

Welcome to the Comprehensive Centers for Pain Management and West Central Surgical Center. We are dedicated to providing individualized care utilizing the latest technology and advanced techniques to help you regain function and improve the quality of your life.

We pride ourselves on having highly trained, certified and credentialed pain management specialists. All of our physician's credentials are available for review on our website at <a href="https://www.cc4pm.com">www.cc4pm.com</a>. We can provide a copy of our physician's credentials upon request.

**In addition to having** highly trained and qualified physicians, our office and clinical staff is trained to handle specific issues related to your pain or painful condition. We work with a pain management psychologist to develop a plan to handle all aspects of your pain. We also offer a multitude of additional services designed to improve the overall quality of your daily life through our **FLO Enhanced Therapy & Wellness Services.** 

#### Services include:

- Physical Therapy
- Massage Therapy
- Acupuncture
- Wellness Evaluations
- ☐ Exercise Classes- Yoga, Pilates, Nia, Ageless Grace and Strengthening
- Smoking Cessation
- Nutrition Counseling

Services are conducted by qualified professionals and can be scheduled to accommodate any schedule. It is important to understand that the treatment of pain, especially chronic pain, requires a team approach and the most important member of the team is YOU.

Below is our practice "guidelines" and general information about our Program and Services.

A great deal of time and effort has been spent on producing all of this information. Read and study all of the information <u>carefully</u> and bring any questions you may have to our attention at your next visit. Please take the time to complete as accurately as possible all pain questionnaires.

#### 1. Initial Visit (First Appointment)

Generally, the initial visit to CCPM is for evaluation only. In certain situations, routine pain management injections can be performed the same day as the initial visit. Certain procedures cannot be performed on your initial visit because of issues ranging from safety to insurance policies.

If you are on medication for your pain, make sure that you are given enough medication by your physician to last until the next time that you see him/her, and not just until you see us. **WE USUALLY DO NOT PRESCRIBE CONTROLLED SUBSTANCES ON THE FIRST VISIT FOR CHRONIC PAIN.** In fact, being seen in the clinic does not

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automatically guarantee that you will be taken as a patient. We will accept your case only if we believe that we can help you.

# 2. Appointments

**Patients are seen by appointment only.** Regular business hours are Monday through Friday 8am-5pm and some Saturday and evening hours are available. There will be <u>no walk-ins</u> and we can accept emergency "add-ons" only if the schedule allows.

IF YOU ARE UNABLE TO KEEP YOUR APPOINTMENT: Please notify us at least 24 hours prior to your scheduled appointment (for Monday appointments notification is expected on Friday). If you are scheduled at West Central Surgical Center for a procedure, 48 hours notice of cancellation is required. This charge must be paid prior to rescheduling your appointment. Late cancellations due to uncontrollable circumstances will be considered on a case-by-case basis. Additionally if you are unable to keep **three** consecutive appointments, you may be discharged from our program. If you fail to keep scheduled clinical psychology, physical therapy or occupational therapy appointments you may be discharged from the program even if the appointments were at an unrelated office or site.

If you are unable to keep your appointment, or are going to be late, please call our office as soon as possible. This courtesy allows us to be of service to other patients. Our telephone number is 419-843-1370.

**Should you be late to your appointment,** you may be rescheduled. We work very hard to be on time; therefore, if you arrive late we will try to work you in, but not at the expense of delaying other patients. You should check with the receptionist 30 minutes prior to your scheduled appointment on your initial visit and 15 minutes prior to your appointment on subsequent visits. If you are to receive treatment that requires the placement of an IV or if you will be treated at West Central Surgical Center, you must arrive ½ hour prior to your scheduled procedure. Should you fail to check with the receptionist in a timely manner, you may have to be rescheduled. (See Procedure section below)

Your treatment here may involve referral to other specialists, such as psychology, physical therapy, and other medical consultants. If needed, these appointments will be scheduled at the end of your visit.

A certain amount of waiting time may be unavoidable; therefore, you may wish to bring some reading material (or other) to pass the waiting time as pleasantly as possible. Due to the limited amount of waiting room space, **please** do not bring more than one person with you if possible. If your appointment time arrives and you have not been called back to be seen, please ask the receptionist if there are any delays and we will give you a wait time estimate. Our standard is to be on time.

