SUPPLEMENT TO MINUTES OF THE MEDICINAL MARIJUANA REVIEW PANEL MEETING THURSDAY, MAY 11, 2017

MEMBERS PRESENT:

ALEX BEKKER, MD, Ph.D

JESSICA ANNE SCERBO, MD

CHERYL A. KENNEDY, MD

PETROS LEVOUNIS, MD, MA

MARY L. JOHANSEN, Ph.D., NE-BC, RN

MARY M. BRIDGEMAN, Pharm.D

EXCUSED:

DR, BERKOWITZ

DR. ZARUS

STAFF:

MELISSA BAYLY, DAG

MICHELE STARK, Executive Secretarial Assistant

CALL TO ORDER:

ALEX BEKKAR, Chair, opened the meeting on Thursday, May 11, 2017, at 10:00 a.m. located at the War Memorial, One Memorial Drive, Trenton, New Jersey

MOTION SUMMARY

Approval of the Minutes from February 22, 2017.
 Motion – Dr. Levounis; Second – Dr. Johanson

2. Approval of Chronic Pain Related to Musculoskeletal Disorders **Motion – Dr. Johanson; Second – Dr. Bridgeman**

3. Approval of Migraine

Motion - Dr. Bekkar; Second - Dr. Bridgeman

4. Approval of Anxiety.

Motion – Dr. Johansen; Second – Dr. Bridgeman

5. Approval of Asthma

Motion – Dr. Johansen; Second – Dr. Bridgeman

6. Approval of Chronic Pain of Visceral Origin

Motion – Dr. Kennedy; Second – Dr. Levounis

7. Approval of Tourette Syndrome

Motion – Dr. Kennedy; Second – Dr. Johanson

8. Approval of Chronic Fatigue

Motion – Dr. Johansen; Second – Dr. Kennedy

MAY 11, 2017 MEDICINAL MARIJUANA REVIEW PANEL VOTING RECORD

VOTING BOARD MEMBER	ROLL	1	2	3
Dr. Berkowitz	-	-	-	-
Dr. Bridgeman	Х	Υ	Y	Υ
Dr. Bekker	Х	Υ	Υ	Υ
Dr. Johansen	Х	Υ	Υ	Υ
Dr. Kennedy	Х	Υ	Υ	Υ
Dr. Levounis	Х	Υ	N	N
Dr. Scerbo	Х	Υ	Υ	Υ
Dr. Zarus	-	-	•	-
TOTAL	6	6-Y	5–Y	5-Y
		0-N	1–N	1-N
TOTAL Absent				

KEY: Y=YES N=NO A=ABSTAIN (---)=ABSENT

MAY 11, 2017 MEDICINAL MARIJUANA REVIEW PANEL VOTING RECORD

VOTING BOARD MEMBER	4	5	6	7	8
Dr. Berkowitz	-	-	-	-	-
Dr. Bridgeman	Y	N	Υ	Υ	N
Dr. Bekker	Y	N	Υ	Υ	N
Dr. Johansen	Y	N	Υ	Υ	N
Dr. Kennedy	Y	N	Υ	Υ	N
Dr. Levounis	N	N	N	N	N
Dr. Scerbo	Y	N	Υ	Υ	N
Dr. Zarus	-	-	-	-	-
TOTAL	5-Y 1-N	0-Y 6-N	5–Y 1–N	5-Y 1-N	0-Y 6-N
TOTAL Absent					

KEY: Y=YES N=NO A=ABSTAIN (--)=ABSENT

DETAILS TAKEN FROM ATTACHED TRANSCRIPT OF MAY 11, 2017 by Guy J. Renzi & Associates

Upon unanimous affirmative response, the matter stands adjourned (Meeting adjourned at 10:20 a.m.)

1		STATE OF NEW JERSEY
2	DEPARTMI	ENT OF HEALTH AND SENIOR SERVICES
3		
4		x
5	IN RE:	:
6	MEDICAL MA	ARIJUANA :
7	REVIEW PAI	NEL MEETING :
8		x
9		
10	LOCATION:	War Memorial
11		One Memorial Drive
12		Trenton, New Jersey 08608
13	DATE:	Thursday, May 11, 2017
14	TIME:	10:00 a.m.
15		
16		
17		
18		
19		GUY J. RENZI & ASSOCIATES
20	CERTIFII	ED COURT REPORTERS & VIDEOGRAPHERS
21	GC	OLDEN CREST CORPORATE CENTER
22	2275	7 STATE HIGHWAY #33, SUITE 410
23		TRENTON, NEW JERSEY 08690
24	TEL: (609)	989-9199 TOLL FREE: (800) 368-7652
25		www.renziassociates.com

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1 HELD BEFORE:
 2
3 ALEX BEKKER, M.D., Ph.D.
4 MICHELE STARK
5 MELISSA BAYLY, DAG
6 JESSICA ANNE SCERBO, M.D.
7 CHERYL A. KENNEDY, M.D.
8 PETROS LEVOUNIS, M.D., M.A.
9 MARY L. JOHANSEN, Ph.D., NE-BC, R.N.
10 MARY M. BRIDGEMAN, Pharm.D.
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		3
1	INDEX	
2	ITEM	PAGE
3	Call to Order	
4	Michele Stark	4
5	Public Comment	
6	James Miller	11
7	Edward Garris	13
8	Anthony Lomberti	23
9	Adjournment	24
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		- 1
24		- 1
25		- 1

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1	MS. STARK: This is a formal meeting of
2	the Medicinal Marijuana Review Panel. Adequate
3	notice of this meeting has been published in
4	accordance with the provisions of Chapter 231,
5	public Law, 1975 C-10:4.10 of the State of New
6	Jersey entitled Open public Meetings Act. Notice
7	was sent to the Secretary of State, who posted the
8	Notice in a public place. Notices were published
9	in two newspapers; the Star Ledger and Courier
10	Post, and forwarded to the press covering the
11	Statehouse. I will now call roll.
12	Dr. Berkowitz is excused.
13	Dr. Bridgeman?
14	DR. BRIDGEMAN: Here.
15	MS. STARK: Dr. Bekker?
16	DR. BEKKER: Here.
17	MS. STARK: Dr. Johansen?
18	DR. JOHANSEN: Here.
19	MS. STARK: Dr. Kennedy?
20	DR. KENNEDY: Present.
21	MS. STARK: Dr. Levounis?
22	DR. LEVOUNIS: Here.
23	MS. STARK: Dr. Scerbo?
24	DR. SCERBO: Here.
25	MS. STARK: And Dr. Zarus is excused. We

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1	have six members of the board present, which is a
2	quorum.
3	DR. BEKKER: So minutes of our previous
4	meeting on February 22nd have been distributed to
5	the panel for review.
6	Does anyone have any questions, comments,
7	corrections?
8	DR. KENNEDY: Dr. Bekker, I'd like to have
9	a revision of the meetings for members present,
10	unless there is some Michael Kennedy that we don't
11	know. The name is Cheryl, C-H-E-R-Y-L.
12	MS. STARK: I'll have that changed.
13	DR. BEKKER: And if there are no other
14	comments, I will call for a motion to approve the
15	minutes.
16	DR. LEVOUNIS: So moved.
17	DR. BEKKER: Second?
18	DR. JOHANSEN: Second.
19	DR. BEKKER: Minutes are approved.
20	MS. STARK: Dr. Bridgeman?
21	DR. BRIDGEMAN: Yes.
22	MS. STARK: Dr. Bekker?
23	DR. BEKKER: Yes.
24	MS. STARK: Dr. Johansen?
25	DR. JOHANSEN: Yes.

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1	MS. STARK: Dr. Kennedy?
2	DR. KENNEDY: Yes.
3	MS. STARK: Dr. Levounis?
4	DR. LEVOUNIS: Yes.
5	MS. STARK: And Dr. Scerbo?
6	DR. SCERBO: Yes.
7	MS. STARK: Motion carries.
8	DR. BEKKER: Should I proceed?
9	MS. STARK: Yes.
10	DR. BEKKER: Ladies and Gentlemen, this is
11	the Medicinal Review Panel. We will discuss 45
12	petitions for additional debilitating medical
13	conditions. I will read 45 conditions allowed by
14	a group. We group all categories to seven
15	categories, so I will read the categories.
16	Any recusal?
17	(No response.)
18	DR. BEKKER: Michele, there is no recusal.
19	So our first condition, Chronic Pain
20	Related to Musculoskeletal Disorder. The
21	following petitioner asked us to review the
22	condition:
23	Petition 11, chronic pain.
24	Petition 17, chronic non-cancer pain.
25	Petition 28, chronic pain.

