

McCANN

Lilly

PRE-PRODUCTION BOOK

DEL KOL Video Quest

"KOL Questions"

Ataboy Productions

Director: Corydon Wagner

Creative Director: Vikkal Parikh

Line Producer: Robert Berman

Shoot Date: June 7th, 2019



WHAT WE'RE REVIEWING

- Casting
- Scripts
- Initial Design
- Wardrobe
- Location
- Props
- Day of Schedule
- Production Calendar
- Call Sheet
- Contact Information

PERSONNEL

Ad Agency:

McCann New York
622 Third Ave. (40/41)
New York, NY 10017

Producer: Eva Pipa
SVP/Creat Dir, Art Kerry Ciociola
VP, Assoc CD, Art Carmine Licata
Snr Copywriter Chris Kerr
Snr Art Director Christina Fernandez
VP, Assoc CD, Copy Patrick Brodfuehrer
SVP, Group Acct Dir Caroline Walsh
VP, Account Dir Maria Martinelli
Account Supervisor Megan Puleo

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917-443-4768 cell

Client:

Eli Lilly & Company
Lilly Corporate Center
Indianapolis, IN 4285

317-276-2000

Eli Lilly & Co Technology Center South (LTC)
1555 Kentucky Avenue
Indianapolis, IN 46221

Brand Director, HCP Jason Mazza
Brand Associate Michelle McBroome
Assoc Brand Mgr Sara Mahoney

317-671-5551
317-225-6412
317-260-8629

Production Company

Ataboy Studios, LLC
125-127 West 29th Street, 3rd flr
New York, NY 10001

www.ataboystudios.com

212-300-7558 work

Creative Dir Vikkal Parikh
Exec Prod. Anabella Zubillaga
Director: Cordy Wagner
Producer: Robert Berman

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	MONDAY 27-May	TUESDAY 28-May	WEDNESDAY 29-May	THURSDAY 30-May	FRIDAY 31-May	SAT 1-June	SUN 2-June
W E E K 3	DESIGN & STORYBOARDS						
	CASTING						
	LOCATION SCOUTING						
			EOD: Present Design WIP # 1 for Agency	PM: Design WIP #1 Feedback			
	MONDAY 3-June	TUESDAY 4-June	WEDNESDAY 5-June	THURSDAY 6-June	FRIDAY 7-June	SAT 8-June	SUN 9-June
W E E K 4	DESIGN & STORYBOARDS						
	CASTING						
	LOCATION SCOUTING						
		Lock Casting & Location		PPM	SHOOT		
	EOD: Present Design WIP # 2 for Agency and Client Review	PM: Design WIP #2 Feedback		EOD: Present Design WIP # 3 For Final Approval	EOD: Lock Design		
	MONDAY 10-June	TUESDAY 11-June	WEDNESDAY 12-June	THURSDAY 13-June	FRIDAY 14-June	SAT 15-June	SUN 16-June
W E E K 5	EDIT 1x 3 Minute Video						
			McCann @ Ataboy	EOD: Present WIP # 1 for Agency Review	PM: Feedback WIIP # 1		
	EDIT 2x 2 Minute Video						
			McCann @ Ataboy	EOD: Present WIP # 1 for Agency Review	PM: Feedback WIIP # 1		

	MONDAY 17-June	TUESDAY 18-June	WEDNESDAY 19-June	THURSDAY 20-June	FRIDAY 21-June	SAT 22-June	SUN 23-June
W E E K 6	EDIT 1x 3 Minute Video						
		EOD: Present WIP # 2 Agency & Client Review	PM: Feedback WIP # 2	EOD: Present WIP # 2 Agency & Client Review	Noon: Feedback		
					EOD: Edit Lock		
	EDIT 2x 2 Minute Video						
		EOD: Present WIP # 2 Agency & Client Review	PM: Feedback WIP # 2	EOD: Present WIP # 2 Agency & Client Review	Noon: Feedback WIP # 3		
					EOD: Edit Lock		
	MONDAY 24-June	TUESDAY 25-June	WEDNESDAY 26-June	THURSDAY 27-June	FRIDAY 28-June	SAT 29-June	SUN 30-June
W E E K 7	MLR REVIEW						
	MONDAY 1-July	TUESDAY 2-July	WEDNESDAY 3-July	THURSDAY 4-July	FRIDAY 5-July	SAT 6-July	SUN 7-July
W E E K 8				ATABOY CLOSED			

		MONDAY 8-July	TUESDAY 9-July	WEDNESDAY 10-July	THURSDAY 11-July	FRIDAY 12-July	SAT 13-July	SUN 14-July
W E E K 9								
		MONDAY 15-July	TUESDAY 16-July	WEDNESDAY 17-July	THURSDAY 18-July	FRIDAY 19-July	SAT 20-July	SUN 21-July
		ANIMATION						
					EOD: Post Animation WIP # 1 for Agency Review	PM: Feedback WIP # 1		
		MONDAY 22-July	TUESDAY 23-July	WEDNESDAY 24-July	THURSDAY 25-July	FRIDAY 26-July	SAT 27-July	SUN 28-July
W E E K 1 1		ANIMATION						
						Feedback from MLR Review		
			EOD: Post Animation WIP # 2 for Agency & Client Review	PM: Feedback WIP # 2				
						EOD: Post WIP # 3 Agency & Client Review		

	MONDAY 29-July	TUESDAY 30-July	WEDNESDAY 31-July	THURSDAY 1-August	FRIDAY 2-August	SAT 3-August	SUN 4-August
W E E K 1 2	ANIMATION						
	EDIT REVS						
	PM: Feedback WIP # 3			EOD: Post WIP # 4 For Client & Agency Final Approval	EOD: ANIMATION LOCKED		
	MONDAY 5-August	TUESDAY 6-August	WEDNESDAY 7-August	THURSDAY 8-August	FRIDAY 9-August	SAT 10-August	SUN 11-August
	EDIT REVS		COLOR GRADE	CONFORM			
				EOD: POST FINAL	EOD: DELIVER		