## 3. Phone Calls

We do not believe in pain or disease management over the phone. Because of this, we would like to avoid phone calls as much as possible. Any questions or concerns about your management or your condition should



be addressed during your regular appointments. Phone calls should be made <u>only for emergencies</u>. (Please see the section on "Emergencies" for a clear definition of what an emergency is.)

During regular business hours, the Pain Center staff will be committed to the treatment and service of patients in the facility. Phone calls will be returned as time allows. While we will try to answer your phoned-in questions, most calls will not be answered until the end of the day. Please avoid multiple phone calls; they will not speed up the return of your call. We will triage calls based on medical necessity and some phone calls may not be returned at all. To help assure that those in true need are helped please avoid unnecessary calls to the office.

We will not discuss case matters over the phone. If you have had a recent study done and there is no evidence of a significant problem, we will discuss the results upon your return to your next appointment. In the event that the result(s) of the test suggest that there may be an urgency, or emergency, we will contact you as soon as possible. Make sure that we always have a way of contacting you. If you have any questions about your care or any planned procedures, please contact our receptionist and schedule an appointment to come in and have them answered. We will be more than happy to answer all of your questions, but we will not do it over the phone. Our website (<a href="https://www.cc4pm.com">www.cc4pm.com</a>) is an excellent resource in assisting you with any questions you may have. Handouts describing procedures are available and a description, as well as animations, are available on our website.

#### **GUIDELINES FOR PHONE CALLS**

Reasons to call the office:

- 1. Problem after a procedure
- 2. Problem after starting a new medication(s)
- 3. The need to reschedule or cancel an appointment
- 4. Late for appointment
- 5. Cannot remember appointment time

Inappropriate calls to the office

- 1. Medication is not working
- 2. Lost or stolen prescription(s) or medication(s)
- 3. Prescription renewals (see medication policy below)
- 4. Requests for medical records—please submit requests in writing

Our "Patient Confidentiality Policy" prohibits us from providing any of your medical information to anyone, including family members, without your consent. We will not answer any family member's question(s) over the phone. If any member(s) of your family want information about your condition, treatment, or test results, they will need to accompany you to your appointment(s), at which time, with your permission, we will be more than happy to answer all of their questions.



For requesting appointments or appointment changes, please call 419-843-1370 and ask to speak to the scheduler or the person in charge of scheduling. **Please do not discuss scheduling details with the physician(s).** It is the responsibility of the <u>supporting staff</u> to help you with these matters.

For questions regarding your bills, account, or any financial aspect of your care, please call our billing office at 419-843-1369. Please do not discuss the financial aspects of your care with the physician(s). We will provide a copy of our fee schedule upon request, as well as a list of contracted third party payers. It is your responsibility to know the specifics of your individual medical coverage, applicable co-pays and limitations of coverage.

# 4. Emergencies

By definition, **there are no emergencies in chronic pain management.** If you have a new pain (Acute Pain), or a change in your usual chronic pain, this will have to be evaluated by your Primary Care Physician (PCP), the nearest Emergency Room (ER) or by scheduling an appointment with our office. From time to time, you will have flare-ups (worsening) of your usual pain. This does not constitute an emergency. If you wish, you may request an earlier appointment, or that you be added to our "cancellation/waiting list", in an attempt to be seen earlier. For the most part, you should attempt to identify what initiated the exacerbation (worsening of your pain) and during your next appointment, an attempt should be made to develop a plan for what you should do for those occasions. Walking into the clinic without an appointment, and demanding to be seen is disruptive, inappropriate, and unacceptable, and may lead to dismissal from our program.

## Acceptable emergencies are:

- 1. **PROBLEMS AFTER A PROCEDURE:** Prolonged bleeding; redness and swelling around the procedure site; fever; prolonged weakness or numbness (more than 4 to 6 hours after the procedure); shortness of breath; difficulty breathing; paralysis; being too sleepy; disorientation; urinary or fecal incontinence of new onset (Bowel or Bladder Problems) and others.
- 2. **PROBLEMS AFTER STARTING A NEW MEDICATION:** Allergic reactions; difficulty breathing; rash; swelling; severe nausea and vomiting; disorientation; severe sedation or being too sleepy; etc. (You should immediately stop the medication)

In both instances, if you are physically ill, CALL 911or go to the <u>nearest</u> Emergency Room (ER) and have the physician there give us a call.

Running out of medications is not an emergency!

