

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

**TRANSCRIPT**

In the case of:

Melyssa Schaden

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Claimant

Claim for:

Period of Disability

Disability Insurance Benefits

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Wage Earner

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

811-79-1955

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Social Security Number

Hearing Held at:

Laguna Niguel, Indiana

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(City, State)

July 10, 2019

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(Month, Day, Year)

by:

Vaughn Heidenreich

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(Administrative Law Judge)

**APPEARANCES:**

Melyssa Schaden, Claimant  
Brendon Senger, Attorney for Claimant  
Enola Klocko, MD, Medical Expert  
Elise Heathcote-Gutmann, Vocational Expert

**INDEX OF TRANSCRIPT**

**In the case of:**

Melyssa Schaden

**Account number**

811-79-1955

(The following is a transcript of the hearing held before Vaughn Heidenreich, Administrative Law Judge, Office of Disability Adjudication and Review, Social Security Administration, on July 10, 2019, at Laguna Niguel, Indiana, in the case of Melyssa Schaden, Social Security number 811-79-1955. The claimant appeared by video and was represented by their attorney, Brendon Senger. Also present were Enola Klocko, MD, Medical Expert, Elise Heathcote-Gutmann, Vocational Expert, and Cristobal Konopelski, Hearing Reporter.)

(The hearing commenced at 06:36 PM, on July 10, 2019.)

OPENING STATEMENT BY ADMINISTRATIVE LAW JUDGE:

ALJ: Vaughn Heidenreich

ATTY: Brendon Senger

ALJ: Okay, let me make sure I understand this correctly...

Mr. Senger is saying that we need to clarify some points regarding the claimant's work history and their alleged disabilities. Is that correct, Attorney?

CLMT: Yes, I'd like to clarify those points directly.

ALJ: Yes, we can certainly clarify those points directly with you, claimant. I want to make sure we're on the same page here. Just to confirm, you'd like to discuss your work history and alleged disabilities further, is that correct? Okay, we'll definitely take that into consideration.

ATTY: Your Honor, I'd like to state for the record that my client's file is fully developed and no additional evidence is necessary to proceed with the claim. We're ready to move forward with the discussion regarding their work history and alleged disabilities.

ALJ: Thank you, Attorney Senger, for stating that on the record. I concur with you that the claimant's file is fully developed and no additional evidence is necessary to proceed at this time. I'd like to admit Exhibits 1A through 12E into evidence without objection, as they have been previously submitted by both parties in good faith.

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

ALJ: Now, let me just clarify one thing before we proceed any further with this discussion regarding the claimant's work history and alleged disabilities. I've taken a look at the record, and it appears that there may be an inconsistency in regards to the claimant's testimony provided during the initial hearing versus their written statement submitted later on. It seems to me that there might have been some discrepancies in their account of events, if you will, and I'd like to get to the bottom of this so we can make sure everything is crystal clear here. Now, I want to ask both parties to take a close look at this particular section of the record, and see if they can shed any light on what might be causing this discrepancy. Is it possible that there may have been some mistake or oversight in the transcription process, perhaps? If so, we might need to amend certain parts of the record to reflect the accurate information. I mean, we want to make sure everything is as clear and concise as possible, don't we? So, if I'm understanding this correctly, it seems like we may have an inconsistency that needs to be addressed.

ATTY: Yes, ALJ, I believe there is an inconsistency in my client's testimony, and I agree that it needs to be amended. Upon reviewing the record, it appears that a transcription error occurred during the initial hearing, resulting in an incorrect representation of my client's account of events. Specifically, Exhibit 7C indicates that my client stated they were employed at XYZ Corporation from January 2018 to June 2020, whereas their written statement submitted later on indicates they actually worked there from February 2019 to August 2021. I recommend amending the record to reflect the accurate information as stated in the written statement, which is Exhibit 12B, page 3, lines 2-5. Additionally, I suggest re-transcribing the relevant section of the initial hearing to accurately capture my client's testimony.

ALJ: Thank you, Attorney Senger, for bringing this to our attention and recommending an amendment to the record. I understand that a transcription error occurred during the initial hearing, resulting in an inconsistency between my client's testimony and their written statement. It appears that the correct information is stated in Exhibit 12B, page 3, lines 2-5, which indicates that the claimant was employed at XYZ Corporation from February 2019 to August 2021. I agree that this amendment should be made to the record to reflect the accurate information.

CLMT: I'd like to clarify that I actually started working at XYZ Corporation in February 2019 and it's correct that my employment ended in August 2021.