SCHEDULE

Lilly Schedule for SHOOT day of 06/07/2019

- 5:30a Courtesy breakfast for crew at location
- 6:00a Production assistants load in ram board for protecting location
- 6:10a Camera dept load in – SEGAL LOFT (6th flr)
- 6:15/6:30a Lighting & Grip equipment load in
- 6:45a Art dept load in
- 7:00a Vanity depts load in. Teleprompter loads in.
Interviewer talent in
- 7:45a Agency personnel on site
- 6:45a-9:30a **DRESS LOCATION, LIGHT and SET UP FOR FIRST INTERVIEW**
- 8:00a First KOL – Dr. ANDY BLUMENFELD on site
- 8-9:00a KOL and director meet to discuss process, shoot and content
Hair/make-up, Wardrobe review, Script review
- 9:15a-9:30a Final lighting tweaks
- 9:30a **SHOOT** KOL on camera
** With us until 12noon with breaks as required
- 11:00a 2nd KOL arrives – Dr. DAWN BUSE
- 11-12noon Hair/make-up, Wardrobe review, Script review with Dr BUSE

12noon **LUNCH BREAK FOR CREW** (6hrs from initial crew call)
Wrap KOL 1 – Dr ANDY BLUMENFELD

12:20p KOL 2 and director meet to discuss process, shoot and content

12:45p Crew back in

1-3:00p **SHOOT** Dr BUSE on camera
** With us until 3p with breaks as required

2-3:00p KOL 3 – DR SUZAN KHOROMI arrives
Hair/make-up, wardrobe review, Script review

3:00p Wrap KOL 2 – Dr BUSE

3:15-6:00p **SHOOT** Dr KHOROMI
** With us until 6p with breaks as required

6p Wrap Dr Buse
Wrap camera and all gear
Download to media
Post proxies for editorial
Restore location
Ship hard drive

AGENCY CREATIVE

KOL STORYBOARD | BURDEN OF ILLNESS



ACTION: Establishing shot of host and KOL.



ACTION: Puzzle head animates on screen at the mention of Migraine is Complex.



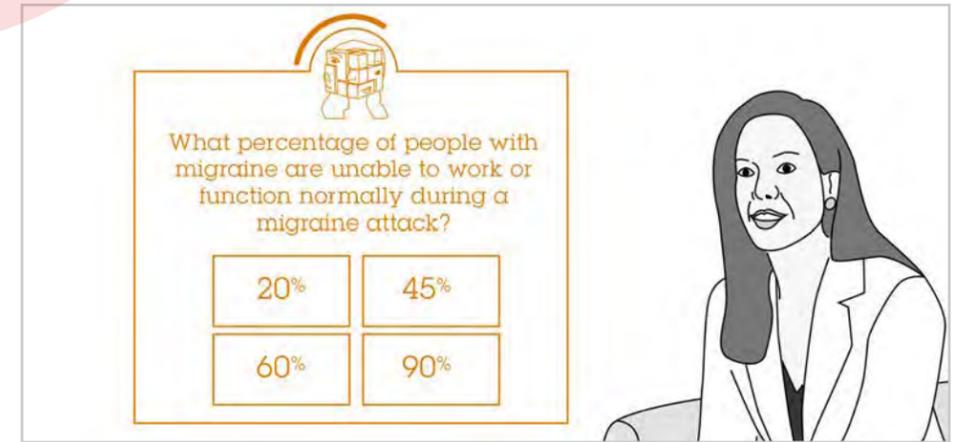
ACTION: Close up of host as he asks next question.



ACTION: 90% pie chart animates on screen.

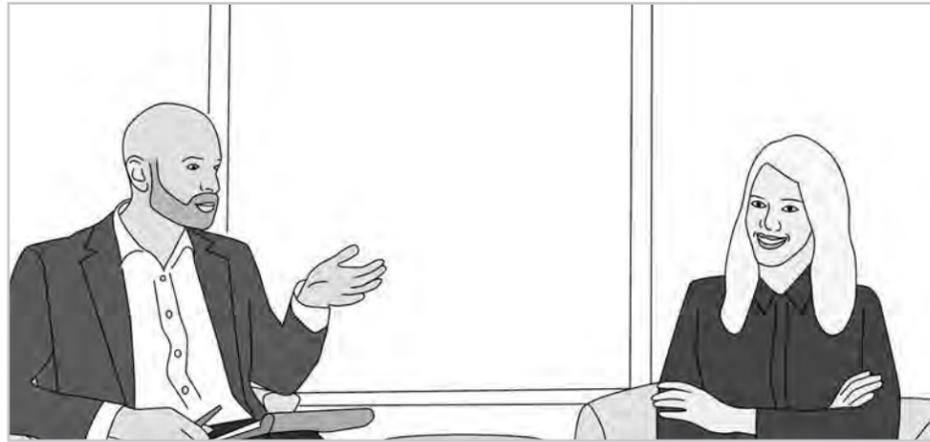


ACTION: Relief stays in place as Rapid, Sustained Pain, and Complete Pain rotate into frame.



ACTION: At the end of the interview quiz component animates on screen with countdown bar indicating how much time the viewer has until the answer is revealed.

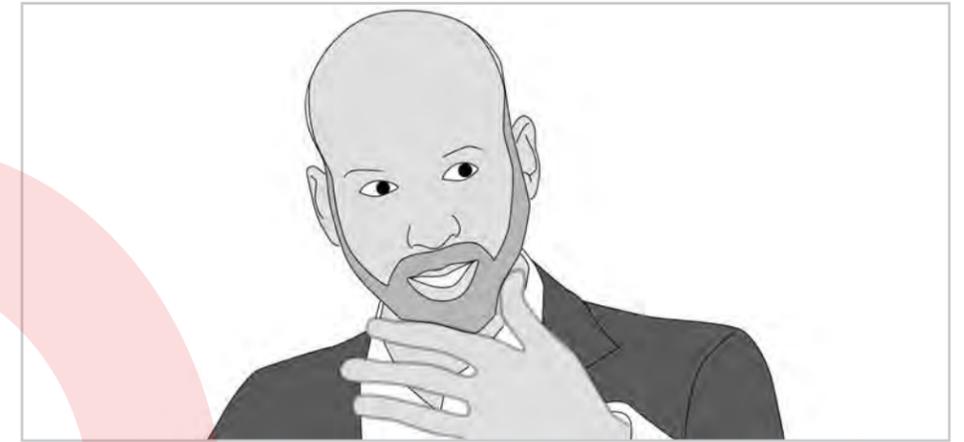
KOL STORYBOARD | MIGRAINE PATHOPHYSIOLOGY



ACTION: Establishing shot of host and KOL.