#### 5. Medications

**No phone refills.** No medications will be called-in. No prescriptions will be faxed. No medications will be changed over the phone. No new medications will be started over the phone. The only way that you will be able to get your medications will be by keeping your appointments.



**Refills of all medications should be requested during your regular office appointment.** It is <u>your responsibility</u> to know how much medication you have left, and whether or not you will need refills before your next appointment. Prescriptions will be provided <u>only</u> during your office appointments. If you forget your refills, you may not have enough medication to last until your next appointment. Remember should you get home and realize you did not get your prescriptions, we will not be calling them in. You will need to schedule another appointment to receive prescriptions for those medications. Please do not leave the office without asking for your prescriptions and always plan to return for follow up when you (or your physician) expects to keep you on the same medication(s).

No prescription(s) or refills are given after normal business hours, nights, holidays, or weekends. We consider it the responsibility of each patient to plan ahead to assure that medication(s) does not run out at night or during weekends.

## Medications should be taken only as directed. Taking less than prescribed

is acceptable, especially if you do not need as much to get the desired effect or if you have problems or side effects with the prescribed dose. Nevertheless, the opposite is not true. You should <u>never</u> take more than prescribed, especially without the physician's expressed consent. This consent can only be obtained from your physician during a regularly scheduled appointment. Calling the clinics to obtain this consent over the phone is unacceptable and not recommended. Taking more medication than prescribed will guarantee that you run out of medication early. **There will be no early refills.** Patients should bring **a complete list** of medications to each **appointment**.

**Always bring your medications to your office appointment.** Pills may be counted in order to assess your use of those medication(s). We may also send the medication out to be analyzed for proper identification. Should you not bring your medication(s), have less than what you have, or the identification of the medication should prove that the medication is not what you should have, you will be automatically discharged from our program.

You should never borrow medications from anyone else. This is unwise and dangerous.

You should never give, lend, or sell any of your medication to anyone. It is unwise, dangerous, and illegal. We have seen cases of fatalities due to this practice. In the case of a fatality, you will be personally liable and held accountable for the other person's death.

**Whenever you are given a new medication**, always check with your pharmacist and ask if there may be any drug interactions with any of the other medications that you are currently taking. Remember that over-the-counter medications and herbs can also interact with prescription drugs.

**We will not prescribe**, write, or renew any prescriptions for medication(s) that you may be receiving for non-pain related reasons (blood pressure medication(s), diabetes medication(s), asthma medication(s), nicotine patches, etc.).

**No "nerve medication(s)".** If you have problems with your "nerves" (anxiety, depression, nervousness, panic attacks, suicidal ideations, etc.) we will refer you to a psychologist or a psychiatrist for help. We generally do not prescribe medication(s) such as Valium, Ativan or Xanax. (Medication(s) generally utilized for depression or epilepsy may be prescribed because these classes of medication(s) can significantly help certain painful conditions.



Medication such as Valium has been shown to actually lower pain thresholds and you may perceive that your pain is worse.)

**Lost or stolen medications will not be replaced.** We do not accept police reports as evidence of medications being stolen. Lost prescriptions will not be replaced.

**Follow-up appointments.** We must see you regularly to assess the continued need for the medication(s) we prescribe. In the case of most pain medication(s) you may need monthly appointments. The maximum follow-up interval for patients prescribed controlled substances is 3 months. Occasionally, if you are stable on non-controlled pain medication we can extend follow-up intervals to 6 months.

FOR A MORE COMPLETE DISCUSSION OF OUR MEDICATION POLICY PLEASE REVIEW OUR "CONTROLLED SUBSTANCE AND PAIN MEDICATION POLICY"

#### 6. Procedures

Most procedures take only a few minutes and recovery time is brief. However, in certain situations (sedation) or procedure, more time is required. We will try to estimate the length of time required.

There are two basic types of procedures performed at CCPM. The first "office based procedure" includes simple nerve blocks, joint injections, trigger point injections and others. Special patient preparation is not required for these simple injection techniques.

The second type of procedure is "Ambulatory Surgical Center" (ASC) procedure. All procedures requiring I.V. sedation, fluoroscopy or spinal injection is performed in the ASC setting. We perform most of these procedures at West Central Surgical Center (WCSC) though some of these procedures can also be performed at the Bay Side office; we also utilize the Outpatient Center at Bay Park Hospital. Your appointment time represents the time we anticipate initiating your procedure not the time we begin the necessary pre-procedure assessment. Due to the need to perform a full nursing assessment and brief physician history and physical prior to ASC based procedures, you must arrive 30 minutes prior to your scheduled procedure time.

