

Welcome

to the Perspectives in Care Program

You are being asked to enroll in the Perspectives in Care Program by your healthcare provider because you are being treated for pain. The purpose of this free program is to assist the doctor in better understanding your pain, to help ensure you receive the most suitable therapy, and to better understand how you feel after that therapy. Beginning this month, **and before each visit to your doctor**, you will be asked to answer a series of questions aimed at better understanding your condition.

This questionnaire has two parts:

- 1) The first part is a short, confidential research study which is anonymous, and will not be shared with your provider;
- 2) The second part will only be shared with your referring healthcare provider. The entire process should only take you about 15 minutes to complete. Please call our **HELP DESK** with any questions at **833-404-1882**. Thank you for your participation!

Get Started with 3 Easy Steps!

- 1** Using a computer, tablet, or smartphone that is connected to the Internet, go to the web address www.PerspectivesInCare.com
- 2** Click the “**Patients**” button at the top of the page, then “**Enroll**” which will take you to a form. Fill out the form. Enter a valid email address. Your email address will be your username. Enter this **Clinic Pin 68157438**. Choose a password that is easy to remember.
- 3** Once enrolled, you can go to www.PerspectivesInCare.com, “**Patients**”, and then choose “**Patient Login**”. Complete the questionnaire, making sure to click “**Submit**” at the end.

You must do this before each visit

Don't have a computer, smartphone, or Internet access?

- Call a friend, family member, or someone you trust with your health information, and have them read you the questions over the phone and submit the questionnaire on your behalf.
- Visit your local public library and use their available computers. For more information about libraries in your area, please call our **HELP DESK**.

* Please note that the completion of this evaluation may be a requirement of your Doctor. To avoid being rescheduled, please **complete prior to each office visit**.

This program is provided by Sure Med Compliance in collaboration with KVK-Tech, Inc. and KemPharm, Inc. If you have any questions about this program or have technical difficulties completing your questionnaire, please call the **HELP DESK** at 833-404-1882.