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1	Petition 35, chronic pain as a result of
2	daily sciatic nerve pain.
3	Petition 51, chronic pain.
4	Petition 8, sporadic hemiplegic migraine.
5	Petition 37, spinal stenosis, herniated
6	disc, arthritis, broken shoulder, peripheral
7	vascular disease.
8	Petition 38, complex regional pain
9	syndrome type 1 and type 2.
10	Petition 40, back, low back, neck, leg
11	spasms, chronic pain, spinal fusion, muscle
12	spasms, multiple injuries and surgeries.
13	Petition 45, lumbar spine: Disc
14	herniations, degenerative disc disease.
15	Petition 49, severe and chronic
16	intractable pain and depression.
17	Petition 23, reflex sympathic dystrophy
18	and CRPS, or has a name, complex regional pain
19	syndrome.
20	Petition 56, complex regional pain
21	syndrome.
22	Petition 1, neural foraminal stenosis.
23	Petition 6, peripheral neuropathy.
24	Petition 10, neuropathic pain.
25	Petition 12, lumbar radiculopathy, chronic

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1	pain syndrome, lumbar post-laminectomy,
2	cervicalgia, neuropathic pain.
3	Petition 48, cauda equina syndrome.
4	Petition 50, Arnold-Chiari Malformation.
5	Petition 58, neuropathic pain:
6	Peripheral/central, autonomic, diabetic,
7	toxic/inflammatory, hereditary, acquired or
8	idiopathic pain.
9	Petition 19, arthritis.
10	Petition 22, arthritis.
11	Petition 26, primary generalized (Osteo)
12	arthritis.
13	Petition 47, Rheumatoid arthritis.
14	Petition 59, Autoimmune disorder;
15	Rheumatoid arthritis, systemic lupus, systemic
16	sclerosis/scleroderma.
17	Petition 31, chronic late stage Lyme's
18	disease, pain.
19	Petition 63, opioid use disorder.
20	Petition 9, systemic lupus erythematosus.
21	Petition 52 and 54,
22	fibromyalgia/osteoarthritis.
23	Petition 57, fibromyalgia related to
24	chronic pain related to musculoskeletal disorder.
25	So all of these conditions are related to

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1	chronic pain related to musculoskeletal disorder.
2	Second disorder we'll discuss today is
3	petition 36, migraine.
4	Petition 13, migraine.
5	Petition 16, transformed migraine, also
6	known as chronic migraine.
7	Petition 61, chronic migraine.
8	Next condition is Anxiety. Petition 14,
9	anxiety.
10	Petition 33, anxiety secondary to autism.
11	Petition 53, anxiety secondary to
12	Alzheimer's disease.
13	Next condition, Asthma. Petition 20,
14	asthma.
15	Next condition, Chronic Pain of Visceral
16	Origin. Petition 65, chronic acute pancreatitis.
17	Petition 32, multisystem atrophy, complex
18	tremors, neurogenic bladder and bowel; ataxia.
19	Petition 60, irritable bowel syndrome.
20	Next condition is Tourette syndrome.
21	Petition 42 is Tourette syndrome.
22	And the last condition for today is
23	chronic fatigue, petition 55, chronic fatigue
24	syndrome, myalgic encephalomyelitis.
25	These are our conditions. So I guess next

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order of business would be discussion and 1 ultimately rule on each of the conditions. 2 Correct, Michelle? 3 4 MS. STARK: Yes. 5 DR. BEKKER: So, Members of the Panel, 6 first condition we are considering is Chronic Pain 7 Relating to Musculoskeletal Disorder. comments, any suggestions? 8 9 (No response.) 10 DR. BEKKER: Okay. Members of the public, 11 you have a chance to comment on this condition, you have three minutes for your comment. 12 try to limit it to this time allotment. 13 14 We have six people who signed in to come into our deliberation. So first person who signed 15 in is Mr. Sam Weinstein. 16 17 MR. WEINSTEIN: I was just told to sign 18 I have nothing to say. Thank you, though. 19 DR. BEKKER: Next person is Mr. James 20 Miller, Coalition For Medical Marijuana in New 21 Jersey. Mr. Miller, would you like to comment? MR. MILLER: Yes, I would. Can I just do 22 23 so from here? DR. BEKKER: I don't know. What is the 24 25 actual procedure?

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MS. STARK: Come up.

2.1

MR. MILLER: Thank you all for making sure we knew about this in time to show up. I just heard this through the state because I always have something to say about medical marijuana.

I got involved with it in New Jersey in 1993 when I pushed my wife's wheelchair across the state from Seaside to Trenton, 25 hours, just to get people to show up. So now all these years later it's a tsunami coming on.

My only concern is the opioid epidemic that is escalating. Everybody's talking about it. I am not hearing enough about the synergistic effect of Cannibis on opiates, and it's demonstrable and having been demonstrated effective.

When people understand that if you need ten units of an opiate without Cannibis and you need 10 units of Cannibis for pain relief without opiates, you won't need 5 units of each, you might need 2 units of each.

All I hear is hundreds, literally hundreds, of testimonials from patients on the reduction of their opiate use. Any statements coming from you, the Medical Marijuana Advisory

Panel, or whatever your official title is, would go a long way to bring this into the forefront and consciousness of people with reaching New Jersey's efforts at fighting people -- for people who are already addicted.

We want to keep people from becoming addicted. And the health department tells us that keeping lower opiate limits is the key. It's also going to drive people to the black market for that same opiate the first time they're told no. It's going to accelerate some people getting into the black market.

And if they knew that Cannibis could help, and if it became easier for Cannibis to help -- the American Medical Association does say that the average states that do this have a 25 percent reduction in the mortality rate from opioid overdose deaths, both legally and illegally.

So that's my concern, I'm not hearing enough about it. I'm about to start my own website, reachCMMNJ.com and .org. Just a coalition for medical marijuana in the state's program. Because if the state can take care of the people who are addicted and want to do that, but if they don't really respond to the incredible

1	nature of what could be done with Cannibis to
2	help, then advocates have to step in, and I think
3	that's your job before mine.
4	And I appreciate all the work you've done
5	so far. I like the indications I've seen, and I
6	hope we're on the right path that I think we are.
7	Thank you for giving me the opportunity to
8	speak.
9	DR. BEKKER: Any question of the member of
10	the panel?
11	(No response.)
12	DR. BEKKER: No questions.
13	Next person who signed up is Darrah
14	Servis.
15	MS. SERVIS: It's Darrah Servis, but I
16	just signed in.
17	DR. BEKKER: So the next person is
18	Michelle Perrins.
19	MS. PERRINS: I'm not going to speak.
20	DR. BEKKER: So next person, Mr. Edward
21	Garris.
22	MR. GARRIS: Yeah, I'll speak. I wasn't
23	planning on speaking, but if you're giving me the
24	opportunity, I'll speak.
25	DR. BEKKER: You have the opportunity.

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MR. GARRIS: I spoke last time, and actually the last time I was here I was very upset that they would drag patients into their room and make them beg for their lives, for their condition. I don't know if you remember that. But how do you pick and choose who suffers and who doesn't suffer.

I suffer from chronic pain, but I couldn't get Cannibis for chronic pain, I got it for spacticity, which is one of my other issues, but it's not my major issue, but my major issue is chronic pain.

It took me a year to get my Cannibis card. The doctor that I went to in Bayonne, Dr. Aktar, charged me \$400 a visit in cash every time I had to see her, and I had to see her four times. It's a lot of money for somebody who is on disability and Social Security.

I left Dr. Aktar and I went to another doctor for about a year. He left, went to go to the VA, left me stranded without a doctor. So now I had to find another doctor, which is not easy, because all doctors want cash. It's all about money now. It's not about compassion, it's not about caring for the patients, it's about money.

The doctor in Bayonne was a profiteer. I see a lot of profiteers making money off of these sick people, and it's disgusting. I hope there's something we can do to help these patients and give them more compassion than has been shown so far in the New Jersey Cannibis program. So far I haven't seen any compassion.

2.1

I wear a wrist band on my arm. Her name is Sabina Rose. She was a 15-month-old baby, she died waiting for her Cannibis card. She waited just like I had to wait, but she wasn't as strong as me and she died waiting. And there's a lot of people who die waiting that shouldn't have to wait.

