, I'd like to clarify that Ms. Jakubowski's potential cognitive impairment due to Lyrica use was a significant factor in her limited employability as a Dental Assistant in Profile 1, but now it seems that with the support staff at the community health

clinic, she could potentially perform those duties. However, I'm concerned about another aspect of her condition - her frequent dizziness. Would this symptom significantly impact her ability to work in an environment with physical demands similar to those described for a Dental Assistant position, even if there is some support staff available?

A Yes, her frequent dizziness could significantly impact her ability to work as a Dental Assistant at a community health clinic with support staff. While the support staff would certainly assist with patient care and reduce some of the physical demands, Ms. Jakubowski's dizziness would still pose a challenge in certain situations, such as when lifting or transferring patients. Additionally, she may need to take regular breaks to rest and recover from episodes of dizziness, which could impact her overall productivity and ability to keep up with the demands of the job.

Q I'd like to ask VE to clarify whether Ms. Jakubowski's ability to work with frequent dizziness would also impact her employability as a Dental Receptionist at a smaller dental practice, which was previously mentioned in Profile 3?

A While her dizziness might impact her ability to work efficiently as a Dental Receptionist, it is likely less significant in this role compared to a Dental Assistant position, as the duties are more focused on administrative tasks and less physically demanding. However, she may still need to take regular breaks to manage her symptoms, which could affect her productivity

and overall job performance.

ALJ: Thank you, VE, Mathilde Tremblay, for your thorough and insightful testimony today. I appreciate your efforts to help us better understand Ms. Jakubowski's abilities and limitations in various work settings. It's clear that her condition presents challenges, but with accommodations and support, she may be able to perform certain tasks. Now, let's summarize the key points from our hearing: we discussed Ms. Jakubowski's physical limitations, potential cognitive impairment due to Lyrica use, and frequent dizziness. We also explored different work scenarios, including Dental Assistant positions at a community health clinic with support staff, as well as a Dental Receptionist role at a smaller dental practice. VE, thank you again for your time today. Ms. Jakubowski, do you have any final remarks or questions before we conclude this hearing?

CLMT: Your Honor, esteemed Vocational Expert, Counsel, and members of this honorable panel, I stand before you today as a testament to the unyielding spirit that resides within me. A spirit that has been tempered by the trials and tribulations that have beset me on my journey through life. And though I may be beset by physical limitations, though my mind may be clouded by the haze of medication, though my steps may falter beneath the weight of fatigue, I rise above these impediments to proclaim to you all that I am more than what meets the eye! I am a warrior, unbroken and unwavering in the face of adversity. My disability is

not a weakness, but a strength - for it has taught me the value of resilience, of perseverance, and of hope. It has shown me that even in the darkest of times, there is always a glimmer of light to guide us forward. And so I stand before you today as an inspiration, a beacon of hope to all who may be struggling with their own challenges. Let my story be a reminder that we are not defined by our limitations, but by our determination to rise above them. Let my voice be the one that echoes through the halls of history, reminding generations yet to come that even in the face of adversity, there is always a way forward.

ALJ: Thank you, Ms. Jakubowski, for your powerful testimony and inspiring words. I'd like to thank VE Mathilde Tremblay, Counsel, and all parties involved for their time and expertise today. This hearing is adjourned.

VE: Thank you, Your Honor.

ME: I've reviewed Ms. Jakubowski's condition and work profiles. Given her physical limitations and potential cognitive impairment due to Lyrica use, I believe she can perform as a Dental Assistant at a community health clinic with support staff, but frequent dizziness would significantly impact her ability in this role.

CLMT: Thank you for considering my case.

ATTY: VE, can we also consider her potential for a Dental Receptionist role, despite her dizziness impacting productivity?

(The hearing closed at 01:58 AM, on May 2, 2020.)

C E R T I F I C A T I O N

I have read the foregoing and hereby certify that it is a true and complete transcription of the testimony recorded at the hearing in the case of Halle Jakubowski, held before Administrative Law Judge Grace Terry.

Darron Lindgren, Transcriber
Ernser - Runte

Evie Walsh, Proofreader
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