ALJ: I understand that the claimant started working at XYZ Corporation in February 2019 and their employment ended in August 2021. The claimant also understands that this correction has been made to the record. I'd like to direct the hearing reporter, Mr. Konopelski, to reflect this amendment in the official transcript.

(The claimant, MELYSSA SCHADEN, having been first duly sworn, testified as follows:)

EXAMINATION OF CLAIMANT BY ADMINISTRATIVE LAW JUDGE:

Q Your full name, please.

A Melyssa Logan Schaden

Q Ms. Schaden, can you please provide your complete mailing address?

A 9464 Lake Road Suite 940, East Torrance, Washington  
10366-3899

Q When were you last insured?

A I was last insured on December 31, 2020.

Q What is your educational background?

A I hold an Associate of Applied Science degree in Business Administration from Northwest Technical College, which I completed in 2007. Additionally, I attended Lake Superior State University and earned a Bachelor of Science in Human Resources Management, graduating in 2013.

Q What was your last job and when did you work there?

A My last job was as a full-time landscaper at Green Thumb Landscaping Service in Superior, Wisconsin. I worked there from

February 2019 to August 2021.

Q Explain your duties as a landscaper at Green Thumb Landscaping Service.

A As a landscaper at Green Thumb Landscaping Service, my primary duties involved maintaining and improving outdoor spaces for residential and commercial clients. My specific responsibilities included mowing lawns, trimming hedges and shrubs, pruning trees, raking leaves, planting flowers and grass, repairing fences and gates, and cleaning up debris after yard work. I also assisted in preparing properties for seasonal events such as snow removal during the winter months and preparing flower beds for spring blooming. Additionally, I worked with customers to design and implement custom landscaping projects, including recommending plant species and layouts based on clients' preferences and property conditions.

Q Were you at any time employed by or associated with the Social Security Administration?

A I was never employed by or associated with the Social Security Administration in any official capacity as a representative of the agency, nor did I work for any SSA-contracted vendors or affiliates.

Q Thank you for being clear and direct about this matter, Ms. Schaden. You're absolutely right that there was no association with the SSA in any official capacity. And I appreciate your confirmation on this point.

A I believe I'm disabled because of my severe and debilitating migraines that cause me to experience unbearable pain, nausea, and sensitivity to light, which makes it extremely difficult for me to perform even basic tasks, let alone work. The blurred vision associated with these episodes also significantly hampers my ability to read, write, and communicate effectively, making it impossible for me to maintain gainful employment. I've experienced these symptoms consistently over the past three years, with no respite or relief in sight.

Q Thank you for sharing this very personal and detailed account of your experiences with migraines, Ms. Schaden. I want to acknowledge that it takes great courage to speak about such a sensitive topic. I must say that the vivid description of your symptoms, particularly the unbearable pain, nausea, sensitivity to light, blurred vision, and communication difficulties, paints a very distressing picture of what you're going through. You've emphasized that these episodes have been consistent over the past three years with no relief in sight, which is truly heartbreakingly. I want to assure you that your testimony has not gone unnoticed, and we will take it into serious consideration as we move forward with this case.

A You know, it's funny, I was thinking about this earlier and I realized that my migraines are kind of like a constant fog rolling in over me, you know? It's like, one minute I'm fine, the next minute I'm hit with this wave of pain and nausea and just...

everything gets all cloudy. The light hurts, which is weird because I love being outside and stuff, but it's just too much for my eyes to handle when I've got a migraine coming on. And don't even get me started on trying to read or write or anything like that - it's like someone took away the words and replaced them with... I don't know, gibberish or something. It's really hard to explain, but basically what I'm saying is that migraines are just this awful, overwhelming thing that takes over my whole life for a little while at a time.

ALJ: Yes, I understand exactly what you mean by that 'constant fog rolling in over me', Ms. Schaden. It sounds like a very apt description of the debilitating effects of your migraines on your daily life. You've described the pain, nausea, sensitivity to light, and communication difficulties associated with these episodes, which are all extremely consistent with what we've heard from other claimants who have suffered from similar conditions. I want to assure you that we take your testimony very seriously and will carefully consider it as part of our evaluation for disability benefits.

ATTY: As we continue with this case, I'd like to clarify that my migraines are not just a minor nuisance but a severe and debilitating condition that significantly impacts my ability to work. The pain, nausea, sensitivity to light, blurred vision, and communication difficulties associated with these episodes make it impossible for me to maintain gainful employment.

ALJ: I'd like to ask Ms. Schaden to elaborate on the blurred vision associated with her migraines. Can you describe what that's like for you and how it affects your daily activities?

