# ATTACHMENT A

 SUBJECT:
 Examples of Insufficient and Sufficient Responses

 to Question 3 on the N-648

## EXAMPLES OF INSUFFICIENT AND SUFFICIENT RESPONSES TO QUESTION 3 ON THE N-648

The following examples help illustrate the parameters for acceptable and unacceptable N-648s based on answers to Question 3 on the form. Please note that the examples below provide only some of many possibilities for both acceptable and unacceptable responses to Question 3. Where an N-648 is insufficient, it is generally because the doctor has failed to establish a nexus between the patient's condition and his or her inability to learn or demonstrate knowledge of English and/or U.S. history and government. For instance, a common problem is a conclusory statement by a doctor that the applicant cannot learn, without an accompanying explanation of how the diagnosed condition(s) affect the applicant's ability to learn. Similarly, doctors sometimes list many conditions that the applicant suffers, but provide little to no explanation about how the conditions prevent the applicant from learning or demonstrating knowledge. The number of diagnoses or conditions listed is irrelevant to the determination about the sufficiency of the disability exception. What is important is that the doctor sufficiently describes the linkage between the diagnosed conditions and the effect of those conditions on the applicant's ability to take the tests.

# Example 1

## Insufficient Answer:

The patient is a 75-year-old female who has hypertension and heart disease. She has suffered at least 2 heart attacks, once in 1996 and in 1997. Last year, she had a stroke with paralysis on the left side. She is unable to learn English and basic U.S. history and civics. (Note: The doctor failed to articulate how any of the conditions listed affects, for example, the patient's memory, ability to learn new tasks, ability to concentrate, or ability to perform basic mental activities, and therefore failed to show that the applicant's condition has so impaired her functioning that she is unable to learn or demonstrate knowledge of English and/or U.S. history and government).

# Sufficient Answer:

The patient is a 75-year-old female who has hypertension and heart disease. She has suffered at least 2 heart attacks, once in 1996 and in 1997. Last year, she had a stroke with paralysis on the left side. The patient's stroke caused significant cerebral infarction (i.e., death of brain tissue), and has left her with severe and irreversible neurological damage. Because of the widespread damage to the brain tissue, she has suffered markedly decreased cerebral function and is incapable of remembering, articulating, or learning. Because of the patient's condition, she is unable to learn a new language and U.S. history and civics. (Note: The doctor adequately addressed how the stroke impaired the applicant's mental functioning, including her ability to learn or demonstrate knowledge of English and/or U.S. history and government.)

# **Example 2**

## Insufficient Answer:

The patient suffers from Down's Syndrome. He should be exempted from the English language and U.S. civics requirements for citizenship. (*Note: The doctor made a conclusory statement but failed to explain how the applicant's condition would prevent the applicant from learning or demonstrating knowledge of English and/or U.S. history and government.*)

## Sufficient Answer:

The patient suffers from Down's Syndrome, with an IQ of 50. The patient's condition is a global impairment that affects cognition, language, and motor skills. Because of the patient's global impairment, he cannot learn new skills and is not capable of reasoning. His memory is deficient, and he is only capable of performing simple daily activities. Because of the patient's mental disability, he is incapable of learning a new language (even basic words of a new language) and U.S. history and civics. (Note: The doctor adequately addressed the nexus between the condition and how the condition affected the applicant's functioning and ability to learn or demonstrate knowledge of English and/or U.S. history and government.)

# Example 3:

Insufficient Answer:

Vascular Dementia with Depression (DSM 290.43) and Psychosis Essential Hypertension, Coronary Artery Disease, Degenerative Joint Disease, Hyperlipidemia, Congestive Heart Failure, Prostatism, Bilateral Hearing Loss

This 68-year-old man has had long standing hypertension of 7-8 years duration and disease of the cerebral blood vessels due to arteriosclerosis, including a stroke 5 years ago. He also has an extremely severe depression, accompanied by excessive anxiety. The extent of his cognitive deficits would most definitely preclude his being able to pass basic English and Civics tests. (Note: *The doctor failed to sufficiently address how the applicant's cognitive deficits are related to the applicant's ability to learn and demonstrate knowledge of English and/or U.S. history and government.*)

# Sufficient Answer:

Vascular Dementia with Depression (DSM 290.43) and Psychosis Essential Hypertension, Coronary Artery Disease, Degenerative Joint Disease, Hyperlipidemia, Congestive Heart Failure, Prostatism, Bilateral Hearing Loss

This 68-year-old man has had a marked, progressive loss of memory and intellectual functioning over the past 5-6 years, related to long-standing hypertension of 7-8 years duration and disease of the cerebral blood vessels due to arteriosclerosis, including a stroke 5 years ago. His immediate recall, recent memory and remote memory are all profoundly impaired as a result of the stroke. His abstracting abilities, calculations and judgment are also severely impaired. He also has an extremely severe depression, accompanied by excessive anxiety. The extent of his cognitive deficits, especially in memory functioning and concentration, in addition to his depression and anxiety, would most definitely preclude his being able to retain new words, language skills and information well enough to pass basic English and Civics tests. (Note: *The doctor sufficiently explained how the applicant's conditions affected his ability to learn and demonstrate knowledge of English and/or U.S. history and government.*)