One of the things that Joe Gulla (ph) was saying, that we need to -- he's a candidate for governor -- to streamline the process, to get the patients their Cannibis faster, and there should not be a \$200 charge for patients to pay for their Cannibis card, and there should not be a 7% tax on our Cannibis. It's the only medicine that's taxed that I know of. So we need to help these patients.

That's all I have to say. Thank you.

DR. BEKKER: Members of the Panel, any

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1	questions?
2	(No response.)
3	Thank you. So the last person to sign is
4	Miss Heffner?
5	MR. HEFFNER: I didn't want to speak.
6	Thank you.
7	DR. BEKKER: Okay. I don't have any more
8	sign-ins. Anybody else like to comment? Oh, we
9	have four more people, Michelle/Michael Hasam
10	(ph).
11	MS. HASAM: We all thought it was just a
12	sign-in.
13	DR. BEKKER: Just in case, I'll say your
14	name, and if you want to speak, come up.
15	Anna Chakum (ph)?
16	MS. CHAKUM: Yeah, the same, I just signed
17	in.
18	DR. BEKKER: Sam Salman?
19	And last one would be, I think, it's Kathy
20	Genchek (ph).
21	MS. GENCHEK: I was just signing in.
22	DR. BEKKER: Any further discussion from
23	the members of the panel on these topics?
24	DR. KENNEDY: On which one?
25	DR. BEKKER: On any of these conditions.

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1	DR. KENNEDY: Chronic pain, though. We're
2	not doing them all yet, right?
3	DR. BEKKER: This is just a general
4	discussion. Now, we will start going one by one.
5	So first condition we're going to vote is
6	the Chronic Pain Related to Musculoskeletal
7	Disorder.
8	Anybody that would like to comment? I'm
9	pretty sure all of us, just for public, all of us
10	review current literature on the subject, so it's
11	not like the first time we are figuring out what
12	it is. We have lots of communication between us,
13	and I would consider all of us experts in the
14	field. So it's just for you to know that it's not
15	new for us.
16	Motion to vote on chronic pain related to
17	musculoskeletal disorders.
18	DR. JOHANSEN: Yes.
19	DR. BEKKER: Second?
20	DR. BRIDGEMAN: Second.
21	DR. BEKKER: So we're going to vote on
22	approval on recommendation of marijuana for
23	chronic pain related to musculoskeletal disorder.
24	MS. STARK: Dr. Bridgeman?
25	DR. BRIDGEMAN: Yes.

1	MS. STARK: Dr. Bekker?
2	DR. BEKKER: Yes.
3	MS. STARK: Dr. Johansen?
4	DR. JOHANSEN: Yes.
5	MS. STARK: Dr. Kennedy?
6	DR. KENNEDY: Yes.
7	MS. STARK: Dr. Levounis?
8	DR. LEVOUNIS: No.
9	MS. STARK: And Dr. Scerbo?
10	DR. SCERBO: Yes.
11	MS. STARK: Motion carries.
12	DR. BEKKER: We can go to next condition.
13	Next condition we're going to go to is migraine.
14	Again, I want to emphasize the point that all of
15	us are familiar with current literature on the
16	subject.
17	So motion to vote.
18	DR. BRIDGEMAN: Second.
19	DR. BEKKER: So we're going to vote on
20	condition approving of medical marijuana for
21	migraine.
22	MS. STARK: Dr. Bridgeman?
23	DR. BRIDGEMAN: Yes.
24	MS. STARK: Dr. Bekker?
25	DR. BEKKER: Yes.

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1	MS. STARK: Dr. Johansen?
2	DR. JOHANSEN: Yes.
3	MS. STARK: Dr. Kennedy?
4	DR. KENNEDY: Yes.
5	MS. STARK: Dr. Levounis?
6	DR. LEVOUNIS: No.
7	MS. STARK: Dr. Scerbo?
8	DR. SCERBO: Yes.
9	MS. STARK: Motion carries.
10	DR. BEKKER: Okay. Next condition we're
11	going to vote is anxiety. Recommendation for use
12	of medical marijuana for anxiety, and it can be
13	anxiety for particular disease like autism or
14	Alzheimer's.
15	So do we have a motion to vote?
16	DR. JOHANSEN: Yes.
17	DR. BEKKER: Do we have a second?
18	DR. BRIDGEMAN: Second.
19	MS. STARK: Dr. Bridgeman?
20	DR. BRIDGEMAN: Yes.
21	MS. STARK: Dr. Bekker?
22	DR. BEKKER: Yes.
23	MS. STARK: Dr. Johansen?
24	DR. JOHANSEN: Yes.
25	MS. STARK: Dr. Kennedy?

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1	DR. KENNEDY: Yes.
2	MS. STARK: Dr. Levounis?
3	DR. LEVOUNIS: No.
4	MS. STARK: And Dr. Scerbo?
5	DR. SCERBO: Yes.
6	MS. STARK: Motion carries.
7	DR. BEKKER: Next condition is asthma, and
8	it's one petition for asthma. Motion to vote?
9	DR. JOHANSEN: Yes.
10	DR. BRIDGEMAN: Second.
11	MS. STARK: Dr. Bridgeman?
12	DR. BRIDGEMAN: No.
13	MS. STARK: Dr. Bekker?
14	DR. BEKKER: No.
15	MS. STARK: Dr. Johansen?
16	DR. JOHANSEN: No.
17	MS. STARK: Dr. Kennedy?
18	DR. KENNEDY: No.
19	MS. STARK: Dr. Levounis?
20	DR. LEVOUNIS: No.
21	MS. STARK: And Dr. Scerbo?
22	DR. SCERBO: No.
23	MS. STARK: Motion does not carry.
24	DR. BEKKER: The next condition we will
25	cover is Chronic Pain of Visceral Origin, which

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1	includes chronic pancreatitis, irritable bowel				
2	syndrome, and similar.				
3	So do we have a motion to vote?				
4	DR. KENNEDY: Yes.				
5	DR. LEVOUNIS: Second.				
6	DR. BEKKER: Michele?				
7	MS. STARK: Dr. Bridgeman?				
8	DR. BRIDGEMAN: Yes.				
9	MS. STARK: Dr. Bekker?				
10	DR. BEKKER: Yes.				
11	MS. STARK: Dr. Johansen?				
12	DR. JOHANSEN: Yes.				
13	MS. STARK: Dr. Kennedy?				
14	DR. KENNEDY: Yes.				
15	MS. STARK: Dr. Levounis?				
16	DR. LEVOUNIS: No.				
17	MS. STARK: And Dr. Scerbo?				
18	DR. SCERBO: Yes.				
19	MS. STARK: Motion carries.				
20	DR. BEKKER: Next condition we are				
21	considering is Tourette Syndrome.				
22	DR. KENNEDY: Move to approve.				
23	DR. JOHANSEN: Second.				
24	DR. BEKKER: We have a second.				
25	MS. STARK: Dr. Bridgeman?				

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1	DR. BRIDGEMAN: Yes.
2	MS. STARK: Dr. Bekker?
3	DR. BEKKER: Yes.
4	MS. STARK: Dr. Johansen?
5	DR. JOHANSEN: Yes.
6	MS. STARK: Dr. Kennedy?
7	DR. KENNEDY: Yes.
8	MS. STARK: Dr. Levounis?
9	DR. LEVOUNIS: No.
10	MS. STARK: And Dr. Scerbo?
11	DR. SCERBO: Yes.
12	MS. STARK: Motion carries.
13	DR. BEKKER: And the last condition we're
14	going to vote today, it's chronic fatigue
15	syndrome.
16	So do we have a motion to approve for
17	recommendation?
18	DR. JOHANSEN: Yes.
19	DR. BEKKER: Second.
20	DR. KENNEDY: Second.
21	MS. STARK: Dr. Bridgeman?
22	DR. BRIDGEMAN: No.
23	MS. STARK: Dr. Bekker?
24	DR. BEKKER: No.
25	MS. STARK: Dr. Johansen?