ACTION: "Vascular theory" and "neurologic theory" animate into frame letter by letter.



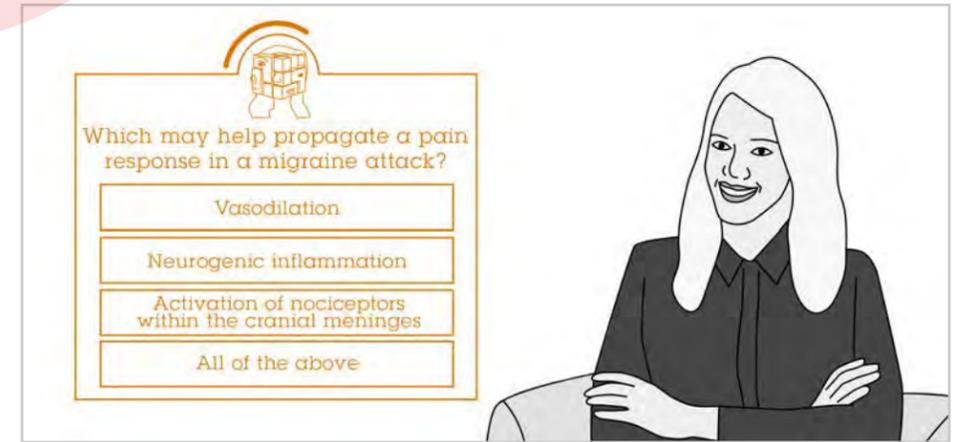
ACTION: Close up of host as he asks next question.



ACTION: Puzzle head animates on screen at the mention of the migraine pathophysiology puzzle.

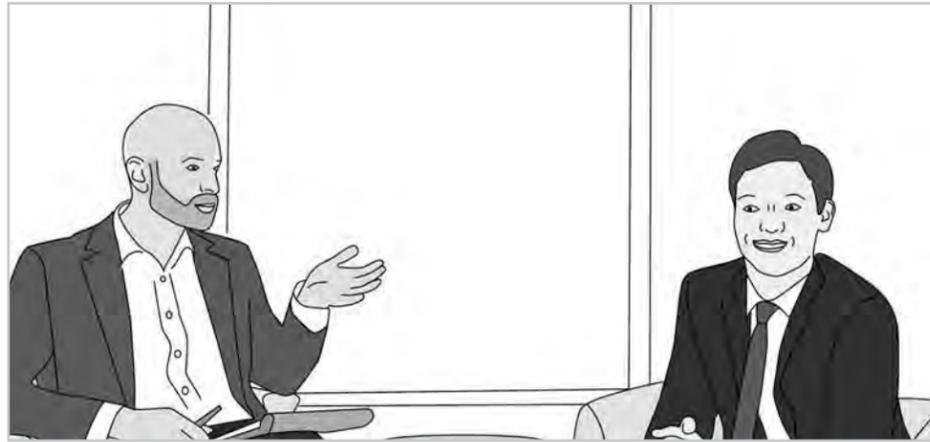


ACTION: Trigeminal nerve animates on screen.



ACTION: At the end of the interview quiz component animates on screen with countdown bar indicating how much time the viewer has until the answer is revealed.

KOL STORYBOARD | SCIENCE OF SEROTONIN



ACTION: Establishing shot of host and KOL.



ACTION: Puzzle head animates on screen at the mention of Migraine is Complex.



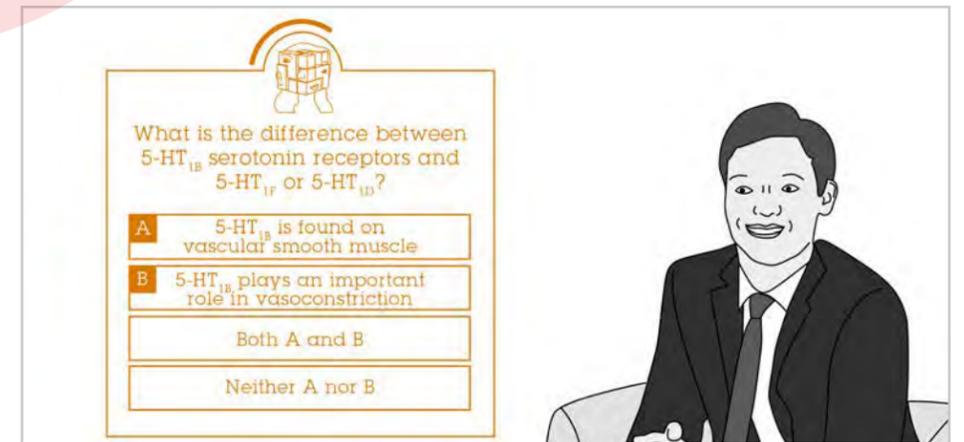
ACTION: Close up of host as he asks next question.



ACTION: $5-HT_{1B}$, $5-HT_{1F}$, and $5-HT_{1D}$ are animated in one at a time until all three are on screen at once.



ACTION: Serotonin receptors on pre-synaptic terminal are animated in and labeled.



ACTION: At the end of the interview quiz component animates on screen with countdown bar indicating how much time the viewer has until the answer is revealed.

SCRIPTS

KOL – Dr. Dawn Buse
McCann Health New York
June 4, 2019

HOST: Hello. I'm <INSERT HOST NAME> and I'm joined here today by Dr. Dawn Buse, an awarded neurology professor who specializes in migraine research, to discuss the burden of illness millions of patients with migraine face.

Dr. Buse, how are you today?

DR. BUSE: I'm great, excited to get started.