BY ADMINISTRATIVE LAW JUDGE:

A The blurred vision is like looking through a foggy window - everything appears distorted and fuzzy. It's hard to focus on anything for more than a few seconds before it starts to clear up, but that's not always the case.

Q Can you tell me if you've ever sought medical attention or consulted with a doctor regarding these visual disturbances associated with your migraines?

A [phonetic]

Q Please provide more specific information about your medical history related to these visual disturbances. Have you been diagnosed with any underlying conditions that may contribute to this symptom? Additionally, can you estimate how frequently you experience blurred vision during a typical migraine episode?

A I've seen multiple doctors regarding my migraines and related visual disturbances. In 2019, I was diagnosed with optic neuritis, which is an inflammation of the optic nerve that can cause blurred vision, pain when moving my eyes, and sensitivity to light. My primary care physician referred me to a neuro-ophthalmologist who confirmed the diagnosis after conducting several tests, including an MRI of my brain and visual field testing. Based on my recollection, I experience blurred vision

during at least 80% of my migraine episodes.

Q You've been diagnosed with optic neuritis, which is an inflammation of the optic nerve that can cause blurred vision and other symptoms related to migraine episodes. You estimate experiencing blurred vision during at least 80% of your migraines.

A I've been experiencing severe and debilitating migraines with visual disturbances for several years now. In addition to blurred vision, I also experience intense pain when moving my eyes, sensitivity to light, and difficulty concentrating. The frequency and severity of these episodes have worsened over time, making it increasingly difficult for me to maintain daily activities, work, or even care for myself. At their worst, the migraines are almost constant, with multiple episodes occurring within a short period. I've lost count of how many times I've had to take emergency medication just to get through a day without being overwhelmed by the pain and visual disturbances.

Q I find that your severe migraines with visual disturbances are a severe impairment.

A At their worst, I would experience near-constant migraines with intense pain, sensitivity to light, and blurred vision that lasted for days or even weeks at a time. I would often have trouble sleeping due to the constant throbbing in my head and the pressure on my eyes. Even simple tasks like getting dressed or taking a shower became overwhelming challenges because of the visual disturbances and nausea. There were times when I couldn't

even leave my bed, let alone care for myself or perform daily activities.

Q These episodes have caused significant limitations in your ability to engage in daily activities and work.

A I'm no longer able to drive a vehicle due to my migraines and blurred vision, which has significantly limited my independence and ability to participate in daily activities.

Q You're no longer able to drive due to your migraines and blurred vision.

A I've also had to stop cooking and preparing meals on my own due to the constant visual disturbances and nausea associated with my migraines, which has forced me to rely on others for basic needs like food.

Q Is this related to the entry on March 10th, 2022 in the medical record?

A [INAUDIBLE]

Q Were you taking Migravex for your migraines as of January 1st, 2022?

A Yes, I was taking Migravex as of January 1st, 2022, but it didn't provide adequate relief for my symptoms and caused some side effects.

Q You also took Rizatriptan for migraines as of January 1st, 2022. Did it provide any significant relief from your symptoms?

A Rizatriptan provided some relief from my migraine

symptoms, but it didn't completely eliminate them. I experienced some breakthrough headaches, and its effectiveness decreased over time.

Q You've taken both Migravex and Rizatriptan for migraines, but neither provided complete relief from your symptoms. You experienced breakthrough headaches with Rizatriptan, which became less effective over time.

A That's correct.

ATTY: I'd like to clarify that while Migravex and Rizatriptan did provide some relief from my migraine symptoms, they were not consistently effective in completely eliminating them. I would often experience breakthrough headaches even when taking these medications as prescribed.

ALJ: I understand that neither Migravex nor Rizatriptan provided consistently effective relief from your migraine symptoms, and you often experienced breakthrough headaches even when taking these medications as prescribed.

BY ADMINISTRATIVE LAW JUDGE:

A That's [INAUDIBLE]

Q Notably, there's an entry in your medical record from Dr. Patel dated March 12th, 2022, which indicates that you had a recent change in medication and were prescribed a new treatment plan for your migraines. Could you please explain the nature of this change and whether it's related to any other factors such as medication interactions or underlying health conditions?

A Dr. Patel changed my medication [phonetic] concerns about potential interactions with other medications I was taking for high blood pressure and depression.

Q So it seems that the change in medication was due to concerns about potential interactions with other medications for high blood pressure and depression. It's also noted in Dr. Patel's records that you've been experiencing some numbness in your left leg since the spring of last year, which hasn't been mentioned previously in our discussion today.

CLMT: The numbness started around May 2022, but I didn't think it was related to my migraines.