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1	DR. JOHANSEN: No.
2	MS. STARK: Dr. Kennedy?
3	DR. KENNEDY: No.
4	MS. STARK: Dr. Levounis?
5	DR. LEVOUNIS: No.
6	MS. STARK: And Dr. Scerbo?
7	DR. SCERBO: No.
8	MS. STARK: Motion does not carry.
9	DR. BEKKER: After you heard our
10	addressing of members to the public right now, if
11	you have additional comments, concerns, this is
12	your time. You're still limited to three minutes
13	for your comments. So any public comments?
14	MR. LOMBERTI: My name is Anthony
15	Lomberti. I suffer from chronic pain syndrome
16	and post-concussion syndrome and some other
17	problems. I was on 480 milligrams of oxycodone a
18	day, half a milligram of Klonopin twice a day.
19	I'm on no pharmaceuticals today because of
20	Cannibis.
21	Thank you.
22	DR. BEKKER: Thank you. Any other
23	comments?
24	(No response.)
25	Unless there are any other further

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comment, I will call for a motion to adjourn.
 1
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                    DR. KENNEDY: Motion to adjourn.
 3
                    DR. LEVOUNIS: Second.
 4
                    DR. BEKKER: Okay. Ladies and Gentleman,
 5
           thank you for your cooperation.
                         (Hearing concluded at 10:20 a.m.)
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CERTIFICATE 1 2 I, LAURA P. REAM, a Register Court 3 Reporter, License No. 30XT00004000, and Notary Public of 4 the State of New Jersey, that the foregoing is a true 5 and accurate transcript of the testimony as taken 6 stenographically by and before me at the time, place and on the date hereinbefore set forth. 7 8 9 I DO FURTHER CERTIFY that I am neither a 10 relative nor employee nor attorney nor counsel of any of 11 the parties to this action, and that I am neither a 12 relative nor employee of such attorney or counsel, and 13 that I am not financially interested in the action. 14 15 16 17 18 19 20 21 LAURA P. REAM, Notary Public 22 Notary Public of the State of New Jersey 23 CCR NO. 30XT00004000 24 My Commission Expires September 8, 2020 25 DATE: June 5, 2017

	annered F · 10	16:25 17:3	23:20
A	approved 5:19		card 14:13
a.m1:14 24:6	approving	17:19,21	
accelerate	18:20	18:1,2,12,19	15:10,20
12:11	arm 15:8	18:24,25	care 12:23
accurate 25:5	Arnold-Chiari	19:10,17,21	caring 14:25
acquired 8:7	8:4	19:22 20:7	carries 6:7
Act 4:6	arthritis 7:6	20:13,14,24	18:11 19:9
action 25:11	8:9,10,12,13	21:6,9,10,20	20:6 21:19
25:13	8:15	21:24 22:2,3	22:12
actual 10:25	asked 6:21	22:13,19,23	carry 20:23
acute 9:16	ASSOCIATES	22:24 23:9	23:8
addicted 12:5	1:19	23:22 24:4	case 16:13
12:7,24	Association	Berkowitz 4:12	cash 14:15,23
additional	12:15	black 12:9,12	categories
6:12 23:11	asthma 9:13,14	bladder 9:18	6:14,15,15
addressing	20:7,8	board 5:1	cauda 8:3
23:10	ataxia 9:18	bowel 9:18,19	CCR 25:23
Adequate 4:2	atrophy 9:17	21:1	CENTER 1:21
adjourn 24:1,2	attorney 25:10	Bridgeman 2:10	CERTIFIED 1:20
Adjournment	25:12	4:13,14 5:20	CERTIFY 25:9
3:9	autism9:10	5:21 17:20	cervicalgia
Advisory 11:25	19:13	17:24,25	8:2
advocates 13:2	Autoimmune	18:18,22,23	Chakum 16:15
Aktar 14:14,19	8:14	19:18,19,20	16:16
ALEX 2:3	autonomic 8:6	20:10,11,12	chance 10:11
allotment	average 12:16	21:7,8,25	changed 5:12
10:13		22:1,21,22	Chapter 4:4
allowed 6:13	<u>B</u>	bring 12:2	charge 15:19
Alzheimer's	baby 15:9	broken 7:6	charged 14:15
9:12 19:14	back 7:10,10	business 10:1	Cheryl 2:7
American 12:15	band 15:8		5:11
Anna 16:15	BAYLY 2:5	-	choose 14:6
ANNE 2:6	Bayonne 14:14	C25:1,1	chronic 6:19
Anthony 3:8	15:1	C-10:4.10 4:5	6:23,24,25
23:14	becoming 12:6	C-H-E-R-Y-L	7:1,3,11,15
anxiety 9:8,9	beg 14:4	5:11	7:25 8:17,24
9:10,11	Bekker 2:3	call 3:3 4:11	9:1,6,7,15
19:11,12,13	4:15,16 5:3	5:14 24:1	9:16,23,23
Anybody 16:8	5:8,13,17,19	candidate	10:6 14:8,9
17:8	5:22,23 6:8	15:16	14:12 17:1,6
appreciate	6:10,18 10:5	Cannibis 11:14	17:16,23
13:4	10:10,19,24	11:18,19	20:25 21:1
approval 17:22	13:9,12,17	12:13,14	22:14 23:15
approve 5:14	13:20,25	13:1 14:9,13	coalition
21:22 22:16	15:25 16:7	15:6,10,18	10:20 12:22
	16:13,18,22	15:20,21	come 10:14
	<u> </u>	<u> </u>	I

