

**GENERAL INFORMATION**

Representative: Karen Hejduk-Clark

District Manager: Jay Rago

Territory: 50107

Date: 10-29-2013

PERFORMANCE METRICS	Q1	Q2	Q3	Q4		COMMENTS
EXALGO Goal Attainment	101%	93%	93%	82%		Managing Rosenberg discontinues
SUMAVEL Goal Attainment	59%	113%	57%	27%		Need to add refills to rx
PENNSAID Goal Attainment	86%	39%	45%	91%		
Overall Rank	36	16	53	69	YTD Rank: 69	Q4 attainment contributed to decline
SALES EXECUTION METRICS	QTD	OCT	NOV	DEC		COMMENTS
Reach Attainment	On target					Hits targets
Frequency	On target					Decile 8-10 hit once per week
Pharmacy Calls Per Day	2/day					Prepare for launch
Resource Utilization Samples, iPad, Vouchers, Co-pay Cards, FTF, MAP tool, etc.	On target					Always orders materials

INFLUENCE SELLING

Please score the sales representative with the following scoring system:

1= Does NOT Meet Expectations 2= Needs Improvement 3= Meets Expectations 4= Exceeds

ENGAGE	SCORE
Did the representative have a plan for EXALGO/PENNSAID/SDP? (See Pre-call Planner)	4 = Exceeds Expectations
Did the representative make a connection with the customer? (Make eye contact, firm handshake, etc.)	3 = Meets Expectations
Did the representative open the call with: ▶ An effective opener on the HCP's agenda (win-win)? ▶ A personal conversation with an emotional transition?	3 = Meets Expectations
Did the representative use an <i>Understand</i> question to get on the agenda of the customer before messaging on EXALGO/PENNSAID/SDP?	3 = Meets Expectations
Did the representative use an <i>Influence</i> question by: ▶ Turning their message into a question on the agenda of the HCP ▶ Using Emotion ("Would you mind sharing your opinion..."; "Help me understand...", etc.)	3 = Meets Expectations
Did the representative listen to the HCP's response? (Stop and listen before responding and respond appropriately)	4 = Exceeds Expectations
SHARING AN INFLUENTIAL STORY	SCORE
Did the representative transition effectively to an EXALGO/PENNSAID/SDP message while staying on the agenda of the customer?	3 = Meets Expectations
Did the representative maintain a two-way dialogue?	3 = Meets Expectations

SHARING AN INFLUENTIAL STORY (cont'd)	SCORE
Did the representative make their story stick by effectively using the following influence techniques when discussing EXALGO/PENNSAID/SDP: <ul style="list-style-type: none"> ► Logic: Logical story (move the HCP to the next step of the product adoption continuum), clear and simple, interesting, credible, relevant ► Emotion: Emotional story, make the patient come to life, belief and passion ► 5 Senses/Other: Physically involve the HCP, sight, sound, surprise/ mystery, etc. 	3 = Meets Expectations
Did the representative handle objection(s) based on EXALGO/PENNSAID/SDP effectively? <ul style="list-style-type: none"> ► Understand the motive of HCP ► Follow the steps - Acknowledge, Clarify, Reframe, Confirm ► Utilize <i>Influence Words and Actions</i> (e.g., welcome the objection, <i>and</i> versus <i>but</i>, etc.) 	3 = Meets Expectations

GAIN COMMITMENT	SCORE
Did the representative check in with HCP during the conversation to ensure alignment and agreement of what was being discussed?	3 = Meets Expectations
Did the representative use a trial close to understand how close the HCP was to making a commitment? (Examples: Logic - "Does that seem reasonable?" Emotion - "Do you feel that makes sense for your patients?")	3 = Meets Expectations
Did the representative ask for a specific commitment, or allow the HCP to commit to something that was specific, measurable, actionable, reasonable and time oriented?	2 = Needs Improvement
TOTAL SCORE: /52	40

INFLUENCE SELLING/BRAND MESSAGING UTILIZATION	COMMENTS
<i>Adhere to Brand Strategy, Operation Change Agent</i>	
EXALGO	Switches from hydro and oxy
PENNSAID	Great use of DMSO video
SUMAVEL DOSEPRO	Good explanation of demo. Identify morning migraine and nausea patients

INDIVIDUAL DEVELOPMENT PLAN	COMMENTS
Objective 1: Mastery of influence selling	Continue to pre all plan by writing questions out and adjust according to re:
Objective 2: Gain committment	By writing out your closes, it reinforces their usage. Gain a commitment on
Cultural Hallmarks: Expert (E) Advanced (A) Proficient (P) Basic (B)	
Engaged: Advanced (A)	Competitive: Proficient (P)
High Performing: Proficient (P)	Collaborative: Advanced (A)
Trustworthy: Advanced (A)	

OVERALL COMMENTS:

Derrick Robinson, PA gave good intel to how many migraine patients are in the practice and who are they willing to treat. Dr Eller, once he committed to preventing emergency visits engage in a game plan of how he would pitch prevention to a patient- severity and frequency of migraines drives his decisions with migraine, and has a willingness to change his treatment strategy for morning migraines. The key is to connect the call to a commitment. We talked about reversing the roles when discussing the challenges in presenting a medication like SDP to a patient that may not know they need it. Allow the physician to demonstrate how they would verbalized the benefits of having it at the ready. It's a classic teach back technique that many physicians practice themselves. At that point you will know how effective they will be at presented our product and can coach them up from there. Richard St Dennis was more of a fact finding mission but nonetheless valuable. After following up with his colleague Dr Rosenberg, you can see a major disconnect between the office staff and prescribers. There needs to be some real heart to heart influence selling to break this office schema. Dr Disanto stand up call was more of a traditional pitch. I did enjoy the use of the DMSO video but it was absent of understand/influence questions. Be consistent in your embrace for influence selling and you'll break his schema as well.