

# RESIDUAL FUNCTIONAL CAPACITY

## PHYSICAL RESIDUAL FUNCTIONAL CAPACITY ASSESSMENT

### RFC1

Indicate whether this Physical Residual Functional Capacity (RFC) assessment is for:

Current Evaluation

Does the individual have exertional limitations?

Yes

Rate the individual's exertional limitations:

Occasionally (occasionally is cumulatively 1/3 or less of an 8 hour day) lift and/or carry (including upward pulling):

20 pounds

Frequently (frequently is cumulatively more than 1/3 up to 2/3 of an 8 hour day) lift and/or carry (including upward pulling):

10 pounds

Stand and/or walk (with normal breaks) for a total of:

About 6 hours in an 8-hour workday

Sit (with normal breaks) for a total of:

About 6 hours in an 8-hour workday

Push and/or pull (including operation of hand and/or foot controls):

Unlimited, other than shown, for lift and/or carry

Does the individual have postural limitations?

No

Does the individual have manipulative limitations?

Yes

Rate the individual's manipulative limitations:

Reaching any direction (including overhead):

Unlimited

Handling (gross manipulation): Limited

Right

Fingering (fine manipulation): Limited

Right

Feeling (skin receptors): Unlimited

Explain manipulative limitations and how and why the evidence supports your conclusions. Cite specific facts upon which your conclusions are based (include the extent to which the function can be performed - e.g., constant, frequent, occasional, never, etc.):

Handling/fingering limited to frequent due to c/o hand pain.

Does the individual have visual limitations?

No  
**Does the individual have communicative limitations?**

No  
**Does the individual have environmental limitations?**

MC/PC or SDM Signature

## MENTAL RESIDUAL FUNCTIONAL CAPACITY ASSESSMENT

### MRFC1

**Indicate whether this Mental Residual Functional Capacity (MRFC) assessment is for:**

Current Evaluation

The questions below help determine the individual's ability to perform sustained work activities. However, the actual mental residual functional capacity assessment is recorded in the narrative discussion(s) in the explanation text boxes.

**Does the individual have understanding and memory limitations?**

No

**Does the individual have sustained concentration and persistence limitations?**

Yes

### Rate the individual's sustained concentration and persistence limitations:

**The ability to carry out very short and simple instructions.**

Not significantly limited

**The ability to carry out detailed instructions.**

Not significantly limited

**The ability to maintain attention and concentration for extended periods.**

Not significantly limited

**The ability to perform activities within a schedule, maintain regular attendance, and be punctual within customary tolerances.**

Moderately limited

**The ability to sustain an ordinary routine without special supervision.**

Not significantly limited

**The ability to work in coordination with or in proximity to others without being distracted by them.**

Not significantly limited

**The ability to make simple work-related decisions.**

Not significantly limited

**The ability to complete a normal workday and workweek without interruptions from psychologically based symptoms and to perform at a consistent pace without an unreasonable number and length of rest periods.**

Moderately limited

**Explain in narrative form the sustained concentration and persistence limitations indicated above:**

Her depression with accompanying low energy would interfere with her ability to maintain regular attendance and to persist through a normal workweek. However, this impairment is not so severe that it would prevent her from being able to sustain more than one or two step instructions in a reasonably consistent manner.

**Does the individual have social interaction limitations?**

Yes

**Rate the individual's social interaction limitations:**

**The ability to interact appropriately with the general public.**

Moderately limited

**The ability to ask simple questions or request assistance.**

Not significantly limited

**The ability to accept instructions and respond appropriately to criticism from supervisors.**

Not significantly limited

**The ability to get along with coworkers or peers without distracting them or exhibiting behavioral extremes.**

Not significantly limited

**The ability to maintain socially appropriate behavior and to adhere to basic standards of neatness and cleanliness.**

Not significantly limited

**Explain in narrative form the social interaction limitations indicated above:**

Clmt should have limited public contact. She would retain an ability to interact appropriately with supervisors and coworkers.

**Does the individual have adaptation limitations?**

No

These findings complete the medical portion of the disability determination.

**MC/PC or SDM Signature**

MD. [Signature]