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11:1 16:14 coming 11:10 counsel 25:10 17:4 17:14 19:16,17,18 19:12,23,24 19:22,23,24				
coming 11:10 11:25 25:12 25:12 17:4 4 19:16, 17, 18 19:12, 23, 24:1 25:12 25:12 26:25	11:1 16:14	5:7	10:1 16:22	19:6.7.8.10
11:25				
comment 3:5 Courier 4:9 8:18 9:12 19:22,23,24 10:11,12,21 25:2 disgusting 20:3,4,5,7,9 24:1 cover 20:25 covering 4:10 20:3,4,5,7,9 5:14 10:8 CREST1:21 8:14,19,24 20:10,11,12 23:11,13,13 23:23 CREST1:21 8:14,19,24 20:16,17,18 23:23 Current 17:10 18:15 17:7,23 20:22,24 communication 17:12 D 17:17 20:22,24 compassion 14:24 15:5,7 DAG 2:5 daily7:2 17:17 20:22,24 complex 7:8,18 7:20 9:17 daily7:2 17:17 21:9,10,11 concern 11:11 12:19 datel:13 25:7 doctor 14:14 21:12,56,7,8 condition 6:19 6:22 9:8,13 9:15,20,22 4:24,25:5 22:10,11,13 g:15,20,22 deaths 12:18 debilitating 4:21,22,23 22:21,22,23 6:12 department 1:2 5:20,21,22 22:10,11,13 19:15 demonstrable 11:15 6:6,8,10,18 6:1,2,3,4,5 <t< th=""><th>_</th><th></th><th></th><th></th></t<>	_			
10:11,12,21			_	
16:8 17:8				•
24:1 comments 5:6 5:14 10:8 CREST 1:21 CREST 1:21 CRPS 7:18 Current 17:10 17:7,23 20:22,24 disorders 21:4,5,6,7,8 21:9,10,11 21:12,13,14 21:15,16,17 21:18,20,22 22:16,27,8,9 22:16,28,8,13,16 22:18,19,20 22:21,22,23 23:16,23,4,5 23:16,				· · · · · · · · · · · · · · · · · · ·
comments 5:6 covering 4:10 disorder 6:20 20:13,14,15 5:14 10:8 23:11,13,13 23:23 20:19,20,21 20:16,17,18 CRPS 7:18 current 17:10 17:7,23 20:22,24 Commission 18:15 17:7,23 20:22,24 communication D 17:17 20:22,24 compassion 14:24 15:5,7 daily 7:2 21:4,5,6,7,8 complex 7:8,18 7:20 9:17 daily 7:2 21:15,16,17 concern 11:11 13:15 doctor 14:14 21:18,20,22 date 1:13 25:7 daily 7:2 22:21,2,34,5 concern 23:11 day 23:18,18 deaths 12:18 dectors 14:23 doctors 14:23 22:6,7,8,9 debilitating 6:12 4:15,16,17 22:21,2,23,4,5 22:12,2,23 6:22 9:8,13 9:15,20,22 degenerative 5:8,8,13,16 4:21,22,23 22:24,25 18:13,20 10:15 5:23,24,25 23:6,7,9,22 23:12,23,4,5 6:13,13 8:25 demonstrable 10:5,10,19 12:9 deremonstrated 10:5,10				
S:14 10:8 CREST 1:21 S:14,19,24 20:16,17,18 23:23 Commission 18:15 T:7,23 disorders 17:17 disorders 17:17 disorders 17:17 disorders 17:17 disorders 17:17 discretion 17:12 Compassion 14:24 15:5,7 Complex 7:8,18 7:20 9:17 Concern 11:11 data 23:18,18 deaths 12:18 deaths 12:12 deaths 12:18 deaths 12:12 deaths 12:12 deaths 12:12 deaths 12:12 deaths 12:13 deaths 12:12 deaths 12:14 deaths 12:12 deaths 12:14 deaths 12:14 deaths 12:15 deaths 12:14 deaths 12:14 deaths 12:15 deaths 12:14 deaths 12:14 deaths 12:15 deaths 12:14 deaths 12:15 deaths 12:14 deaths 12:15 deaths 12:14 deaths 12:15 deaths 12:14 deat				
23:11,13,13 23:23 3 23:23 3 23:25 23:23 23:25 23:23 23:25 23:23 23:25		1		
23:23 Commission 18:15 17:7,23 disorders 21:4,5,6,7,8 21:9,10,11 distributed 21:12,13,14 21:15,16,17 doctors14:14 21:18,20,22 21:23,24,25 doctors14:14 21:18,20,22 21:23,24,25 doctors14:14 22:16,7,8,9 doctors14:23 doctor				
Commission 25:24			· ·	l ' '
25:24				•
communication D distributed 21:12,13,14 compassion DAG 2:5 daily 7:2 doctor 14:14 21:15,16,17 complex 7:8,18 7:20 9:17 date 1:13 25:7 15:1 22:1,23,24,25 concern 11:11 12:19 date 1:13 25:7 doctors 14:23 22:10,11,13 concerns 23:11 day 23:18,18 dectors 14:2,13,14 22:10,11,13 concluded 24:6 deaths 12:18 4:15,16,17 22:10,21,23 deaths 12:18 debilitating 4:21,22,23 22:10,11,13 9:15,20,22 degenerative 5:8,8,13,16 22:21,22,23 17:5 18:12 7:14 4:17,18,19 4:24,25 5:3 23:6,7,9,22 19:10 20:7 demonstrable 5:20,21,22 23:2,24,25 24:23,34 24:23,34 11:15 demonstrable 10:5,24,13:9 6:6,8,10,18 4:21,22,23 4:22,3,4 4:23,24,25 19:10 20:7 demonstrated 10:5,10,19 E E 2:13 department 1:2 13:12,17,20 13:25,14:14 4:21,23,4,5 4:22,23		18:15		
Sommitmited 17:12		Π		
compassion DAG 2:5 doctor 14:14 21:18,20,22 14:24 15:5,7 complex 7:8,18 7:20 9:17 13:15 doctors 14:23 22:1,2,3,4,5 concern 11:11 13:15 doctors 14:23 22:1,2,3,4,5 concerns 23:11 concerns 23:11 concluded 24:6 condition 6:19 deaths 12:18 4:15,16,17 22:21,22,23 condition 6:19 debilitating 4:21,22,23 22:10,21,22 22:1,22,23 6:22 9:8,13 9:15,20,22 degenerative 5:8,81,3,16 24:2,3,4,5 10:6,11 14:5 7:14 5:17,18,19 drag14:3 17:5 18:12 10:15 5:23,24,25 23:1,23,4,5 19:10 20:7 demonstrable 10:5,10,19 12:9 19:10 20:7 demonstrated 10:5,10,19 E3:1 25:1,1 6:13,13 8:25 depression 10:24 13:9 6:3:1 25:1,1 6:25 12:7 13:25 14:14 easy14:22 9:25 10:2 12:7 13:25 14:14 easy14:22 6:13,13 8:25 6:12,2,24,25 6:7,13,18 13:20				
14:24 15:5,7 complex 7:8,18 7:20 9:17 date 1:13 25:7 concern 11:11 12:19 concern 23:11 concluded 24:6 condition 6:19 6:22 9:8,13 9:15,20,22 10:6,11 14:5 17:5 18:12 18:13,20 10:15 19:10 20:7 20:24 21:20 22:13 conditions 6:13,13 8:25 9:25 10:2 16:25 consciousness 12:3 consider 17:13 considering 10:6 21:21 cooperation 24:5		_		
complex 7:8, 18 Darrah 13:13 15:1 22:1,2,3,4,5 7:20 9:17 date 1:13 25:7 doing 17:2 22:10,11,13 12:19 25:25 Dr 4:12,13,14 22:18,19,20 concerns 23:11 day 23:18,18 4:15,16,17 22:21,22,23 condition 6:19 deaths 12:18 4:18,19,20 22:24,25 condition 6:19 debilitating 4:21,22,23 23:1,2,3,4,5 6:22 9:8,13 6:12 4:24,25 5:3 23:6,7,9,22 10:6,11 14:5 7:14 5:17,18,19 drag14:3 17:5 18:12 deliberation 5:20,21,22 drive 1:11 18:13,20 10:15 6:6,8,10,18 12:9 19:10 20:7 demonstrable 6:1,2,3,4,5 4:24,25 22:13 demonstrated 10:5,10,19 12:9 6:13,13 8:25 department 1:2 13:22,17,20 23:1 25:1,1 9:25 10:2 12:7 13:25 14:14 easy14:22 Edward 3:7 13:20 Effect 11:14 consciousness 16:7,13,18 16:22,24,25 13:20 <th>I -</th> <th></th> <th></th> <th></th>	I -			
7:20 9:17 concern 11:11 12:19 concerns 23:11 concluded 24:6 condition 6:19 6:22 9:8,13 9:15,20,22 10:6,11 14:5 17:5 18:12 18:13,20 19:10 20:7 20:24 21:20 22:13 conditions 11:15 6:13,13 8:25 9:25 10:2 12:7 16:25 department 1:2 10:6 21:21 10:6 21:21 10:6 21:21 10:6 21:21 10:6 21:21 10:6 21:21 10:6 21:21 10:6 21:21 10:6 21:21 10:6 21:21 10:6 21:21 10:6 21:21 10:7 14:17 24:5 10:6 27:6,13,14 18:18,19,22 18:14 employee 25:10	•	_		
concern 11:11 date 1:13 25:7 doing 17:2 22:10,11,13 12:19 25:25 Dr 4:12,13,14 22:18,19,20 concluded 24:6 deaths 12:18 4:15,16,17 22:21,22,23 condition 6:19 debilitating 4:21,22,23 22:24,25 6:22 9:8,13 6:12 4:24,25 5:3 23:6,7,9,22 10:6,11 14:5 7:14 5:8,8,13,16 24:2,3,4 17:5 18:12 deliberation 5:20,21,22 drag 14:3 18:13,20 10:15 5:23,24,25 dystrophy 7:17 20:24 21:20 11:15 6:6,8,10,18 dystrophy 7:17 22:13 demonstrated 10:5,10,19 E 6:13,13 8:25 department 1:2 13:12,17,20 easier 12:14 9:25 10:2 12:7 13:25 14:14 easy14:22 16:25 depression 7:16 16:7,13,18 13:20 10:6 21:21 diabetic 8:6 17:1,3,18,19 17:20,21,24 effect 11:14 conscidering died 15:10,12 17:25,18:1,2 efforts 12:4 cooperat				
12:19				
concerns 23:11 day 23:18,18 4:15,16,17 22:21,22,23 concluded 24:6 deaths 12:18 4:18,19,20 22:24,25 condition 6:19 debilitating 4:21,22,23 22:24,25 6:22 9:8,13 6:12 4:24,25 5:3 23:6,7,9,22 9:15,20,22 degenerative 5:8,8,13,16 24:2,3,4 17:5 18:12 deliberation 5:20,21,22 drive1:11 18:13,20 10:15 5:23,24,25 drive1:11 19:10 20:7 demonstrable 6:6,8,10,18 12:9 dystrophy 7:17 20:24 21:20 11:15 6:6,8,10,18 10:5,10,19 E 22:13 demonstrated 10:24 13:9 E3:1 25:1,1 6:13,13 8:25 department 1:2 13:12,17,20 easier 12:14 9:25 10:2 12:7 diabetic 8:6 16:7,13,18 E3:20 Edward 3:7 13:20 13:20 Edward 3:7 13:20 Effective 13:20 13:16 17:20,21,24 13:16 effective 13:20 14:17 18:3,4,5,6,7 </th <th></th> <th></th> <th>_</th> <th></th>			_	
concluded 24:6 deaths 12:18 4:18,19,20 22:24,25 condition 6:19 debilitating 4:21,22,23 23:1,2,3,4,5 6:22 9:8,13 6:12 4:24,25 5:3 23:6,7,9,22 9:15,20,22 degenerative 5:8,8,13,16 24:2,3,4 17:5 18:12 deliberation 5:20,21,22 drive1:11 18:13,20 10:15 5:23,24,25 drive1:11 19:10 20:7 demonstrable 6:6,8,10,18 12:9 20:24 21:20 demonstrated 10:5,10,19 E 22:13 demonstrated 10:24 13:9 E3:1 25:1,1 6:13,13 8:25 department 1:2 13:12,17,20 easier 12:14 9:25 10:2 12:7 depression 16:7,13,18 E3:1 25:1,1 consciousness 12:3 diabetic 8:6 6:2,24,25 Edward 3:7 13:20 13:20 13:20 Effect ive considering died 15:13 17:1,3,18,19 effective 10:6 21:21 disability 17:25 18:1,2 emphasize 14:17 <t< th=""><th></th><th></th><th></th><th></th></t<>				
condition 6:19 debilitating 4:21,22,23 23:1,2,3,4,5 6:22 9:8,13 6:12 4:24,25 5:3 23:6,7,9,22 9:15,20,22 degenerative 5:8,8,13,16 24:2,3,4 10:6,11 14:5 7:14 5:17,18,19 drag14:3 17:5 18:12 deliberation 5:20,21,22 drive1:11 18:13,20 10:15 5:23,24,25 12:9 19:10 20:7 demonstrable 6:1,2,3,4,5 dystrophy 7:17 20:24 21:20 11:15 6:6,8,10,18 dystrophy 7:17 22:13 demonstrated 10:5,10,19 E conditions 11:15 6:6,8,10,18 E 6:13,13 8:25 department1:2 13:12,17,20 easier12:14 9:25 10:2 12:7 13:25 14:14 easy14:22 Edward 3:7 13:20 effect 11:14 consciousness 16:7,13,18 16:22,24,25 effect 11:14 considering died 15:13 17:20,21,24 11:16 cooperation 14:17 18:3,4,5,6,7 emphasize		<u> </u>		
6:22 9:8,13 9:15,20,22 degenerative 5:8,8,13,16 24:2,3,4 drag14:3 drive1:11 18:13,20 10:15 5:23,24,25 demonstrable 11:15 demonstrated 11:15 demonstrated 11:15 department 1:2 12:7 depression 7:16 diabetic 8:6 consciousness 12:3 considering 10:6 21:21 cooperation 24:5 CORPORATE 1:21 Correct 10:3				
9:15,20,22 degenerative 5:8,8,13,16 24:2,3,4 10:6,11 14:5 7:14 5:17,18,19 drive1:11 17:5 18:12 10:15 5:20,21,22 drive1:11 18:13,20 10:15 6:1,2,3,4,5 dystrophy7:17 20:24 21:20 11:15 6:6,8,10,18 dystrophy7:17 20:24 21:20 11:15 6:6,8,10,18 E conditions 11:15 6:6,8,10,18 E 6:13,13 8:25 department1:2 13:12,17,20 easier12:14 9:25 10:2 12:7 13:25 14:14 easy14:22 16:25 depression 14:19 15:25 Edward 3:7 12:3 diabetic 8:6 16:7,13,18 13:20 consider 17:13 die 15:13 17:1,3,18,19 effect 11:14 considering 10:6 21:21 17:25 18:1,2 effective 10:6 21:21 disability 17:25 18:1,2 emphasize 14:17 18:3,4,5,6,7 emphasize 18:14 employee 25:10 Correct 10:3 9:2 18:23,24,25 25:12				
10:6,11 14:5	<u> </u>			
17:5 18:12 deliberation 10:15 5:20,21,22 drive1:11 12:9 demonstrable 11:15 6:6,8,10,18 demonstrated 10:5,10,19 E 3:1 25:1,1 demonstrated 12:7 depression 13:25 14:14 easy14:22 depression 16:25 depression 7:16 diabetic 8:6 diabeti				
18:13,20 10:15 5:23,24,25 12:9 19:10 20:7 demonstrable 6:1,2,3,4,5 dystrophy 7:17 20:24 21:20 11:15 6:6,8,10,18 E 22:13 demonstrated 10:5,10,19 E conditions 11:15 10:24 13:9 E3:1 25:1,1 6:13,13 8:25 department 1:2 13:12,17,20 easier 12:14 9:25 10:2 12:7 13:25 14:14 easy14:22 16:25 depression 14:19 15:25 Edward 3:7 12:3 diabetic 8:6 16:22,24,25 effect 11:14 consider 17:13 died 15:13 17:1,3,18,19 effect 11:14 considering died 15:10,12 17:20,21,24 11:16 10:6 21:21 disability 17:25,18:1,2 efforts 12:4 cooperation 14:17 18:3,4,5,6,7 emphasize CORPORATE 1:21 disc 7:6,13,14 18:18,19,22 employee 25:10 Correct 10:3 9:2 18:23,24,25 25:12	1			_
19:10 20:7				
11:15	<u> </u>			_
Conditions 11:15 10:5,10,19 10:24 13:9 10:24 13:9 10:24 13:9 10:24 13:9 10:24 13:9 10:25 10:2 12:7 13:25 14:14 easy14:22 10:23 diabetic 8:6 10:7,13,18 10:24,25 10:2				dystrophy 7:17
conditions 11:15 10:3,10,19 6:13,13 8:25 department 1:2 13:12,17,20 easier 12:14 9:25 10:2 12:7 13:25 14:14 easy 14:22 16:25 depression 14:19 15:25 Edward 3:7 consciousness 7:16 16:7,13,18 13:20 12:3 diabetic 8:6 16:22,24,25 effect 11:14 consider 17:13 died 15:13 17:1,3,18,19 effect ive 10:6 21:21 disability 17:20,21,24 11:16 10:6 21:21 disability 18:3,4,5,6,7 emphasize 14:17 18:8,9,10,12 18:14 CORPORATE 1:21 discuss 6:11 18:18,19,22 employee 25:10 Correct 10:3 9:2 18:23,24,25 25:12		_		
6:13,13 8:25 department 1:2 13:12,17,20 easier 12:14 easy 14:22 16:25 depression 14:19 15:25 Edward 3:7 13:20 effect 11:14 easy 14:22 Edward 3:7 easier 12:14 easy 14:22 easier 12:14 easy 14:22 Edward 3:7 easier 12:14 easy 14:22 Edward 3:7 easier 12:14 easy 14:22 easier 12:14 easy 14:22 easier 12:14 easy 14:22 Edward 3:7 easier 12:14 easy 14:22 effect 11:14 effective 17:20,21,24 effective 17:20,21,24 efforts 12:4 efforts 12:4 efforts 12:4 efforts 12:4 emphasize 18:14 emphasize 18:14 emphasize 18:14 employee 25:10 easier 12:14 easy 14:22 e				<u> </u>
9:25 10:2				
16:25 depression 14:19 15:25 Edward 3:7 consciousness 7:16 16:7,13,18 13:20 12:3 diabetic 8:6 16:22,24,25 effect 11:14 considering died 15:13 17:1,3,18,19 effective 10:6 21:21 disability 17:20,21,24 11:16 cooperation 14:17 18:3,4,5,6,7 emphasize 24:5 disc 7:6,13,14 18:8,9,10,12 18:14 CORPORATE 1:21 discuss 6:11 18:18,19,22 employee 25:10 Correct 10:3 9:2 18:23,24,25 25:12	<u> </u>	_	-	
consciousness 7:16 16:7,13,18 13:20 12:3 diabetic 8:6 16:22,24,25 effect 11:14 consider 17:13 die 15:13 17:1,3,18,19 effect 11:14 considering died 15:10,12 17:20,21,24 11:16 10:6 21:21 disability 17:25 18:1,2 efforts 12:4 cooperation 14:17 18:3,4,5,6,7 emphasize 24:5 disc 7:6,13,14 18:18,19,22 18:14 CORPORATE 1:21 discuss 6:11 18:23,24,25 25:12	9:25 10:2		13:25 14:14	_
diabetic 8:6 16:22,24,25 effect 11:14	16:25		14:19 15:25	
consider 17:13 die 15:13 17:1,3,18,19 effective considering died 15:10,12 17:20,21,24 11:16 10:6 21:21 disability 17:25 18:1,2 efforts 12:4 cooperation 14:17 18:3,4,5,6,7 emphasize 24:5 disc 7:6,13,14 18:8,9,10,12 18:14 CORPORATE 1:21 discuss 6:11 18:18,19,22 employee 25:10 Correct 10:3 9:2 18:23,24,25 25:12	consciousness			
considering died 15:10,12 17:20,21,24 11:16 10:6 21:21 disability 17:25 18:1,2 efforts 12:4 cooperation 14:17 18:3,4,5,6,7 emphasize 24:5 disc 7:6,13,14 18:8,9,10,12 18:14 CORPORATE 1:21 discuss 6:11 18:18,19,22 employee 25:10 Correct 10:3 9:2 18:23,24,25 25:12	12:3		16:22,24,25	
disability 17:25 18:1,2 efforts 12:4 cooperation 14:17 18:3,4,5,6,7 emphasize 24:5 disc 7:6,13,14 18:8,9,10,12 18:14 CORPORATE 1:21 discuss 6:11 18:18,19,22 employee 25:10 Correct 10:3 9:2 18:23,24,25 25:12			17:1,3,18,19	
cooperation 14:17 18:3,4,5,6,7 emphasize 24:5 disc 7:6,13,14 18:8,9,10,12 18:14 CORPORATE 1:21 discuss 6:11 18:18,19,22 employee 25:10 Correct 10:3 9:2 18:23,24,25 25:12	considering			
24:5 CORPORATE 1: 21 discuss 6: 11 Correct 10: 3 disc 7: 6, 13, 14 discuss 6: 11 28: 18, 19, 22 18: 23, 24, 25 18: 12	10:6 21:21	_	17:25 18:1,2	
CORPORATE 1: 21 discuss 6:11 18:18,19,22 employee 25:10 25:12	cooperation		18:3,4,5,6,7	_
Correct 10:3 9:2 18:23,24,25 25:12	24:5		18:8,9,10,12	
	CORPORATE 1:21		18:18,19,22	
corrections discussion 19:1,2,3,4,5 encephalom	Correct 10:3		18:23,24,25	25:12
	corrections	discussion	19:1,2,3,4,5	encephalom
<u> </u>		<u> </u>		<u> </u>