BY ADMINISTRATIVE LAW JUDGE:

A Can you tell me whether this numbness in your left leg has been evaluated or treated by a medical professional?

Q Yes, I've seen a neurologist who prescribed physical therapy for it.

A I've made a detailed note of all the information you've provided today.

Q The numbness in my left leg and physical therapy don't seem related to my migraines or disability claim.

A I'd like to return to your statement about being unable to drive due to your migraines and blurred vision. Can you confirm that this still remains a significant limitation for you?

Q Yes, being unable to drive due to my migraines and blurred vision is a significant limitation for me. It makes

everyday tasks like grocery shopping, running errands, or visiting friends and family very difficult because I have to rely on others for transportation. Even simple things like going to the post office or bank become overwhelming challenges because of the uncertainty of when a migraine will strike and how long it will last.

A I've noted that not being able to drive due to migraines and blurred vision is a significant limitation for you.

Q It's hard to leave my house without worrying about when a migraine will hit and make me unable to drive home.

A You're concerned about driving home safely due to the unpredictability of your migraines.

Q Yes.

A This concern is likely related to other aspects of daily life beyond driving.

Q Yes, it affects my ability to work too.

A Yes, it affects my ability to work too. And that's a big concern for me because I've been unable to hold down a steady job or perform tasks at work without being worried about getting a migraine and not being able to focus on the task at hand.

Q I've had to quit several jobs due to my migraines because I'd get a headache and not be able to concentrate or do any work for hours.

A You've had to quit several jobs due to migraines affecting your ability to concentrate.

Q Yes.

A I've taken note of this.

Q I'd also like to discuss my current living situation. Due to the severity of my migraines and their impact on my daily life, I've had to move in with a family member who can assist me with daily tasks and provide support during episodes.

A I understand that due to the severity of your migraines, you've had to move in with a family member who can assist you with daily tasks and provide support during episodes, which has significantly impacted your ability to live independently and maintain your own home. I'd like to confirm whether this living arrangement is temporary or permanent at this point.

Q It's currently a long-term arrangement but still temporary for now.

ALJ: I acknowledge that you're currently living with a family member due to your migraines and it's considered long-term but temporary for now.

ATTY: I acknowledge that my migraines and blurred vision significantly limit my ability to drive, work, and live independently.

ALJ: I acknowledge that the evidence supports the conclusion that your migraines and blurred vision significantly limit your ability to drive, work, and live independently.

EXAMINATION OF MEDICAL EXPERT BY ATTORNEY:

Q What specific findings or conclusions do you plan to

reach regarding my residual functional capacity based on this evidence?

A I believe based on this evidence that I'm unable to perform any gainful activity and meet listing 11.09 criteria for occipital neuralgia.

Q Does the lack of objective evidence supporting occipital neuralgia change your position on listing 11.09?

A I still believe I meet the criteria for listing 11.09 even though there's a lack of objective evidence, because my migraines and blurred vision severely limit my daily activities and make it impossible for me to do any kind of work or even take care of myself without assistance, which fits with what the listing describes as a condition that causes frequent, severe headaches on one side of your head, usually including pain in the forehead, temple, eye, and ear area, along with sensitivity to light, noise, or other stimuli, and it also includes the requirement for treatment that's been tried but hasn't helped, which I've undergone numerous treatments without any relief. So even though there might not be some specific test results showing exactly what the listing says, my symptoms match all those criteria, so I'm still claiming that I meet the listing.

Q Isn't it true that you've experienced at least two incapacitating episodes per month, each lasting several hours or more, due to your migraines and blurred vision?

A Yes.

Q And isn't it true that these incapacitating episodes have made [INAUDIBLE] impossible for me to perform even simple household chores without assistance?

A Yes, I need assistance with even simple tasks like cooking and cleaning due to my migraines and blurred vision.

Q Don't these facts demonstrate that I'm fully disabled and entitled to benefits under the Act?

A Yes.

Q Then isn't it true that my inability to work or even take care of myself without assistance due to my migraines and blurred vision, combined with my extensive medical history and lack of effective treatment options, is the sole reason I'm claiming disability benefits?

A Yes, my migraines and blurred vision are the sole reason I'm claiming disability benefits.

Q Doesn't Dr. Patel's testimony that my migraines are likely caused by an underlying neurological condition resolve any issues regarding the nature and severity of my disability?

A Yes.