HOST: Let's start with this: What makes migraine such a complex disease to understand?

DR. BUSE: Migraine is a chronic condition with episodic manifestations, meaning that while an individual always has the condition, attacks may occur on an unpredictable basis. While severe headache is a central feature, a migraine is made up of a constellation of potentially debilitating symptoms, including nausea, phonophobia, and photophobia, which make it very difficult to function. Attacks may even include multiple phases and last several days. Migraine is often understood as just a headache, and since most humans experience a headache at some point in their lives, they may think they understand the experience of migraine, and may not truly be able to comprehend the level of pain, disability, and associated symptoms that differentiate a migraine attack from a typical headache. All of these reasons combined are what makes migraine so complex.

HOST: Going beyond the complexity of migraine, how debilitating can attacks be to the lives of patients?

DR. BUSE: Migraine is known to be associated with substantial personal and societal burden. It can negatively impact all areas of life big and small, including academic and career achievements; family relationships; personal, social, and leisure time; and quality of life. Migraine is also comorbid with depression and anxiety.

Furthermore, we know that it negatively influences the entire family, including their spouse or domestic partner, and their children.

The Global Burden of Disease Study, which tracks the incidence, prevalence, and burden of over 300 diseases and injuries worldwide, most recently ranked migraine as the second most debilitating condition on the planet, based on disability-adjusted life years.

The burden of migraine can occur ictally, or during an attack, due to pain and the associated symptoms, as well as interictally, or between attacks.

HOST: And how do patients describe their disability during a migraine attack?

DR. BUSE: Well, disability associated with an attack can vary both inter-individually, or from person to person, and also intra-individually, from attack to attack. So, it is not necessarily known by one individual how severe, how impairing, how painful, or how long an attack will be.

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KOL – Dr. Andy Blumenfeld
McCann Health New York
May 15, 2019

HOST: Hello. I'm <INSERT HOST NAME> and with me is Dr. Andy Blumenfeld, director of the Headache Center of Southern California and an active researcher in headache. He's joining me to talk about the science of serotonin receptors.

Dr. Blumenfeld, how are you today?

DR. BLUMENFELD: I'm doing well, ready to dive into this piece of the migraine puzzle.

HOST: Let's begin here: What evidence suggests a role for serotonin receptors in migraine disease?

DR. BLUMENFELD: The role of serotonin receptors is well established, with the initial inquiry about 5-HT serotonin receptors postulated 50 years ago. What the evidence points to is that serotonin receptors regulate many neurological and physiological processes. We also have evidence that they can play a role in treating migraine pain. Furthermore, the activation of serotonin receptors may even have a range of effects, including inhibition of vasoactive neuropeptide release.

HOST: Interesting. Can you describe the three serotonin receptors primarily involved in migraine?

DR. BLUMENFELD: There are multiple serotonin receptors that are potentially involved with migraine. And the subtypes are typically labeled 5-HT_{1B}, 5-HT_{1D}, and 5-HT_{1F}. These serotonin receptors are expressed on neural tissue, like the trigeminal nerve, and more centrally in pathways like the trigeminal nucleus, all the way up to the thalamus. And then some are also expressed on blood vessels on endothelial cells. So the stimulation of these serotonin receptors by the release of serotonin has a broad array of effects from vasoconstriction of blood vessels to stimulation of the peripheral trigeminal pathways, all the way through to activation of the central trigeminothalamic pathways. And the central effects can be quite broad, so the stimulated central pathways are active in transmitting pain impulses. Activation of the peripheral pathways, particularly the endothelial cells, can produce vasoconstriction of those blood vessels.

HOST: And can you describe the effects of the activation of these serotonin receptors?

DR. BLUMENFELD: The model that was described and has been used traditionally to test migraine treatments involves stimulating the trigeminal nerve, and this can be done either electrically or chemically. And when those nerves are stimulated and they release serotonin, which binds to these receptors, you typically get plasma protein extravasation around the main entry of blood vessels, particularly being shown around the veins in the meninges. So, the activation of serotonin receptors blocks transmission of pain signals and causes peripheral vasodilation.

HOST: Dr. Blumenfeld, I appreciate you finding time to take us through the science of serotonin receptors and their role in migraine. Thank you.

DR. BLUMENFELD: You're very welcome. This was fun.

KOL — Dr. Suzan Khoromi
McCann Health New York
May 20, 2019

HOST: Hello. I'm <INSERT HOST NAME> and joining me today is Dr. Suzan Khoromi, a neurologist from UC San Diego who specializes in headache, to discuss the pathophysiology of migraine.

Dr. Khoromi, how are you doing?

DR. KHOROMI: I'm well, thank you.

HOST: Let's start with this: Do you believe there's an evolution in understanding of migraine pathophysiology?

DR. KHOROMI: Yes, I do. Years ago, there was a theory about whether migraine was a central issue, or vascular versus neurological. Michael Moskowitz was the first person who came up with one of the major theories in the pathophysiology of migraine, which is the trigeminovascular theory of migraine. Recent discoveries with functional imaging and genetic studies have shed a lot of additional light on this trigeminovascular theory of migraine.

We know the dura has a lot of trigeminal receptors. When the trigeminal system is excited, there is a release of a certain number of pro-inflammatory peptides, such as calcitonin gene-related peptide, or CGRP, which is the most potent endogenous vasodilator which leads to neurogenic inflammation. This substance is present in all migraine pathogenetic sites, both peripherally and centrally.

HOST: How does the understanding of migraine as a neurologic disease differ from the vascular theory?

DR. KHOROMI: So, I think the vascular theory was just a theory. Functional imaging has shown that, even in the prodrome before a migraine starts, there are abnormalities at the level of the hypothalamus, which is coupled with the trigeminovascular system. Additional functional imaging has shown that the hypothalamus is coupled with the rostral and dorsal pons during a migraine attack. So a lot of the information we have gleaned that now makes it clear that migraine is a neurological disease.

HOST: How does the trigeminovascular system fit into theories of migraine pathophysiology?