9:24	16:9	help12:13,14	job 13:3
entitled 4:6	FREE 1:24	13:2 15:4,22	Joe 15:15
epidemic 11:11	further 16:22	hemiplegic 7:4	Johansen 2:9
equina 8:3	23:25 25:9	hereditary 8:7	4:17,18 5:18
erythematosus	fusion 7:11	hereinbefore	5:24,25
8:20		25:7	17:18 18:3,4
escalating	G	herniated 7:5	19:1,2,16,23
11:12	Garris 3:7	herniations	19:24 20:9
Everybody's	13:21,22	7:14	20:15,16
11:12	14:1	HIGHWAY 1:22	21:11,12,23
excused 4:12	Genchek 16:20	hope 13:6 15:3	22:4,5,18,25
4:25	16:21	hours 11:8	23:1
experts 17:13	general 17:3	hundreds 11:22	June 25:25
Expires 25:24	generalized	11:23	
	8:11		K
F	Gentleman 24:4	I	Kathy 16:19
F 25:1	Gentlemen 6:10	idiopathic 8:8	keep 12:6
familiar 18:15	getting 12:11	illegally	keeping 12:8
far 13:5 15:6	give 15:5	12:18	Kennedy 2:7
15:6	giving 13:7,23	includes 21:1	4:19,20 5:8
faster 15:18	go12:2 14:20	incredible	5:10 6:1,2
fatigue 9:23	18:12,13	12:25	16:24 17:1
9:23 22:14	going 12:9,11	indications	18:5,6 19:3
February 5:4	13:19 17:4,5	13:5	19:4,25 20:1
fibromyalgia	17:21 18:13	injuries 7:12	20:17,18
8:23	18:19 19:11	interested	21:4,13,14
fibromyalg	22:14	25:13	21:22 22:6,7
8:22	GOLDEN 1:21	intractable	22:20 23:2,3
field 17:14	governor 15:17	7:16	24:2
fighting 12:4	group 6:14,14	involved 11:6	key 12:8
figuring 17:11	guess 9:25	irritable 9:19	Klonopin 23:18
financially	Gulla 15:15	21:1	knew11:3
25:13	GUY 1:19	issue 14:11,11	12:13
find 14:22		issues 14:10	know 5:11
first 6:19	<u>H</u>	ITEM 3:2	10:24 14:5
10:6,15	half 23:18		15:22 17:14
12:10 17:5	Hasam 16:9,11	<u>J</u>	known 9:6
17:11	health 1:2	J 1:19	
following 6:21	12:7	James 3:6	<u> </u>
foraminal 7:22	hear 11:22	10:19	L2:9
forefront 12:2	heard 11:4	Jersey 1:1,12	Ladies 6:10
foregoing 25:4	23:9	1:23 4:6	24:4
formal 4:1	hearing 11:13	10:21 11:6	late 8:17
forth 25:7	12:19 24:6	15:6 25:4,22	LAURA 25:2,21
forwarded 4:10	Heffner 16:4,5	Jersey's 12:3	Law 4:5
four 14:16	HELD 2:1	JESSICA 2:6	Ledger 4:9