# **Example 4**

Insufficient Answer: DSM Diagnosis: 290.0 Dementia, Alzheimer's type 331.0 Alzheimer's Disease

The patient suffers from Alzheimer's Disease. He needs help taking his medications and is no longer able to prepare meals for himself, relying on family members to help him. His impairments prevent her from demonstrating knowledge of basic English and/or U.S. history and civics. (Note: *The doctor failed to sufficiently address how the applicant's condition is related to the applicant's ability to learn and demonstrate knowledge of English and/or U.S. history and government.*)

Sufficient Answer: DSM Diagnosis: 290.0 Dementia, Alzheimer's type 332.0 Alzheimer's Disease

The patient suffers from memory loss and cognitive difficulties caused by Alzheimer's Disease. Examination reveals the patient has impaired memory, orientation, language skills, and other cognitive functions. For example, the patient is disoriented as to person, place and time and cannot recognize, or recall the names of, family members. He also needs help taking his medications and is no longer able to prepare meals for himself, relying on family members to help her. He cannot learn and retain new information As a result, his impairments prevent him from demonstrating knowledge of basic English and/or U.S. history and civics. (Note: *The doctor sufficiently addressed how the applicant's condition caused problems that affect the applicant's ability to learn and demonstrate knowledge of English and/or U.S. history and government.*)

# Example 5

### Insufficient Answer:

(DSM 294.1) Dementia due to Hypertension and Mediterranean fever; (DSM 296.32) Major depression, recurrent, moderate. The patient is a 64 year old widowed female who presents numerous medical problems including a history of diabetes, joint disease, Mediterranean fever, hypertension, and gastro-intestinal distress. The patient also presents memory impairments, headaches, depressed mood, insomnia, poor appetite, impaired social and occupational functioning, poor concentration, dizziness and fatigue.

The cognitive deficits and neurological symptoms cause significant impairment in her daily living skills and represent a significant decline from a previous level of functioning. The above described cognitive and emotional impairments would preclude the patient from being able to take the citizenship

tests. (Note: The doctor failed to adequately describe the nexus between the applicant's symptoms, her dementia and depression, and how the applicant's cognitive and emotional impairments affects her ability to learn and demonstrate knowledge of English and/or civics.)

## Sufficient Answer:

(DSM 294.1) Dementia due to Hypertension and Mediterranean fever; (DSM 296.32) Major depression, recurrent, moderate. The patient is a 64 year old widowed female who presents numerous medical problems including a history of diabetes, joint disease, Mediterranean fever, hypertension, and gastro-intestinal distress. The patient also presents memory impairment, headaches, depressed mood, insomnia, poor appetite, impaired social and occupational functioning, poor concentration, dizziness and fatigue.

The patient's dementia and depression have resulted in cognitive deficits and neurological symptoms that cause significant impairment in her daily living skills and represent a significant decline from a previous level of functioning. She displays deficits in both recent and remote memory. Due to the patient's severe cognitive, emotional, and physical impairment she is unable to perform daily living skills, and therefore she has to depend on the help of the family.

The above described cognitive and emotional impairments would preclude the patient from being able to learn and assimilate new skills, including language and information, and she is therefore unable to take the citizenship tests. (Note: *The doctor adequately addressed how the applicant's dementia and depression are related to the cognitive and emotional impairments that affect her ability to learn and demonstrate knowledge of English and/or civics.*)

# **Example 6**

#### Insufficient Answer:

The patient is a 60 year-old male with Schizophrenia Chronic Paranoid Type (DSM-IV 295.32) and Dependent Personality (DSM-IV 301.6). Due to his severe mental illness, the patient's cognitive functions are impaired. The patient will have difficulties learning English, history, and/or civics. For this reason the patient is unable to take the test to become a U.S. citizen. (Note: *The doctor failed to adequately describe in what way the mental illness affected the patient's cognitive functions and did not provide an opinion that the patient is unable to learn or demonstrate English and/or civics.*)

### Sufficient Answer:

The patient is a 60 year-old male with Schizophrenia Chronic Paranoid Type (DSM-IV 295.32) and Dependent Personality (DSM-IV 301.6). Due to his severe mental illness, the patient's cognitive functions are impaired. For example, the patient has marked memory loss, poor concentration, and short attention span, resulting in an inability to learn or retain new information, including English, history, and/or civics. For this reason the patient is unable to take the test to become a U.S. citizen. (Note: *The doctor adequately described the effect of the mental illness on the patient's cognitive functions and provided a definitive opinion that the patient is unable to learn or demonstrate English and/or civics as a result.*)

## **Example 7**

<u>Insufficient Answer:</u> Diagnosis of mental impairment: Dementia, Late Onset, Vascular (DSM 290.0)

Diagnosis of Physical Disability: Hypertension for 10 years, Cardiac Arrhythmia, Angina Pectoris Chronic Dizziness, Insomnia, Headache, Bilateral Cataract, Poor Vision Right Ear Deafness, Peptic Ulcer Disease, Hyperlipidemia Osteoarthritis for 16 years with Chronic Low Back Pain

