

significant impairment. Lastly, Dr. Crocker reported that the claimant had mild physical impairments related to his injuries and was still slowly progressing. He opined that the claimant was employable and he did not consider him physically disabled (Exhibit 5F).

Dr. Carl Sherrer, a State Agency Medical Consultant, completed a Case Analysis on March 11, 2010. After reviewing all of the evidence as of that date, Dr. Sherrer reported that the claimant's condition is expected to resolve to non-severe in September 2010 (Exhibit 6F).

After careful consideration of the evidence, the undersigned finds that the claimant's medically determinable impairments could reasonably be expected to cause the alleged symptoms; however, the claimant's statements concerning the intensity, persistence and limiting effects of these symptoms are not fully credible to the extent they are inconsistent with the above residual functional capacity assessment.

In terms of the claimant's alleged impairments, the evidence shows that he suffered multiple gunshot wounds to his arms and abdomen. He stated that he is not able to work due to pain in both arms and stomach. The undersigned notes that the claimant showed his scars from the gunshot wounds at the hearing. The wounds were observed to be small and not causing severe limitation, but only some discomfort. Further, the claimant is not severely limited in his activities of daily living. He is able to drive without limitations and able to lift at a full range of light work and possibly at a medium level on occasions. Clearly, he can do other work in the national economy.

As for the opinion evidence, consideration has also been given the reports of the State Agency medical consultants as well as to other treating, examining and non-examining medical sources. Dr. Sherrer, a State Agency Medical Consultant, reported in his case analysis that the claimant's condition is expected to resolve to non-severe (Exhibit 6F). The undersigned concurs and gives his opinion great weight. However, because his opinion is that of a non-examining physician, his opinion is not entitled to controlling weight, but must be considered and weighed as those of highly qualified physicians who are experts in the evaluation of the medical issues in disability claims under the Security Act (SSR 96-6p). Greater weight was placed on the opinions of the physicians that saw, examined and treated the claimant, over that of the State Agency doctors who never saw the claimant. Substantial weight was given to the opinion of Dr. Crocker, who reported that the claimant had mild physical impairments related to his injuries and was still slowly progressing. He opined that the claimant was employable and he did not consider him physically disabled (Exhibit 5F).

In sum, the above residual functional capacity assessment is supported by the evidence of record and the claimant's testimony.

**6. The claimant is unable to perform any past relevant work (20 CFR 404.1565 and 416.965).**

Mr. William Porter, a vocational expert, testified that the claimant's past relevant work is classified as follows: psychiatric aide (medium, semi-skilled); truck driver (medium, semi-skilled); mode machine tender (heavy, semi-skilled); pipe fitter helper (heavy, semi-skilled);