

**NONPRECEDENTIAL DISPOSITION**

To be cited only in accordance with FED. R. APP. P. 32.1

**United States Court of Appeals**

**For the Seventh Circuit  
Chicago, Illinois 60604**

Submitted June 30, 2023\*

Decided July 7, 2023

**Before**

FRANK H. EASTERBROOK, *Circuit Judge*

MICHAEL Y. SCUDDER, *Circuit Judge*

DORIS L. PRYOR, *Circuit Judge*

No. 22-2767

RAVEN GRIFFIN,  
*Plaintiff-Appellant,*

*v.*

KILOLO KIJAKAZI, Acting  
Commissioner of Social Security,  
*Defendant-Appellee.*

Appeal from the United States District  
Court for the Eastern District of Wisconsin.

No. 21-CV-63

Nancy Joseph,  
*Magistrate Judge.*

**ORDER**

Raven Griffin applied for Social Security disability and supplemental security income benefits, alleging that pain, physical problems, and mental ailments left her unable to work. An administrative law judge denied her application after finding that Griffin was able to perform certain light work and was therefore not disabled. The district court affirmed. Substantial evidence supports these rulings, so we also affirm.

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\*We have agreed to decide the case without oral argument because the briefs and the record adequately present the facts and legal arguments, and oral argument would not significantly aid the court. FED. R. APP. P. 34(a)(2)(C).

We begin with her physical issues and pain. In 2014, Griffin's primary care physician diagnosed her with chronic back pain and limited her to "light work" (lifting no more than five pounds) and sitting. Griffin then had three car accidents. After the first, which yielded a concussion, spinal problems, torn ligaments, pain in her neck and back, and headaches, she received physical therapy that reduced pain and the severity and frequency of headaches. She also saw doctors for pain management. The first observed tenderness and spasms along her spine and limits to her range of motion but found that strength and coordination were normal and recommended physical therapy and pain relievers. Two more specialists made similar findings and recommendations. The third noted that Griffin's medical imaging was "unremarkable" with no evidence of fracture or significant degeneration. She did not seek more care from these specialists.

Griffin had two more car accidents. After the second, she reported hand and neck pain to a pain-management doctor, who noted tenderness in her neck, spine, and right hand, as well as "severely compromised" range of motion of her neck and back. He recommended a short time off work, physical therapy, and pain relievers. Another doctor prescribed a muscle relaxer, physical therapy, and imaging. Griffin did not follow up with these doctors. She later told her primary doctor, after her third accident, that she hit her head during it, fainted at her home, and had daily headaches. Her physician observed lower back tenderness and spasms and recommended physical therapy. She attended physical therapy sessions, and Griffin reported relief from her headaches.

Once she applied for benefits, Griffin's health was further evaluated. First, the psychologist Richard Ertl assessed her mental health. He said she had an "adjustment" disorder: she could understand, remember, and follow simple orders; was "mildly-to-markedly" limited in dealing with coworkers and supervisors, stress, and change; and was moderately limited in maintaining concentration, attention, and work pace. A second psychological evaluator assessed Griffin with depression, anxiety with panic attacks, memory impairment, posttraumatic stress disorder, and paranoia. But he also found that she could understand, remember, and carry out simple instructions; her concentration, attention, and work pace were manageable, subject to her physical condition; and she may have some trouble interacting with others. Two other consulting physicians also reviewed Griffin's record. One said she could perform medium work; the second, relying on additional records, found her capable of only light work with limitations.

Agency proceedings came next. First, an ALJ held a hearing, and after an unfavorable ruling, Griffin appealed and the Appeals Council remanded her claims for further consideration of Griffin's headaches and a more thorough review of Dr. Ertl's opinion. At the next hearing, a new ALJ heard testimony from Griffin. She testified that she had severe headaches every other day, difficulty using her right hand, limited range of motion, and neck and back pain while sitting or standing. She added that she would not have difficulty interacting with supervisors but might have some difficulty interacting with coworkers or the public.

Applying the five-step analysis, 20 C.F.R. § 404.1520(a)(4) (disability insurance benefits); 20 C.F.R. § 416.920(a)(4) (supplemental security income), the ALJ determined that Griffin was not disabled. The ALJ first found that Griffin was not working (step one) and had severe impairments including degenerative disc disease, headaches, and an adjustment disorder (step two), but none were automatically disabling (step three). Before step four, the ALJ found that Griffin had the residual capacity for light work with some restrictions. These were lifting (only 10 pounds frequently), standing (six hours per day), noise (moderate) and light (no greater than a typical office setting), neck movement (frequent—but not constant), and stress level (low with only occasional decisions, changes, and interactions with supervisors, coworkers, and the public). With these restrictions, the ALJ credited a vocational expert's testimony that Griffin could not handle her past work as a janitor (step four) but could work at jobs like cafeteria attendant or cleaner, of which the national economy had many (step five).