The guidelines below are applicable to all ASC procedures:

# WEST CENTRAL SURGICAL CENTER GUIDELINES FOR ASC BASED PROCEDURES

# **Eating or drinking prior to your procedure**

For those patients undergoing a procedure without sedation, we recommend that you avoid eating before your procedure. A light snack or liquids are acceptable. Certain procedures such as I.V. sedation and all cases performed in the Hospital require that you **DO NOT eat food, drink fluids, chew gum or smoke for at least six (6) hours prior to your appointment.** If you are a diabetic, please let us know since we prefer to schedule procedures for diabetic patients in the morning. If you are a diabetic patient and have not been scheduled for a procedure requiring sedation you may eat a light morning meal.



One additional note of caution, if you are scheduled at the Hospital and "MAC", spinal or General Anesthesia is planned you must follow the eating and drinking guidelines of the Anesthesia department which likely are more restrictive.

**Medications** - Please take your regularly scheduled medications with a sip of water, this includes medication(s) for your heart, high blood pressure, asthma and other conditions. Unless specifically instructed by your doctor, you should also take medication(s) prescribed.

**Driver policy** - It is necessary that you have someone drive you home after your Hospital or ASC procedure. The driver must be a responsible adult. Having a Taxi does not meet our safety standards. The person accompanying you should be strong enough to help you in and out of the car and into your home. If you are unable to abide by this policy, please discuss it with your physician or our clinical manager so other arrangements can be made.

If you are unable to abide by the above eating/drinking guidelines and driver requirements, it is your responsibility to discuss the issues in advance. Failure to make arrangements may result in cancellation or delay. If we are not properly notified you may be subjected to a cancellation charge.

**PATIENTS ON BLOOD THINNERS** - For most of our procedures you must be off any blood thinners. These include Coumadin, Heparin, Lovenox, Plavix, Ticlid, Aggrenox and others. Stopping ASA (Aspirin) before injections generally is not required, but may vary case-by-case, check with your primary care physician. We require that anti-platelet drugs such as Plavix be stopped 7 days prior to spinal injection(s) or surgical procedures. (Procedure(s) not involving injection(s) into the spinal canal may not require stopping anti platelet drug(s)). If you are on Coumadin you must stop taking this drug for a time sufficient to allow your INR to return to normal (1.0-1.3). Patients are prescribed anticoagulants for a variety of medical condition(s) of which some are serious. Therefore, we cannot determine the risk of stopping such medication(s). **It is important that you obtain permission from your primary care physician or other medical specialist before stopping your blood thinner.** 

**If you have an active infection or a cold**, call and reschedule your appointment. Most of the procedures that we perform involve the use of steroids. Steroids will temporarily decrease your immune system defenses, which could lead to worsening of existing infection(s). Most of our procedures should not be performed in the presence of an active infection or fever.

**If there is any chance of you being pregnant,** YOU NEED TO LET US KNOW. Some of the medication(s) used may cause birth defects. In addition, some of the procedures that we perform may involve the use of fluoroscopy (x-rays), which may also cause birth defects.

You should always ask your physician to explain the procedure and it's risk(s) before the day of the actual procedure. The staff should be able to provide you with written information about the procedure prior to having it done. A great deal of information is available in this handout and on-line at www.cc4pm.com. If you have any doubts about the proposed procedure, we highly recommend that you do not have it performed until all of these doubts have been properly addressed. Nevertheless, remember that because the physician has to work on a previously set time-schedule, properly addressing the issue on the day of the procedure may consume the allowed time scheduled for that visit, requiring that the procedure be rescheduled for a later date.

## 7. Primary Medical Care

We are not trained to be your Primary Care Physician (PCP). You are required to have a Primary Care Physician (Family Medicine Physician, Internist, etc.). It is a requirement of our program that you have a primary care physician and keeps us informed as to whom this is. We are Chronic Pain and Interventional Pain Specialists and

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this will be the extent of our involvement. All of your other medical conditions will need to be managed by your medical doctor. We will also not prescribe any medications, other than those directly related to your pain management. Please do not ask your pain physician to refill any medications, other than those prescribed for your pain.