1.5+ 14·10 20	11.5 25	23:12	new1:1,12,23
left 14:19,20 14:21	11:5,25 12:22 17:22	money 14:17,24	4:5 10:20
	18:20 19:12	14:25 15:2	11:6 12:3
leg 7:10			
legally 12:18	market 12:9,12	mortality	15:6 17:15
Levounis 2:8	MARY 2:9,10	12:17	25:4,22
4:21,22 5:16	medical 1:6	motion 5:14	newspapers 4:9
6:3,4 18:7,8	6:12 10:20	6:7 17:16	non-cancer
19:5,6 20:2	11:5,25	18:11,17	6:24
20:3,19,20	12:15,22	19:9,15 20:6	Notary 25:3,21
21:5,15,16	18:20 19:12	20:8,23 21:3	25:22
22:8,9 23:4	Medicinal 4:2	21:19 22:12	notice 4:3,6,8
23:5 24:3	6:11	22:16 23:8	Notices 4:8
License 25:3	medicine 15:21	24:1,2	0
limit 10:13	meeting 1:7	Move 21:22	official 12:1
limited 23:12	4:1,3 5:4	moved 5:16	
limits 12:8	meetings 4:6	multiple 7:12	Oh 16:8
literally	5:9	multisystem	Okay 10:10 16:7 19:10
11:22	MELISSA 2:5	9:17	
literature	member 13:9	muscle 7:11	24:4
17:10 18:15	members 5:1,9	musculoske	Open 4:6
lives 14:4	10:5,10	6:20 8:24	opiate 11:18
LOCATION 1:10	15:25 16:23	9:1 10:7	11:24 12:8
Lomberti 3:8	23:10	17:6,17,23	12:10
23:14,15	Memorial 1:10	myalgic 9:24	opiates 11:14
long 12:2	1:11	N N	11:20
lot 14:17 15:2	Michael 5:10	-	opioid 8:19
15:12	Michele 2:4	N3:1	11:11 12:17
lots 17:12	3:4 6:18	name 5:11 7:18	opportunity
low 7:10	21:6	15:8 16:14 23:14	13:7,24,25 order 3:3 10:1
lower 12:8	Michelle 10:3		
lumbar 7:13,25	13:18	nature 13:1	org 12:21
8:1	Michelle/M	NE-BC 2:9 neck 7:10	Origin 9:16 20:25
lupus 8:15,20	16:9	need 11:17,19	Osteo 8:11
Lyme's 8:17	migraine 7:4	11:20,21	overdose 12:18
	9:3,4,5,6,7	15:16,22	oxycodone
<u>m 2:10</u>	18:13,21	neither 25:9	23:17
M.A2:8	Miller 3:6	25:11	23.17
$\mathbf{M.D} \ 2:3,6,7,8$	10:20,21,22	_	P
major 14:11,11	11:2	nerve 7:2 neural 7:22	P 25:2,21
making 11:2	milligram	neural 7.22 neurogenic	PAGE 3:2
15:2	23:18	9:18	pain 6:19,23
Malformation	milligrams	neuropathic	6:24,25 7:1
8:4	23:17	7:24 8:2,5	7:2,3,8,11
marijuana 1:6	mine 13:3		7:16,18,20
4:2 10:20	minutes 5:3,15	neuropathy 7:23	7:24 8:1,2,5
4.7 10.70	5:19 10:12	1.43	, , , , , , , , , , , , , , , , , , , ,
L	1	I	1