DR. KHOROMI: The trigeminovascular system is a piece of the pathophysiology puzzle. And the neurological theory has a lot of support based on the functional imaging. We know that the trigeminal nerve is activated during migraine attacks because of functional imaging data as well as multiple other studies pertaining to CGRP. Activation leads to release of neuropeptides and stimulation of pain pathways.

HOST: Dr. Khoromi, thank you for taking the time today to lend some insight into migraine pathophysiology.

DR. KHOROMI: Thank you for having me.

LOCATIONS

A place of knowledge...

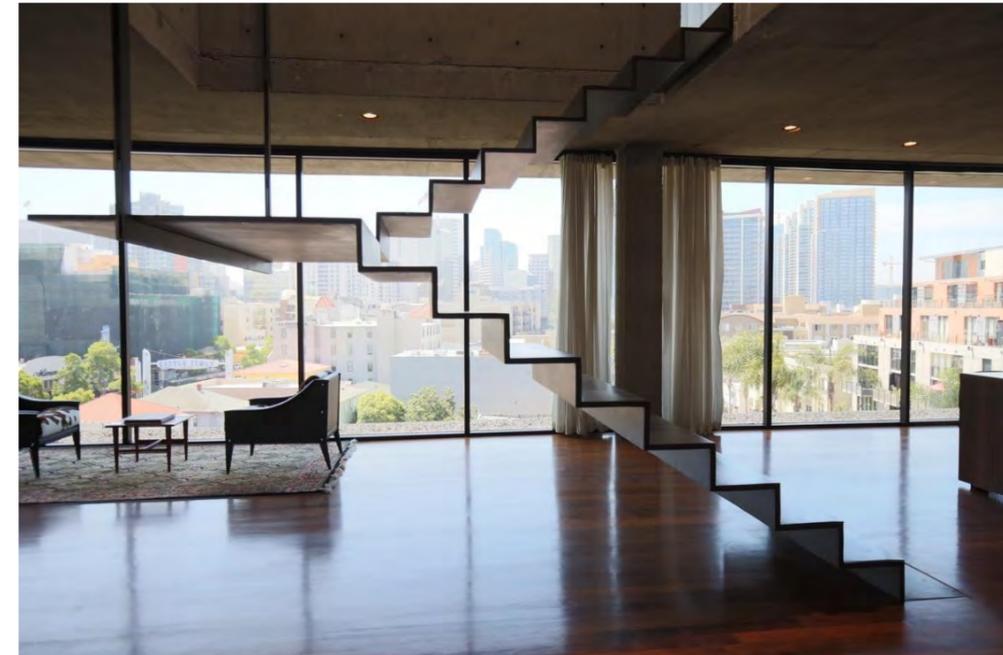
The location we select should express a philosophy based in knowledge and quality research.

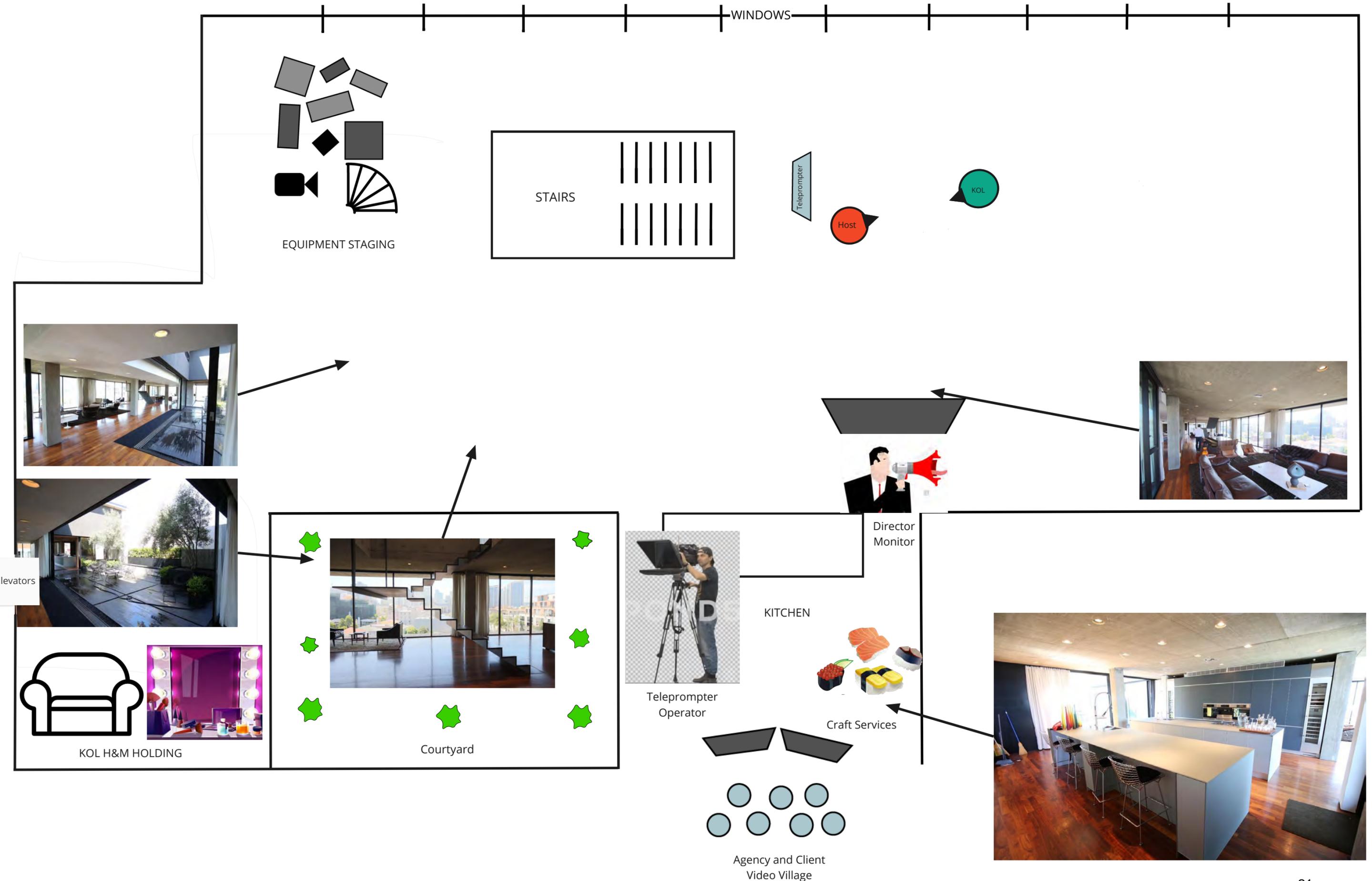
Additionally, the location should have:

- Floor to Ceiling Windows
- Natural Light
- Open Conference Room
- Low Traffic

SPECIAL NOTE:

Below are the brand colors. **Let's avoid them when possible.** The client does not want to over brand the spot.