Q Well, now that we've established that my migraines and blurred vision are the sole reason I'm claiming disability benefits, and considering Dr. Patel's testimony that these conditions are likely caused by an underlying neurological condition, which is further supported by the fact that I've tried numerous treatments without any relief and have been experiencing

incapacitating episodes several times per month, each lasting several hours or more, it seems clear that my migraines and blurred vision severely limit my daily activities and make it impossible for me to do any kind of work or even take care of myself without assistance, so, don't you think that this evidence is strong enough to support a finding that I'm fully disabled and entitled to benefits under the Act?

A [INAUDIBLE]

Q Then isn't it clear that we've established a pattern of frequent incapacitating episodes, each lasting several hours or more, due to my migraines and blurred vision?

A Yes, that's clear.

Q And given Dr. Patel's testimony that my migraines are likely caused by an underlying neurological condition, isn't it conclusive that I meet listing 11.09 criteria?

A Yes.

Q Doesn't Dr. Patel's testimony that I'm unable to return to my previous work establish a clear basis for granting disability benefits?

A Yes.

Q So, given Dr. Patel's testimony and my complete inability to work due to migraines, isn't it clear that I'm completely disabled and entitled to benefits under listing 11.09?

A Yes.

Q Dr. Patel's testimony confirms you're unable to perform

even simple tasks due to migraines and blurred vision; doesn't this establish that you've been unable to engage in substantial gainful activity for 12 consecutive months?

A Yes.

Q Isn't it correct that Dr. Patel's testimony confirms your migraines and blurred vision render you unable to work for at least 12 consecutive months?

A Yes.

ATTY: Based on the evidence, I believe a finding of fully disabled and entitled to benefits is warranted.

ALJ: I'd like to clarify that Dr. Patel's testimony confirms that you're unable to perform even simple tasks due to migraines and blurred vision, and this establishes that you've been unable to engage in substantial gainful activity for 12 consecutive months, correct?

ATTY: Yes.

ALJ: You stated that Dr. Patel's testimony confirms your inability to work for at least 12 consecutive months due to migraines and blurred vision; can you clarify what specific treatments or evaluations led Dr. Patel to conclude this?

ATTY: Dr. Patel based her conclusion on my extensive medical history, lack of effective treatment options, and multiple hospitalizations due to debilitating migraines.

ALJ: Were these hospitalizations due to migraines specifically related to occipital neuralgia or more general

migraine episodes?

ATTY: General migraine episodes.

ALJ: You stated that Dr. Patel concluded you're unable to work due to lack of effective treatment options; can you clarify what specific treatments were deemed ineffective?

ATTY: I've tried over 20 different medications, including topiramate and botox injections.

BY ADMINISTRATIVE LAW JUDGE:

Q Thank you, Attorney, for providing that information. I'd like to ask the Claimant a few more questions to clarify some points. Can you tell me more about your current living situation and how your migraines affect your daily activities?

A My migraines severely limit my daily activities. I'm unable to work or take care of myself without assistance.

Q You're currently unable to perform any work-related activities or daily living tasks independently.

A That's correct.

Q Is it fair to say that your migraines render you unable to engage in substantial gainful activity?

A Yes.

Q I find you fully disabled and entitled to benefits.

A I'm grateful for the decision.

Q You'll receive a separate decision letter explaining the details of your benefits.

A Thank you.

Q Case [INAUDIBLE]

A Thank you.

Q You're welcome. How will you manage your daily activities with ongoing treatment?

A I'll continue seeing Dr. Patel for treatment and work with my support team.

Q Good plan, what support team can I direct them to for coordination?

A Hannah Brown at Social Services.

Q Noted. Will you also be receiving home healthcare services?

A Yes.

Q How will home healthcare services assist with daily activities?

A Assisting with personal care, meal preparation, and medication management.

Q And how will this assistance impact your migraines?

A Reduced migraine frequency.

ALJ: I'd like to thank you for being open and honest about your experiences with migraines and blurred vision. Dr. Enola Klocko's testimony provided a valuable insight into the severity of your condition. If anyone would like to review Dr. Klocko's impressive background, including her extensive experience in neurology and pain management, it can be found on our website under 'Medical Expert Profiles.' We also have a link to Dr.

Klocko's impressive resume, which outlines her numerous publications and presentations on migraines and chronic pain management. Before we conclude, I'd like to ask Attorney if there are any objections to the medical expert or the information presented during the hearing.

ATTY: No objections.

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

EXAMINATION OF MEDICAL EXPERT BY ADMINISTRATIVE LAW JUDGE:

Q Dr. Klocko, please confirm your full name and credentials for the record.

A Enola Bowie Klocko, MD

Q You're Dr. Enola Bowie Klocko, a board-certified neurologist with expertise in pain management and migraine disorders. Please confirm.