The ALJ detailed her rationale regarding Griffin's residual capacity to work. The opinion of her primary care physician—that Griffin could not lift more than five pounds and must sit—deserved little weight because it conflicted with the contemporaneous objective evidence of normal imaging and no fractures or degeneration. The ALJ gave some weight to the opinion from the consulting doctor who said that Griffin could perform light work, but added other limitations based on the record. Finally, the ALJ gave the opinions of Dr. Ertl and the other mental-health doctor limited weight. Some of their proposed limitations were consistent with the record—moderate limitations on concentration, persistence, pace, interactions with others, and stress. But others were either too vague or relied on Griffin's subjective reports that conflicted with other objective evidence: Despite her claims of disabling pain, Griffin inexplicably did not pursue continuous care for it. For example, she saw four pain-management specialists, but only for one initial exam each. And regarding her claim of nearly daily headaches, Griffin did not report them at all during some of her pain-management consultations, and she later reported that physical therapy relieved them.

Griffin contests the ALJ's decision. She unsuccessfully sought review of it before the Appeals Council and in district court, where a magistrate judge presided with the parties' consent. In this court, we review the ALJ's decision directly and affirm if the ALJ's decision is supported by "substantial evidence," *see* 42 U.S.C. § 405(g), which is "such relevant evidence as a reasonable mind might accept as adequate to support a conclusion." *Biestek v. Berryhill*, 139 S. Ct. 1148, 1152 (2019).

Griffin first asserts that the ALJ never considered the opinion of Dr. Ertl, the psychologist who initially evaluated her mental health. But the ALJ *did* discuss his evaluation and findings and incorporated them into the assessment of Griffin's residual capacity to work. In any event, Griffin does not state what, if any, additional limitations she believes would be appropriate based on Dr. Ertl's evaluation.

Next, Griffin contends that the ALJ improperly discredited her testimony that her pain prevented her from working. We defer to the ALJ's credibility rulings unless they are "patently wrong." *Zoch v. Saul*, 981 F.3d 597, 601 (7th Cir. 2020). For allegations of disabling pain, the ALJ may consider objective medical evidence and any conflict between Griffin's allegations and the record. 20 C.F.R. § 404.1529(c). Griffin does not specify the pain she refers to, but, construing her pro se brief liberally, *Erickson v. Pardus*, 551 U.S. 89, 94 (2007), we assume that she means her headaches and neck and back pain.

The ALJ permissibly discredited Griffin's testimony of consistently disabling pain because it conflicted with objective medical evidence. *See Zoch*, 981 F.3d at 601. First, as the ALJ noted, although Griffin reported regular headaches to her doctor, she also reported that physical therapy lessened their severity and frequency. Second, although physical exams revealed spinal tenderness and reduced range of motion, imaging scans were "unremarkable," and one specialist reported that her strength and coordination were normal. Based on this record, it was not "patently wrong" for the ALJ to decline to credit Griffin's subjective reports that her pain was continuous and disabling. *Id.*

Griffin also contends that the ALJ improperly ignored the medical opinions of her primary care and pain-management doctors. An ALJ should generally give controlling weight to treating physicians' opinions if they are supported by medical findings and consistent with the record but may discount them otherwise. *Id.* at 602. Here the ALJ adequately justified her rulings. She reasonably explained that she did not

give the primary doctor's view of Griffin's lifting and standing limitations controlling weight because it conflicted with the results of contemporaneous imaging showing no fractures or significant degeneration. Also, the ALJ reasonably explained that she discounted Griffin's reports of pain to her pain-management specialists because she did not seek further treatment from any of them.

Finally, Griffin contends that the ALJ improperly credited the vocational expert's testimony that she could perform certain jobs. She notes that the ALJ concluded at step four that she could not perform her past work as a janitor but adopted at step five, inconsistently in Griffin's view, the expert's finding that Griffin could work as a "cleaner." But the expert explained that these jobs are different—the janitor's position involves medium-duty work, whereas a cleaner job requires only light work. *See* U.S. DEP'T OF LABOR, DICTIONARY OF OCCUPATIONAL TITLES, §§ 382.664-010, 323.687-014 (4th ed. 1991). The ALJ's conclusion that Griffin could work as a cleaner is thus internally consistent and supported by substantial evidence.

We therefore AFFIRM the judgment of the district court.