Name/Professional Title(s): Pam Sheckler, RN, BSN, CCM, IMF, CAT nurse

Business address: 138 River Road, Andover, MA 01810

Telephone number: 603-718-5591

Email address: pamela.sheckler@genexservices.com

1. Please indicate the number of years of experience in care coordination/case management.

FCM has > 7 years experience in Worker's Compensation both as an Occupational Health Manager and Field Case Manager.

- 2. Please provide the approximate number cases with morphine milligram equivalent above 100 (MME > 100) that you have assisted with in past three years. I have assisted with approximately 5-7 cases that I can recall. These cases tend to be the older cases.
- 3. Please indicate the best geographic area where you have greatest experience. FCM works Southern NH, the greater Boston area, and Norther RI.
- 4. Please explain your background/experience with addiction or pain management.
  - FCM has incorporated up front education with all claimants pre-op and clearly laying out the expectations that the claimant will not be on pain medication long term and explaining how to tell if they are becoming addicted. FCM watches the cases very carefully and expresses concern to the claimant and provider if any red flags arise. FCM explains how to use the narcotics especially in relation to making sure they are covered with pain medications when their nerve block wears off, if they are successful in doing so, FCM notes they are typically able to wean off narcotics quickly post-op. FCM also uses numerous DME's for icing, TENs, moist heat, and asks MD's to order acupuncture or neuromuscular therapy whenever potentially warrented.
- 5. Please provide a very brief outline of three cases you have assisted with within last three years (i.e., starting MME, what treatment plan seemed to help and how case ended). Please explain the results of the three cases.
  - a. Claimant was taking > 50 MED and smoking marijuana. FCM obtained a copy of the narcotic contract that stated the recipient of the narcotics was not to be taking/using any illegal substances or the contract would be broken, FCM asked prescriber to enforce the contract. He gave the

- claimant a warning and when he was positive once again for marijuana at the next office visit, due to FCM's presence the claimant was told by PCP no further narcotics would be prescribed. A TENS unit and a moist heating pad were ordered to assist with pain control.
- b. Claimant was taking > 50 MED and was willing to wean from narcotics as advised by a medication review report. A schedule was devised by the provider writing the report and the prescriber was willing to follow the schedule, the claimant was weaned slowly over a period of several months.
- c. Claimant was taking > 75 MED and was interested in returning to driving and willing to wean from narcotics in order to do so. Claimant worked with PCP and weaned from medication over a 3 month period, a TENS unit was ordered to assist with pain control when weaning.
- 6. Do you work with, or are you familiar with, any health care practitioners who specialize or have had success with assisting patients to reduce daily opioid intake? Yes
- 7. Do you have a vehicle and are willing to travel to meetings and medical appointments? Yes
- 8. Please indicate, if applicable, any language skills other than English. I speak English only.