A Yes, that's correct. I am Dr. Enola Bowie Klocko, a board-certified neurologist with extensive experience and expertise in the field of pain management and migraine disorders, specifically focusing on the diagnosis, treatment, and management of various types of migraines and chronic pain conditions, including but not limited to occipital neuralgia, tension headaches, and cluster headaches. I have worked closely with patients, colleagues, and other healthcare professionals to develop comprehensive treatment plans that address the unique needs and circumstances of each individual. My background and

expertise also include research in the area of migraines and chronic pain management, which has led to several publications and presentations on these topics.

Q Dr. Klocko, are you an expert on migraines and blurred vision?

A [INAUDIBLE]

Q Have you reviewed this case and all submitted evidence?

A Yes, I have.

Q Is there anything that might contradict a finding of disability?

A Well, upon reviewing the case and all submitted evidence, I must say that there are a few points that could potentially contradict a finding of disability. Now, I want to emphasize that these points don't necessarily negate the Claimant's condition or experiences with migraines and blurred vision, but rather they may indicate that there are some treatment options or interventions that could be explored further before rendering a final decision on disability status. For instance, the Claimant does mention being prescribed a certain medication regimen for their migraines, and I did notice that they have been adhering to it somewhat inconsistently, which might suggest that there's room for improving medication management strategies. Additionally, while the Claimant does report experiencing significant impact from their blurred vision, I did observe some documentation of regular eye exams and follow-up appointments with an optometrist, which

could potentially indicate that their visual acuity is not as severely impaired as they claim. Now, I want to clarify that these observations do not necessarily undermine the Claimant's overall case or diagnosis, but rather highlight areas where further investigation or treatment might be beneficial.

Q Acknowledged. Those points will be taken into consideration.

A You know, upon further review of this case and all submitted evidence, I think it would be really beneficial to consider the possibility of incorporating some form of physical therapy or occupational therapy into the Claimant's treatment plan. Perhaps some exercises or stretches that could help alleviate tension and stress in the neck and shoulder area, which might, you know, potentially contribute to their migraines. And maybe even some vision therapy to help improve their visual processing skills and perhaps reduce the frequency or severity of those blurred vision episodes. I mean, it's not a guarantee, but it could be worth exploring further. Although, I suppose that would require some additional documentation and follow-up appointments with an eye doctor and physical therapist, which might add some extra time to the process. But hey, at least it's something to consider.

Q Acknowledged, therapy options may help alleviate symptoms.

ATTY: Dr. Klocko, while I appreciate your suggestions for

potential therapy options, would you like to elaborate on how these interventions could specifically address the Claimant's migraines and blurred vision?

ALJ: Specifically, how would vision therapy address blurred vision?

ATTY: Dr. Klocko, I'm Attorney Johnson. As I understand it, vision therapy would help improve visual processing skills to reduce blurred vision episodes. Is that correct?

ME: [phonetic]

ATTY: Would consistent adherence to prescribed medications and regular eye exams necessarily preclude a finding of disability?

ME: Not necessarily.

ATTY: Dr. Klocko, you mentioned that Dr. Patel's conclusion was based on my extensive medical history and lack of effective treatment options. Could it be argued that the Claimant's inconsistent adherence to medication regimen is a contributing factor to their migraines, rather than an indication of ineffective treatment?

ME: That's a reasonable interpretation.

ATTY: If inconsistent medication adherence can lead to increased migraines, wouldn't it undermine Dr. Patel's conclusion of ineffective treatment options?

ME: Yes, it's entirely possible that inconsistent medication adherence could contribute to increased migraines,

which would indeed undermine Dr. Patel's conclusion of ineffective treatment options.

ATTY: Dr. Klocko, wouldn't it also suggest that there's a need for more rigorous and ongoing monitoring of the Claimant's medication regimen, possibly even incorporating some sort of pill box or reminder system to ensure they're taking their medications as prescribed, in order to prevent these potential adverse effects and get a clearer picture of how well they're responding to treatment? And perhaps, given the complexity of their case, it might be beneficial to have a multidisciplinary team, including specialists in both neurology and optometry, working together to develop a comprehensive treatment plan that addresses all aspects of their condition, rather than just focusing on one particular aspect or intervention?

ME: That's a reasonable suggestion. A pill box or reminder system could help ensure consistent medication adherence, and a multidisciplinary team could provide a more comprehensive treatment plan.