VISUALS



The look of the each film will be defined by light and glass. Three cameras will be used to capture a high end premium looking space. Behind the KOLs and host will be a series of well placed frosted glass panels creating a translucent textured background. The result of this look will help pop out the individual in a gorgeous space while allowing our animations to spring forth in a clean space.

The color palette is clean white light with cool tones in the highlights. In the midtones, soft warm colors balance out the cool resulting in an inviting look.

Cool colors with a hint of warm...

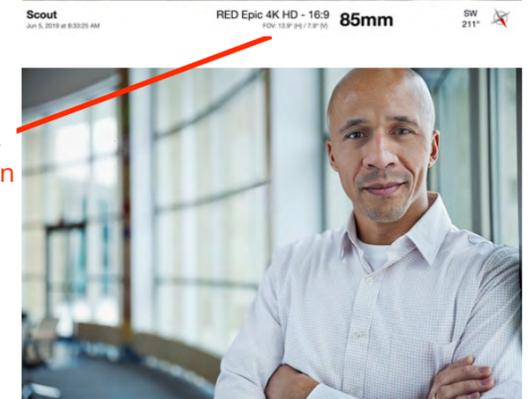
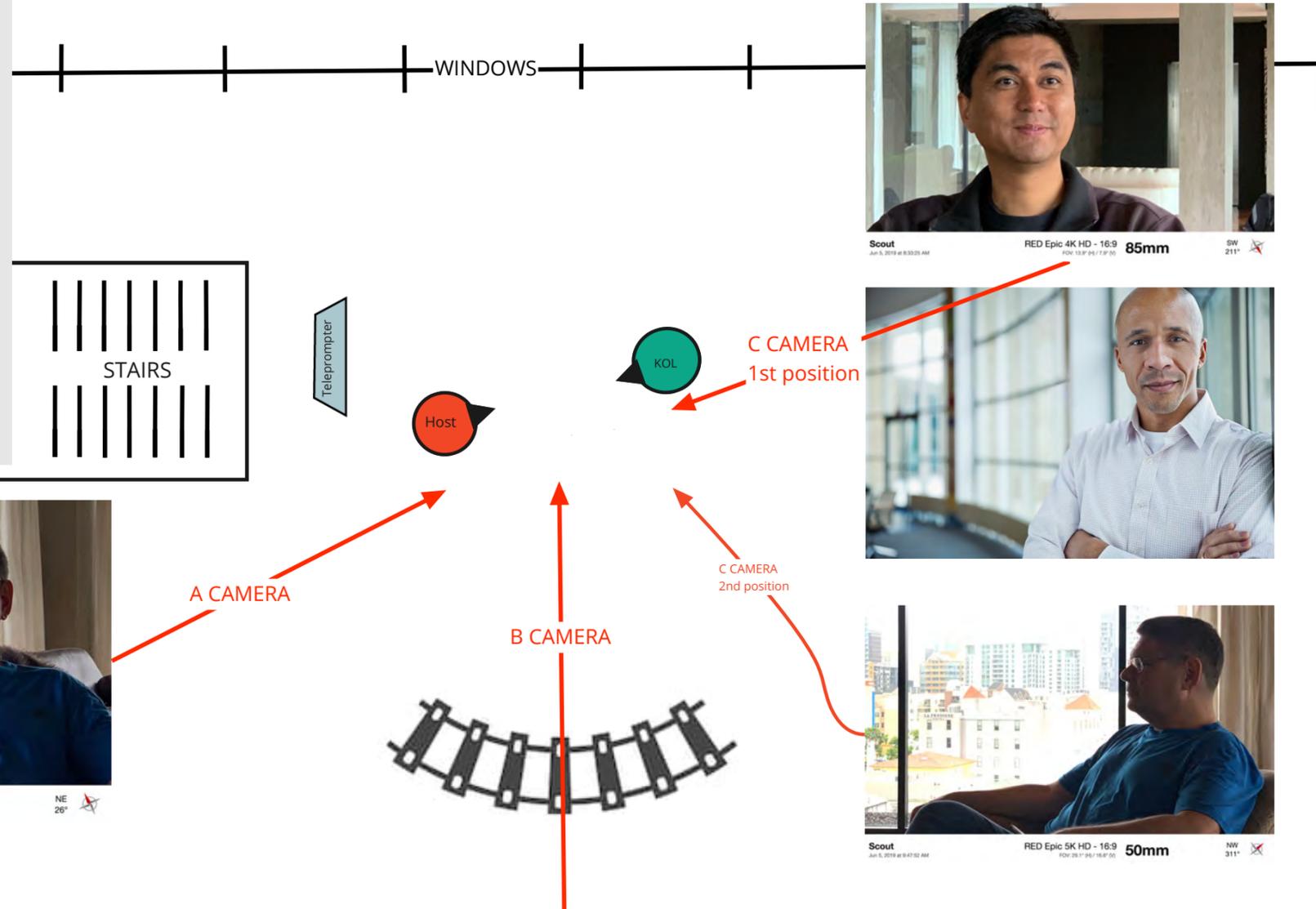
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SHOOTING PLAN

- Each KOL will be filmed in our three camera format.
- Each KOL will be on camera for roughly 2 hours with breaks as needed.
- All three cameras shall be rolling as the Host greets the KOL and sits them into their respective chairs. The cameras will continue rolling through final touches, slate, and into the interview.
- Coverage for Host's opening lines:
 - Host will deliver opening lines directly to B Camera in a single close up (50-70mm zoom) then turn to KOL to begin the interview.
 - Host will then repeat the opening lines directly to B Camera in a wide 2-shot (28mm zoom) then turn to KOL to begin the interview. The action will continue through the rest of the interview.
- Each interview will begin without teleprompter so that we can establish a rapport between Host and KOL. We shall cover the non-teleprompter version from all three camera positions with B camera "fishing and finding" moments on dolly and zoom.
- Once non-teleprompter interview is complete, Host shall be replaced by teleprompter and C camera will move into 2nd position. The interview shall be conducted again with KOL following the teleprompter.
- After both teleprompter and non-teleprompter interviews are captured, the remaining time shall be given over to repeating some questions with attention to capturing hand movements, gestures, and off the cuff moments from the KOL.