0.0.10.04	0.01 02 0.2	02.12.05.2	
8:8,18,24	8:21,23 9:3	23:13 25:3	REPORTERS 1:20
9:1,15 10:6	9:4,5,7,8,10	25:21,22	respond 12:25
11:19 14:8,9	9:11,13,16	published 4:3	response 6:17
14:12 17:1,6	9:17,19,21	4:8	10:9 13:11
17:16,23	9:23 20:8	pushed 11:7	16:2 23:24
20:25 23:15	petitioner		result 7:1
pancreatitis	6:21	Q	review 1:7 4:2
9:16 21:1	petitions 6:12	question 13:9	5:5 6:11,21
panel 1:7 4:2	PETROS 2:8	questions 5:6	17:10
5:5 6:11	ph 15:15 16:10	13:12 16:1	revision 5:9
10:5 12:1	16:15,20	quorum 5:2	Rheumatoid
13:10 15:25	Ph.D 2:3,9		8:13,15
16:23	Pharm.D 2:10	R	right 13:6
particular	pharmaceut	R 25:1	17:2 23:10
19:13	23:19	R.N 2:9	roll 4:11
parties 25:11	pick 14:6	radiculopathy	room 14:3
path 13:6	place 4:8 25:6	7:25	Rose 15:9
patients 11:23	planning 13:23	rate12:17	rule 10:2
14:3,25 15:4	Please 10:12	reachCMMNJ	
15:18,19,23	point 18:14	12:21	S
pay 15:19	Post 4:10	reaching 12:3	Sabina 15:9
people 10:14	post-concu	read 6:13,15	Salman 16:18
11:9,17 12:3	23:16	really 12:25	Sam 10:16
12:4,4,6,9	post-lamin	REAM 25:2,21	16:18
	8:1	recommenda	saying 15:16
12:11,24	_	17:22 19:11	Scerbo 2:6
15:3,13 16:9	posted 4:7	22:17	4:23,24 6:5
percent 12:16	present 4:20	recusal 6:16	6:6 18:9,10
peripheral 7:6	5:1,9	6:18	19:7,8 20:4
7:23	press 4:10	reduction	=
Peripheral	pretty 17:9	11:24 12:17	20:5,21,22
8:6	previous 5:3	reflex 7:17	21:17,18
Perrins 13:18	primary 8:11		22:10,11
13:19	problems 23:17	regional 7:8	23:6,7
person 10:15	procedure	7:18,20	sciatic 7:2
10:19 13:13	10:25	Register 25:2	sclerosis/
13:17,20	proceed 6:8	related 6:20	8:16
16:3	process 15:17	8:23,24,25	Seaside 11:8
petition 6:23	profiteer 15:1	9:1 17:6,16	second 5:17,18
6:24,25 7:1	profiteers	17:23	9:2 17:19,20
7:3,4,5,8,10	15:2	Relating 10:7	18:18 19:17
7:13,15,17	<pre>program 12:23</pre>	relative 25:10	19:18 20:10
7:20,22,23	15:6	25:12	21:5,23,24
7:24,25 8:3	provisions 4:4	relief 11:19	22:19,20
8:4,5,9,10	public 3:5 4:5	remember 14:5	24:3
8:11,13,14	4:6,8 10:10	RENZI 1:19	secondary 9:10
8:17,19,20	17:9 23:10	Reporter 25:3	9:11

	1	1	1
Secretary 4:7	4:21,23,25	10:8	title 12:1
Security 14:18	5:12,20,22	SUITE 1:22	today 9:2,22
see 14:16,16	5:24 6:1,3,5	sure 11:2 17:9	22:14 23:19
15:2	6:7,9 10:4	surgeries 7:12	told10:17
seen 13:5 15:7	11:1 17:24	sympathic 7:17	12:10
SENIOR 1:2	18:1,3,5,7,9	syndrome 7:9	TOLL 1:24
sent 4:7	18:11,22,24	7:19,21 8:1	topics 16:23
September	19:1,3,5,7,9	8:3 9:19,20	Tourette 9:20
25:24	19:19,21,23	9:21,24 21:2	9:21 21:21
SERVICES 1:2	19:25 20:2,4	21:21 22:15	toxic/infl
Servis 13:14	20:6,11,13	23:15,16	8:7
13:15,15	20:15,17,19	synergistic	transcript
set 25:7	20:21,23	11:13	25:5
seven 6:14	21:7,9,11,13	systemic 8:15	transformed
severe 7:15	21:15,17,19	8:15,20	9:5
shoulder 7:6	21:25 22:2,4		tremors 9:18
show 11:3,9	22:6,8,10,12	T	Trenton 1:12
shown 15:5	22:21,23,25	T 25:1,1	1:23 11:8
sick 15:3	23:2,4,6,8	take 12:23	true 25:4
sign 10:17	start 12:20	taken 25:5	try 10:13
16:3	17:4	talking 11:12	tsunami 11:10
sign-in 16:12	state 1:1,22	tax 15:20	twice 23:18
sign-ins 16:8	4:5,7 11:4,8	taxed 15:21	two 4:9
signed 10:14	12:23 25:4	TEL 1:24	type 7:9,9
10:15 13:13	25:22	tells 12:7	
13:16 16:16	state's 12:22	ten 11:18	Ŭ
signing 16:21	Statehouse	testimonials	ultimately
similar 21:2	4:11	11:23	10:2
six 5:1 10:14	statements	testimony 25:5	understand
Social 14:18	11:24	thank 10:18	11:17
somebody 14:17	states 12:16	11:2 13:7	units 11:18,19
spacticity	stenograph	15:24 16:3,6	11:20,21
14:10	25:6	23:21,22	upset 14:2
spasms 7:11,12	stenosis 7:5	24:5	use 8:19 11:24
speak 13:8,19	7:22	things 15:15	19:11
13:22,24	step 13:2	think 13:2,6	v
16:5,14	stranded 14:21	16:19 thought 16:11	VA 14:21
speaking 13:23	streamline	three 10:12	vascular 7:7
spinal 7:5,11	15:17	23:12	VIDEOGRAPHERS
spine 7:13	strong 15:11	time 1:14	1:20
spoke 14:1	subject 17:10	10:13 11:3	Visceral 9:15
sporadic 7:4	18:16	12:10 14:1,2	20:25
stage 8:17 Star 4:9	suffer 14:7,8	14:15 17:11	visit 14:15
Star 4:9 Stark 2:4 3:4	23:15 suffers 14:6	23:12 25:6	vote 17:5,16
4:1,15,17,19	suffers 14.0	times 14:16	17:21 18:17
4.1,13,11,19	auggestions	CTHOD I I. IO	
L	1	ı	ı

18:19 19:11	Zarus 4:25	33 1:22 9:10	8001:24
19:15 20:8		35 7 : 1	9
21:3 22:14	0	36 9:3	
	086081:12	368-7652 1:24	98:20
<u>W</u>	08690 1:23	37 7:5	989-9199 1:24
wait 15:11,14	1	38 7 : 8	
waited 15:10			
waiting 15:10	1 7:9,22	4	
15:12,13	10 1:13 7:24	4 3 : 4	
want 12:6,24	11:19	40 7:10	
14:23 16:5	10:001:14	400 14:15	
16:14 18:14	10:20 24:6	410 1:22	
War 1:10	11 3:6 6:23	42 9:21	
wasn't 13:22	12 7 : 25	45 6:11,13	
15:11	13 3:7 9:4	7:13	
way 12:2	14 9 : 8	47 8:13	
we'll 9:2	15-month-old	48 8 : 3	
we're13:6	15:9	480 23:17	
17:1,5,21	16 9:5	49 7:15	
18:13,19	17 6:24		
19:10 22:13	19 8:9	5	
wear 15:8	1975 4:5	5 11:20 25:25	
website 12:21	1993 11:7	50 8 : 4	
Wednesday 1:13	2	51 7:3	
Weinstein		52 8:21	
10:16,17	2 7:9 11:21	53 9:11	
went 14:14,19	20 9:13	54 8 : 21	
14:20	200 15:19	55 9 : 23	
wheelchair	2017 1:13	56 7:20	
11:7	25:25	57 8 : 23	
wife's 11:7	2020 25:24	58 8 : 5	
work 13:4	228:10	59 8:14	
wrist 15:8	2277 1:22		
www.renzia	22nd 5:4	6	
1:25	23 3:8 7:17	6 7:23	
	231 4:4	60 9:19	
X	24 3 : 9	6091:24	
x 1:4,8 3:1	25 11:8 12:16	61 9:7	
	26 8:11	63 8:19	
<u>Y</u>	28 6 : 25	65 9:16	
Yeah 13:22	3	7	
16:16		l ———	
year 14:13,20	30XT00004000	7 % 15:20	
years 11:9	25:3,23	8	
z	31 8 : 17	87:4 25:24	
	32 9:17	0 / • 4 25 • 24	

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