#### 8. Handicapped Parking Stickers

Department of Motor Vehicles (DMV) Handicapped Parking Sticker forms may be signed for patients in wheelchairs or who demonstrate severe impairment. on a case by case basis. Remember there is a limited amount of parking spaces available. When you occupy one of those spaces, you are taking it away from someone who may be wheelchair-bound due to paralysis or other disabling condition(s). The Bureau of Motor Vehicles (BMV) requires an inability to ambulate 200 feet.

## 9. Disability

"Disability" is a legal term. It refers to what you can do with your "Impairment". As physicians, we are not allowed to provide "Disability Ratings". This is a function for a court of law. As physicians, we are only allowed to provide "Impairment Ratings", which is a medical determination. Impairment rating refers to the percentage of body surface area and range of motion that has been affected by a particular condition or disease. As such, it is always very low. Essentially, the American Medical Association (AMA) has established very specific guidelines relating to this matter. According to these guidelines, a patient in an intensive care unit, whose life is being maintained by a mechanical ventilator, has an impairment rating of close to 75%. These determinations always tend to spark controversy either with the patient or the insurance companies, almost invariably leading to legal disputes in a court of law. Because we do not have the desire or inclination to get involved in this, a decision has been made to stay away from this type of determination(s).

# 10. Disability Forms

Please do not request any of our pain physicians to complete any "Disability Forms". We do not make or complete disability determinations, work restrictions, return to work determinations, disability ratings, impairment ratings, or continuing disability reports, assessments, determinations, or forms. If any of the above is needed, we can refer you to a physical or occupational therapist for a Functional Capacity Evaluation with possible impairment ratings. Insurance disability forms will need to be completed by your primary care physician's staff. If such paperwork has to be completed by us, there will be an additional charge prior to the form being completed. Please allow two (2) to (4) weeks for completion. No "rush" requests will be honored.

#### 11. Work restrictions

Please do not request these types of determinations from your pain physician. These are best addressed by a physical therapist after having thoroughly evaluated your capabilities. We will provide temporary restrictions related to your diagnosis and procedure(s) performed. Any long-term determination requires a functional capacity evaluation.



#### 12. Out-of-work excuses

These excuses can be provided <u>only</u> for the day spent in our facility for your appointment or for short recovery periods directly after your pain procedure(s). Certainly no retroactive or long-term excuses will be given. If you believe that you cannot perform your job duties, you will need to speak to your employer about the possibility of temporary disability. There will be a \$10.00 charge if note not obtained the day of your visit with the provider.

## 13. Unrealistic Expectations

Studies have shown that for chronic pain patients who have been out of work for a year or longer, the possibility of going back to their jobs is less than 15%. These same studies have shown that the longer the patient stays out of work, the less chance they will go back. Although we would like to be able to help everyone eliminate their pain, the truth is that most people with chronic pain will continue to have some degree of pain for the rest of their lives. Remember that there are certain conditions that cannot be cured or eliminated, for example: arthritic degeneration. In fact, the rule of thumb is that if you have had pain for longer than a year, chances are that your pain may have become permanent. Our job is to help you manage your pain. Most of the time we can decrease it to the point where it is bearable, nevertheless, it may be unrealistic to think that we may be able to completely rid you of your pain.

#### 14. Patience is a Virtue

Unfortunately, because of the nature of what we deal with, some of our patients tend to become depressed, frustrated; distrust the system, suspicious, and demanding. Some tend to be aggressive and threatening. In the past we have encountered patients that tend to forget that 100% of the patients that we see are here because of pain that may be as bad or worse than theirs. In fact, we also treat cancer pain patients whose life expectancy may be very short and their pain severe. These patients, due to their short life span, do have priority. We are here to help, and we will do everything possible to make that happen. Rude, abusive, aggressive, and/or threatening behavior will not be tolerated and will lead to discharge from the program.