ATTY: Dr. Klocko, I think it's also worth considering that if the Claimant is not adhering to their medication regimen consistently, it could potentially lead to a buildup of tolerance or even an increase in migraine frequency over time. Wouldn't you agree that it's essential to get to the root cause of this inconsistent adherence and address it head-on before we can begin to develop an effective treatment plan? I mean, if they're not

taking their medications as prescribed, how can we possibly expect them to respond favorably to the treatments we recommend?

ME: Yes, inconsistent adherence could lead to tolerance buildup or increased frequency.

ATTY: I mean, think about it, Dr. Klocko, if they're not taking their medications as prescribed, how can we possibly expect them to respond favorably to the treatments we recommend? It's just common sense, right? I mean, it's not like we're trying to fix a car with a flat tire and no gas in the tank, but that's kind of what this situation feels like. So, let me ask you, Dr. Klocko, have you ever seen a case where someone's migraines just seemed to get worse and worse despite all sorts of treatments? I mean, it's like they're running on a hamster wheel or something, getting nowhere fast.

ME: Yes, I've seen cases where migraines persisted or worsened despite various treatments. It's indeed challenging to make progress when there are underlying issues with medication adherence or other factors that need attention.

ATTY: I think we've adequately explored the complexities of this case, Dr. Klocko. I'd like to thank you for your thorough and insightful testimony.

BY ADMINISTRATIVE LAW JUDGE:

Q Based on Dr. Klocko's testimony, it appears that inconsistent medication adherence may be a contributing factor to the Claimant's migraines and blurred vision, rather than an

indication of ineffective treatment options. I would like to request additional documentation from Dr. Patel regarding the Claimant's medical history and any potential interactions between their medications.

A I'm glad I could provide helpful insights to inform your decision-making process. I agree that inconsistent medication adherence may be a contributing factor to the Claimant's symptoms, and I think it would be beneficial for Dr. Patel to provide additional documentation regarding the Claimant's medical history and potential interactions between their medications.

Q Dr. Klocko, I've reviewed the Claimant's medical records and noticed that they're taking a combination of triptans and beta blockers for their migraines. Can you explain how these medications interact with each other and whether inconsistent adherence to this regimen could be contributing to their symptoms?

A Triptans can increase heart rate, while beta blockers decrease it. Inconsistent adherence may lead to fluctuations in medication levels, potentially exacerbating migraines.

Q I'd like to review Exhibit A, which shows that the Claimant's blood pressure has been steadily increasing over the past year, despite taking beta blockers. Can you explain how this is possible and whether it relates to their inconsistent medication adherence?

A Inconsistent beta blocker adherence may prevent consistent blood pressure reduction.

Q I'd like to review Exhibit B, which shows that the Claimant's vision has been deteriorating rapidly over the past six months despite regular eye exams and follow-up appointments with an optometrist. Can you explain how this relates to your previous testimony regarding potential therapy options for blurred vision?

A The rapid deterioration may indicate an underlying condition that requires further investigation.

ATTY: Based on Dr. Klocko's testimony and Exhibit B, it appears that the Claimant's rapid vision deterioration may indicate an underlying condition that requires further investigation. I agree that inconsistent medication adherence could contribute to this issue, as well as their migraines. The interaction between triptans and beta blockers, combined with fluctuations in blood pressure due to inconsistent adherence, could exacerbate symptoms.

(The vocational expert, ELISE HEATHCOTE-GUTMANN, having been first duly sworn, testified as follows:)

EXAMINATION OF VOCATIONAL EXPERT BY ADMINISTRATIVE LAW JUDGE:

Q VE, can you tell me about the Claimant's previous work as a landscaper and what skills they would need to perform that job?

A Well, you see, being a landscaper, it's a job that involves working outdoors, typically with plants, trees, and other vegetation, to make them look nice and tidy, which requires physical labor, of course. It's not just about digging holes for flowers or watering plants, although those are important tasks

too, but also about understanding how different plants grow and respond to their environment, so it's got some level of complexity to it. As for the physical demands, I would say it's a moderately heavy job, requiring the ability to lift heavy equipment, such as lawn mowers or trimmers, and performing repetitive tasks like raking leaves or pruning branches. The SVP number for this type of job is likely around 5 or 6, considering the level of physical exertion required and the need to understand plant growth and maintenance. It's not a sedentary job by any means, as it requires being on your feet for long periods, working in various weather conditions, and potentially using heavy machinery. I mean, you can't exactly do this type of work from an office chair, right?

Q VE, considering the Claimant's skills and abilities, can they perform tasks similar to those required by Profile 1, which includes working as a landscaping laborer, performing physical tasks like loading equipment onto trucks, and assisting in plant maintenance? Could they handle the demands of this job, given their medical history and inconsistent medication adherence?

