

Step 2—Does the Individual Have a Severe Impairment?

At step 2 of the sequential evaluation process, a determination is made about whether an individual has a medically determinable impairment and whether the individual's medically determinable impairment—or combination of impairments—is “severe.” An individual who does not have an impairment or combination of impairments that is “severe” will be found not disabled.

An impairment(s) is considered “severe” if it significantly limits an individual's physical or mental abilities to do basic work activities. An impairment(s) that is “not severe” must be a slight abnormality, or a combination of slight abnormalities, that has no more than a minimal effect on the ability to do basic work activities. It is incorrect to disregard an impairment or consider it to be “not severe” because the impairment's effects are “normal” for a person of that age.

As in any claim, adjudicators must consider signs, symptoms, and laboratory findings when determining whether an individual aged 65 or older has a medically determinable impairment (see 20 CFR 404.1508 and 404.1528, and 416.908 and 416.928). The likelihood of the occurrence of some impairments increases with advancing age; e.g., osteoporosis, osteoarthritis, certain cancers, adult-onset diabetes mellitus, impairments of memory, hypertension, and impairments of vision or hearing. Adjudicators are required to consider any impairment(s) the individual has, including impairments like the ones listed above that are often found in older individuals. It is incorrect to disregard any of an individual's impairments because they are “normal” for the person's age.

When an individual has more than one medically determinable impairment and each impairment by itself is “not severe,” adjudicators must still assess the impact of the combination of those impairments on the individual's ability to function. A claim may be denied at step 2 only if the evidence shows that the individual's impairments, when considered in combination, are “not severe”; i.e., do not have more than a minimal effect on the individual's physical or mental ability(ies) to perform basic work activities.

Special Rule for Individuals Applying for Title XVI Benefits Who Are Aged 72 or Older. Generally, we use step 2 of the sequential evaluation process as a “screen” to deny individuals with impairments that would have no more than a minimal effect on their ability to

work even if we considered their age, education, and work experience. However, with advancing age, it is increasingly unlikely that individuals with medically determinable impairments will be found to have minimal limitations in their ability to do basic work activities. By age 72, separate consideration of whether an individual's medically determinable impairment(s) is “severe” does not serve the useful screening purpose that it does for individuals who have not attained age 72. Therefore, if an individual aged 72 or older has a medically determinable impairment(s), that impairment(s) will be considered to be “severe,” and evaluation must proceed to the next step of the sequential evaluation process.

Step 3—Does the Individual Have an Impairment(s) That Meets or Equals an Impairment Listed in Appendix 1? When an individual has a severe impairment(s) that meets or medically equals the requirements for one of the impairments in the Listing of Impairments in appendix 1 to subpart P of 20 CFR part 404 and meets the duration requirement, the individual is disabled.

When Disability Cannot Be Found at Step 3—Assessing Residual Functional Capacity. When the individual does not have an impairment(s) that meets or equals the requirements for a listed impairment, the adjudicator is required to assess the individual's residual functional capacity (RFC). The RFC assessment is an adjudicator's finding about the ability of an individual to perform both physical and mental work-related activities despite his or her impairment(s). The assessment considers all of the individual's medically determinable impairments, including those that are “not severe,” and all limitations or restrictions caused by symptoms, such as pain, that are related to the medically determinable impairment(s). The assessment is based upon consideration of all relevant evidence in the case record, including medical evidence and relevant nonmedical evidence, such as observations of lay witnesses of an individual's apparent symptomatology, or an individual's own statement of what he or she is able or unable to do.

When assessing RFC in an initial claim, an adjudicator should not find that an individual has limitations or restrictions beyond those caused by his or her medically determinable impairment(s). Limitations or restrictions due to factors such as age, height, or whether the individual has ever engaged in certain activities in his or her PRW (e.g., lifting heavy weights)

are, per se, not considered in assessing RFC. (See SSR 96–8p, “Titles II and XVI: Assessing Residual Functional Capacity in Initial Claims.”)

Step 4—Does the Individual Have an Impairment(s) That Prevents Him or Her from Performing Past Relevant Work (PRW)? The RFC assessment discussed above is first used at step 4 of the sequential evaluation process to determine whether the individual is capable of doing PRW. The rules and procedures we use to make this determination for individuals under age 65 are also applicable to individuals aged 65 or older. This includes consideration of whether the individual can perform his or her PRW as he or she actually performed it or as it is generally performed in the national economy. If the individual's PRW was performed in a foreign economy, we will generally consider only whether the individual can perform his or her PRW as he or she described it. However, if the work the individual did in a foreign economy also exists in the United States, we will consider whether he or she can perform the work as it is generally performed in the national economy. If the individual can perform his or her PRW, he or she will be found not disabled. (See SSR 82–40, “Titles II and XVI: The Vocational Relevance of the Past Work Performed in a Foreign Country.”)

Step 5—Can the Individual Do Other Work? The last step of the sequential evaluation process requires us to determine whether an individual can do other work considering his or her RFC, age, education, and work experience.

Special Medical-Vocational Profiles Showing an Inability to Make an Adjustment to Other Work. If the individual's impairment(s) does preclude the performance of PRW, or if the individual does not have PRW, two special medical-vocational profiles must be considered before referring to appendix 2 to subpart P of 20 CFR part 404. The special profiles are discussed in SSR 82–63, “Titles II and XVI: Medical-Vocational Profiles Showing an Inability to Make an Adjustment to Other Work.”

The “arduous unskilled physical labor” profile applies when an individual:

- Is not working;
- Has a history of 35 years or more of arduous unskilled physical labor¹;
- Can no longer perform this past arduous work because of a severe impairment(s); and

¹ Training, or isolated, brief, or remote periods of semiskilled or skilled work will not preclude a finding of arduous, unskilled work, if such training or experience did not result in skills that enable the individual to adjust to other work.