#### 15. The Pain Score

Pain is a subjective complaint. It cannot be seen, touched, or measured. We depend solely on the patient's account of the pain in order to keep track of it. Since everyone tolerates different degrees of pain, the best basis of comparison is the patient himself/herself. To achieve this, we use a pain scale called NAS-11 (Numeric Analog Scale from 0 to 10 [11 characters]), where "0 = No Pain", and "10 = the worst possible pain that you can even imagine" (i.e. something like being eaten alive by a shark). You will be asked to rate your pain on every visit, as well as multiple times before and after a procedure. Please be as accurate as possible and remember; medical decisions will be based on your responses. Please do not try to emphasize your pain by giving us a number above the upper limits of the scale (i.e. "15"). This will actually be interpreted as "symptom magnification" (exaggeration), as well as lack of understanding with regard to the pain scale. To put this into perspective, when you tell us that your pain is at a 10 (ten), you are essentially saying that you are at a level of pain greater than anything else anyone can do to inflict additional pain upon you. (Carefully think about that.)



# 16. Responsibility

In the specialty of "Pain Management", contrary to other medical specialties, the responsibility of the patient's care lies mostly on the patient rather than the physician. Patients are expected to make every effort in understanding their condition as well as their treatment. It is the patient's responsibility to ask questions when something is not understood. It is also the patient's responsibility to follow all of the clinic's rules, as well as state and federal laws pertaining to controlled substances. You should always know the names of the medication(s) that you are taking, the dosage(s), the schedule, the amount left, and how long it will be before you run out of medication(s). Patients should have a list of their medication(s) with the above information, readily available. After each appointment, always check your prescription(s) before you leave the office.

#### 17. Information

By now, it should be obvious that we believe in providing as much information as possible to our patients. In an effort to do this, we have this information available in the clinic, as well as via the Internet. For more information, please log onto our Website <a href="https://www.cc4pm.com">www.cc4pm.com</a>

# 18. How to prepare for each Appointment

Visit our website and review the procedures and information available. Be sure to explore the many links.

- Be on time. Always try to be in the office, at least fifteen (15) minutes prior to your appointment. Thirty (30) minutes prior to any procedure at WCSC
- Read all the information provided to you
- Write down all of your questions, including all of the points that you want to address with your physician
- Carefully and truthfully answer the pain questionnaire
- Bring all of your pain medication(s) for pill count
- Always bring a list of all your current medication(s), dosage(s), schedule, and the name(s) of the prescribing physician(s)
- Bring the report(s) on any MRI, CT, or Nerve Conduction Test(s) you have had done in the past (at least in the past 2 years). List when and where you had any studie(s) done. Please bring the actual film(s). X-ray(s) or MRI film(s) saved on a CD is acceptable
- Bring a list of all the medications that you have tried in the past. This will save time if we don't
  have to repeat any. Also, list any side effects or complications that you have had to those
  medications and why you no longer take them
- Bring a list of all physicians that have been involved in your care Whenever possible, include their address and telephone numbers
- If your insurance requires appointment pre-approval, make sure that you have this prior to being seen in our office(s)
- Bring your insurance card to every visit. If you have more than one insurance, bring all of your cards
- Always bring your co-pay
- Bring your driver's license



#### Bring the following insurance information:

- Subscribers name and date of birth
- ID and Group number
- The complete insurance billing address
- The insurance company's telephone number and contact person
- The subscriber's employer
- The patient's relationship to the subscriber
- Photo ID of patient

# If you are a Worker's Compensation / Auto liability patient, please bring the following information:

- Date of the accident
- Date that you were last able to work. (if applicable)
- What is the working diagnosis for the claim?
- Patient's claim number
- Name and telephone number of the claim adjuster
- Is the claim pending litigation? If litigation is pending, we will need the name, address, and telephone number of your attorney.
- Approved Diagnosis Codes.

#### 19. Ideas, Suggestions and Quality Improvement

We encourage you to make suggestions to improve our delivery of pain management services, policies and procedures. While we hope everyone is happy with the care they receive, it is the nature of the business that there is always room for improvement.

All patients should receive a customer satisfaction survey at some time in your series of visits. Please take the time to complete this form. Your comments are valuable to us in developing programs and systems to better serve you as well as all patients in the future. Should you want to make a comment and have not received a form please ask for one from any employee.

We also have customer grievance forms that you may request to document your concerns, whether they are positive or negative. We take all complaints seriously and every written

Complaint is discussed at our Quality Improvement Committee Meetings. Jonathon Shapiro is our customer service representative whose responsibility includes assuring that a patient's voice is heard. Please feel free to ask for his assistance.

If for some reason you decide that our methods do not meet your needs, we would be happy to help you find another pain management group or physician. We maintain a list of qualified pain specialists. This list is available upon request.