Reference of intended lensing effect for single on KOL. Of note, we plan to frame all KOL singles a little wider than necessary leaving us ample negative space to place in graphics. All KOL singles shall be captured in 5k of resolution which allows the editor to crop in as needed without compromising the quality.





Scout Jun 5, 2019 at 8:41:04 AM RED Epic 4K HD - 16:9 25mm S 161°

Camera A - Dolly on curved track



Scout Jun 5, 2019 at 9:46:10 AM RED Epic 5K HD - 16:9 85mm NE 26°

Camera B



Scout Jun 5, 2019 at 8:33:25 AM RED Epic 4K HD - 16:9 85mm SW 211°

Camera C - 1st position without teleprompter



Scout Jun 5, 2019 at 9:47:52 AM RED Epic 5K HD - 16:9 50mm NW 311°

Camera C - 2nd position with teleprompter



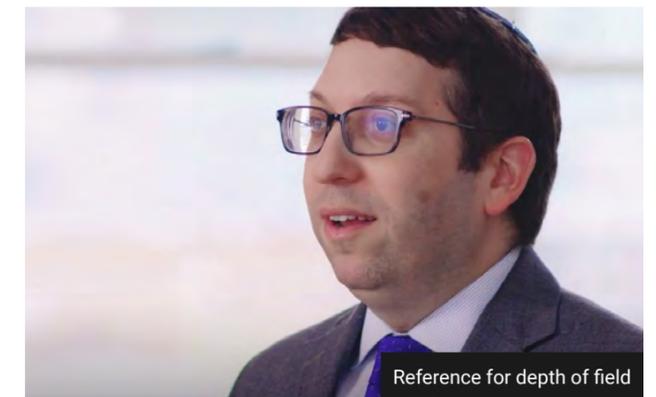
Scout Jun 5, 2019 at 8:39:39 AM RED Epic 4K HD - 16:9 25mm SE 126°



Reference for depth of field



Reference for depth of field



Reference for depth of field



Scout Jun 5, 2019 at 8:40:31 AM RED Epic 4K HD - 16:9 25mm E 104°



Note: when possible, shoot OTS of KOL to demonstrate connection.

PRODUCTION DESIGN

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Replace chairs with light grey.



Scout
Jun 5, 2019 at 8:40:31 AM

RED Epic 4K HD - 16:9
FOV: 45.0° (H) / 26.3° (V) **25mm**

E
104°



Replace current table with one that has wood legs and non-reflective top.



White, black, and metallic clipboards will be available as options for the Host.



The black background will be blocked by a white 12'x12' silk thus lightening up the frame.

A color sheer fabric will be placed in front of the staircase to soften the metal and lighten up the surface.

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Scout Jun 5, 2019 at 8:32:47 AM RED Epic 4K HD - 16:9 50mm SW 211°



A sheer fabric can be placed in the far back windows to help soften the background