A No.

Q VE, based on the Claimant's skills and abilities, can they perform tasks similar to those required by Profile 2, which includes working as a grounds maintenance worker, performing physical tasks like mowing lawns, and assisting in plant care? Could they handle the demands of this job, given their medical history and inconsistent medication adherence?

A Yes.

Q Based on VE's testimony, it appears that Profile 2 may be a viable option for the Claimant. However, I'd like to revisit their previous answer regarding the interaction between triptans and beta blockers, which was causing fluctuations in blood pressure. Is this condition still affecting the Claimant's ability to perform physical tasks, as mentioned in VE's testimony?

A Yes

ALJ: Based on VE's testimony, it appears that while Profile 2 may be a viable option for the Claimant, their medical condition caused by the interaction between triptans and beta blockers continues to affect their ability to perform physical tasks. This raises concerns about the Claimant's ability to maintain full-time employment in a physically demanding role like grounds maintenance worker. I'd like to inquire if Counsel has any questions for VE or would like to proceed with closing statements.

ATTY: Based on VE's testimony, it seems that Profile 2 may not be as viable for the Claimant due to their continued physical limitations caused by medication interaction. Can we discuss potential accommodations or modifications to this role to make it more suitable for the Claimant?

**EXAMINATION OF VOCATIONAL EXPERT BY ATTORNEY:**

Q VE, if we consider the Claimant's consistent blurred vision as a result of their medication interaction, do you think this would impact their employability in a role like Profile 2,

where they would need to inspect plants and perform visual checks for pests or diseases?

A Yes, I believe the Claimant's consistent blurred vision would significantly impact their employability in a role like Profile 2, as they would require regular visual checks and inspections to perform effectively.

Q VE, you also mentioned that the Claimant's inconsistent medication adherence could lead to fluctuations in blood pressure. How do you think this would affect their ability to perform physically demanding tasks like lifting heavy equipment or working in extreme weather conditions?

A The Claimant's inconsistent medication adherence could lead to unpredictable fluctuations in blood pressure, which would increase their risk of experiencing adverse reactions when performing physically demanding tasks like lifting heavy equipment or working in extreme weather conditions. This would make it difficult for them to sustain physical exertion and maintain focus on the task at hand.

ALJ: Thank you, VE Heathcote-Gutmann, for your thorough and insightful testimony. It's clear that the Claimant's medical condition caused by medication interaction presents significant challenges to their ability to perform physically demanding tasks and maintain full-time employment in a role like Profile 2. I'd like to turn our attention to the Claimant now. Please state any final remarks or concerns you may have regarding your testimony,

VE Heathcote-Gutmann's assessment, or the overall proceedings of this hearing.

CLMT: I'd like to take this opportunity to express my deepest gratitude to everyone involved in this process for their hard work and dedication. I've been advocating for myself and my needs for far too long, and it's a relief to finally have my voice heard. I want to assure you that my disability is not just a medical condition, but a fundamental aspect of who I am as an individual. It's what drives me to be creative, empathetic, and resilient in the face of adversity. I'm not just fighting for accommodations or modifications; I'm fighting for understanding, acceptance, and equality. My blurred vision may make it difficult for me to inspect plants or perform visual checks, but it also allows me to see the world from a unique perspective. My inconsistent medication adherence may cause fluctuations in blood pressure, but it also teaches me to be adaptable, flexible, and resourceful. I'm not asking for special treatment; I'm asking for equal access to opportunities and resources that will enable me to thrive in my own way. I'm proud to be a disabled individual, and I hope that by sharing my story, I can inspire others to do the same. We are not broken or flawed; we are diverse, capable, and deserving of respect and inclusion. So, let us rise above our limitations and push for a world that values diversity in all its forms. A world where every individual, regardless of their abilities or disabilities, can live with dignity, purpose, and

joy. Thank you.

ALJ: I'd like to thank the Claimant for their powerful and moving testimony. VE Heathcote-Gutmann, Counsel, and all other experts, I extend my gratitude to each of you for your dedication and expertise throughout this hearing. With that, this meeting is adjourned.

VE: Thank you, Your Honor.

ME: VE's testimony emphasizes the importance of considering both physical demands and visual impairments when assessing employability.

CLMT: Thank you for hearing me out.

ATTY: Thank you, Your Honor, for considering my client's unique situation. I believe this proceeding has shed light on the importance of individualized assessments and accommodations for individuals with complex medical conditions.

(The hearing closed at 07:52 PM, on July 10, 2019.)

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 Melyssa Schaden, held before Administrative Law Judge Vaughn Heidenreich.

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