This 80-year-old woman has been my patient since August 1994. Her conditions are extensive and progressively deteriorating. She cannot initiate new tasks, such as studying from audio tapes at home. The combination of physical weakness and fear of getting lost prevent her from leaving home by herself to attend classes to learn English, U.S. history and civics. As a result of her mental impairments and physical disabilities, this applicant cannot reasonably be expected to pass a test of English proficiency or a test on U.S. history and civics. (Note: *The doctor failed to adequately explain the nexus between the applicant's conditions and how those conditions affect her ability to learn and demonstrate knowledge of English and/or civics.* )

<u>Sufficient Answer:</u> Diagnosis of mental impairment: Dementia, Late Onset, Vascular (DSM 290.0)

Diagnosis of Physical Disability: Hypertension for 10 years, Cardiac Arrhythmia, Angina Pectoris Chronic Dizziness, Insomnia, Headache, Bilateral Cataract, Poor Vision Right Ear Deafness, Peptic Ulcer Disease, Hyperlipidemia Osteoarthritis for 16 years with Chronic Low Back Pain

This 80-year-old woman has been my patient since August 11, 1994. She suffers from a dementia characterized by marked progressive loss of memory and intellectual functioning over the last several years. She is disoriented as to the year, season, day, day of the week. Her immediate recall, recent memory and remote memory are also profoundly impaired. Her abstracting abilities, calculations and judgment are also impoverished. Her vision is also severely impaired.

Her conditions are extensive and progressively deteriorating. The cognitive disturbance associated with her dementia makes it impossible for her to learn new language and retain new information. As a result of these mental impairments and physical disabilities, this applicant cannot reasonably be expected to pass a test of English proficiency or a test on U.S. history and civics. (Note: *The doctor adequately addressed the connection between the applicant's condition, and how it affects her ability to learn and demonstrate knowledge of English and/or civics.*)

# Example 8

## Insufficient Answer:

The patient is a 70-year-old male who has been under my care since 4/23/92. Patient has a long history of chronic hypertension, uncontrollable for a long time. This vascular problem has been complicated by a stroke, first in 1982, and a second stroke in March of 1992. Patient has been hospitalized at St. Elizabeth's Hospital with residual left leg weakness and speech impairment. It is my opinion that the patient is unable to learn English as well as U.S. history and civics. (Note: *The doctor failed to describe the nexus between the diagnosis and the applicant's impaired functioning, including his ability to learn or demonstrate knowledge of English and/or civics.*)

### Sufficient Answer:

The patient is a 70 year old male who has been under my care since 4/23/92. Patient has a long history of chronic hypertension, uncontrollable for a long time. This vascular problem has been complicated by a stroke, first in 1982, and a second stroke in March of 1992. Patient has been hospitalized at St.Elizabeth's Hospital with residual left leg weakness and speech impairment.

Patient has severe memory loss and demonstrates disturbances of memory, judgment and reasoning. This memory loss is part of his progressive vascular dementia and secondary to his chronic hypertension, as well as cerebral vascular disease with cognitive impairment due to his strokes. It is my opinion that he is unable to learn English as well as U.S. history and civics. He can't acquire new knowledge required for participation in the normal testing procedure for naturalization. (Note: *The doctor adequately addressed how the disburbances of memory, judgment and reasoning are related to the applicant's diagnosed conditions, and how they have impaired the applicant's functioning, including his ability to learn or demonstrate knowledge of English and/or civics.*)

# **Example 9**

## Insufficient Answer:

The patient is a 69-year-old female who has been under my psychiatric care since 10/96. DSM-IV diagnosis: Dementia due to Multiple Medical Problems, Parkinson Disease, Cerebral Arteriosclerosis, Severe Congestive Heart Failure with ascites, Cancer of the right ear, Dizziness, Arthritis, Insomnia. She shows moderate cognitive impairment and her cognitive functioning is also declined due to her multiple medical problems. As a result of these illnesses the patient is unable to learn English and U.S. History to participate in normal testing procedure. (Note: *The doctor provided failed to provide enough information about the nexus between the diagnosis and how it impaired the applicant's functioning so as to affect her ability to learn or demonstrate knowledge of English and/or civics.*)

### Sufficient Answer:

The patient is a 69-year-old female who has been under my psychiatric care since 10/96. DSM-IV diagnosis (294.1): Dementia due to Multiple Medical Problems, Parkinson's Disease, Cerebral Arteriosclerosis, Severe Congestive Heart Failure with ascites, Cancer of the right ear, Dizziness, Arthritis, Insomnia. As a result of her dementia and Parkinson's Disease, she shows cognitive impairment, including attention and orientation deficit, difficulties with naming and repetition, decreased construction abilities and significant memory loss. Her cognitive functioning is also declined due to her other medical problems. As a result of the reduction in mental capacity brought about by her multiple conditions, the learning and memorization of new information is impossible. She is therefore unable to learn English and U.S. History to participate in the normal testing procedure. (Note: *The doctor provided enough information about the nexus between the diagnosis and the applicant's impaired functioning by describing the effect of her conditions on her cognitive functioning and on her ability to learn English and/or civics.*)