Scout Jun 5, 2019 at 9:46:10 AM RED Epic 5K HD - 16:9 85mm NE 26°



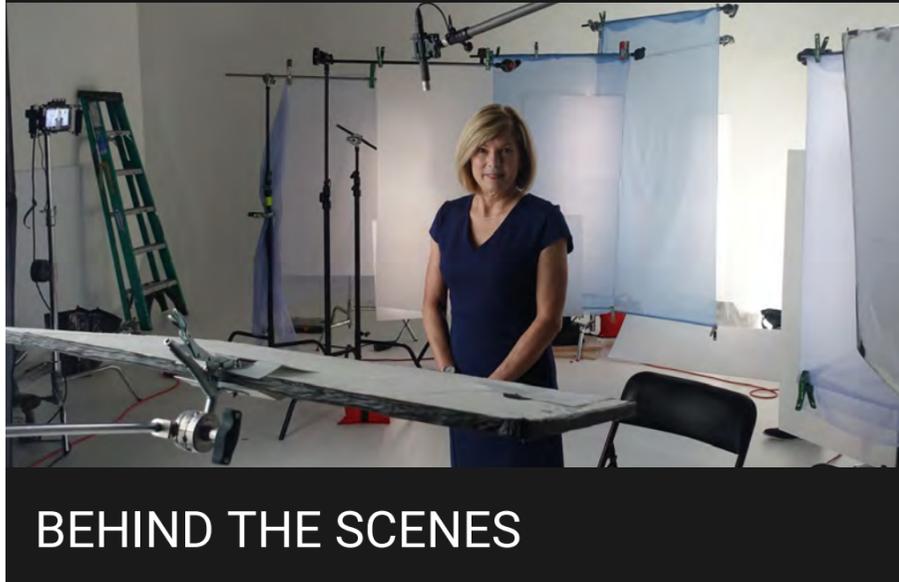
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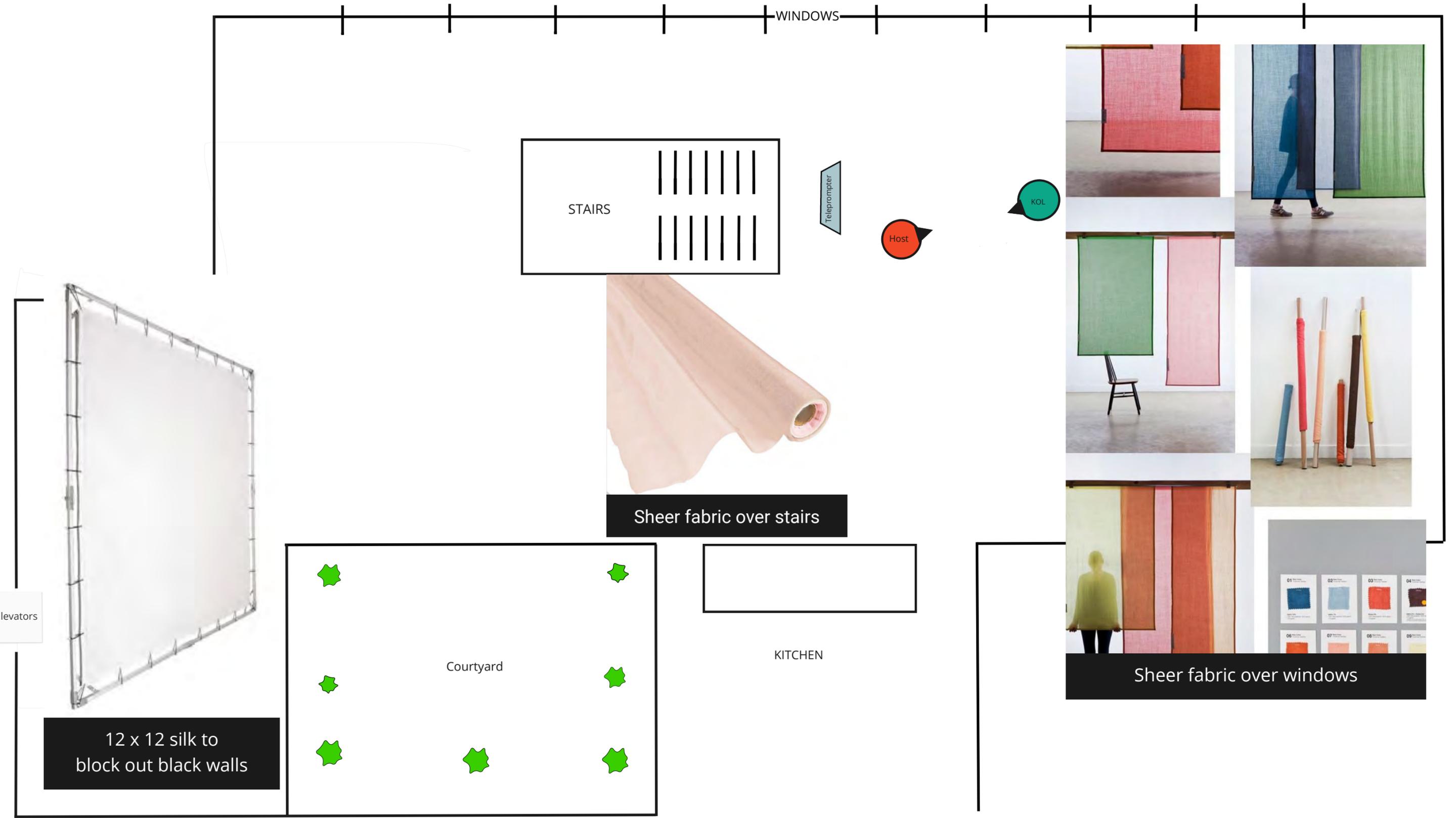


EXAMPLE OF FABRICS BEING USED TO CREATE TEXTURED BACKGROUNDS



BEHIND THE SCENES

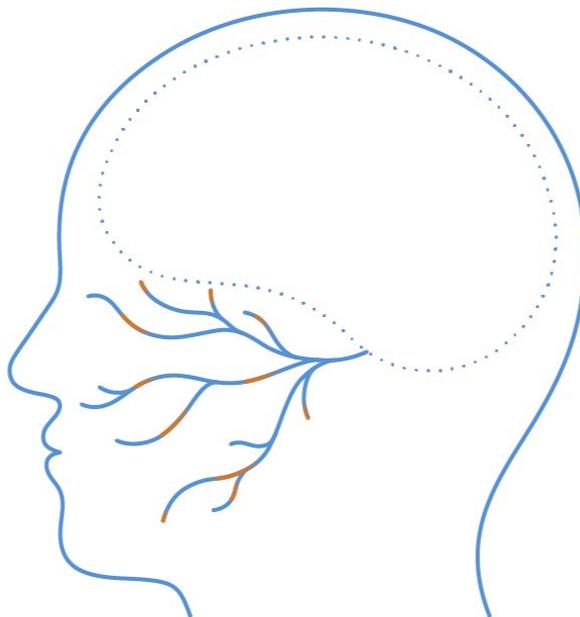
RESULTS - FRAME GRAB



VFX

TRIGEMINAL NERVE

OPTION A



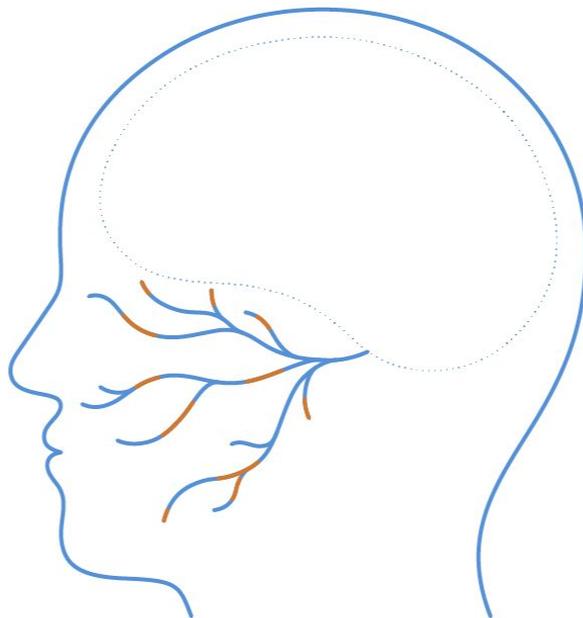
VASOCONSTRICTION OF THOSE BLOOD VESSELS

OPTION A



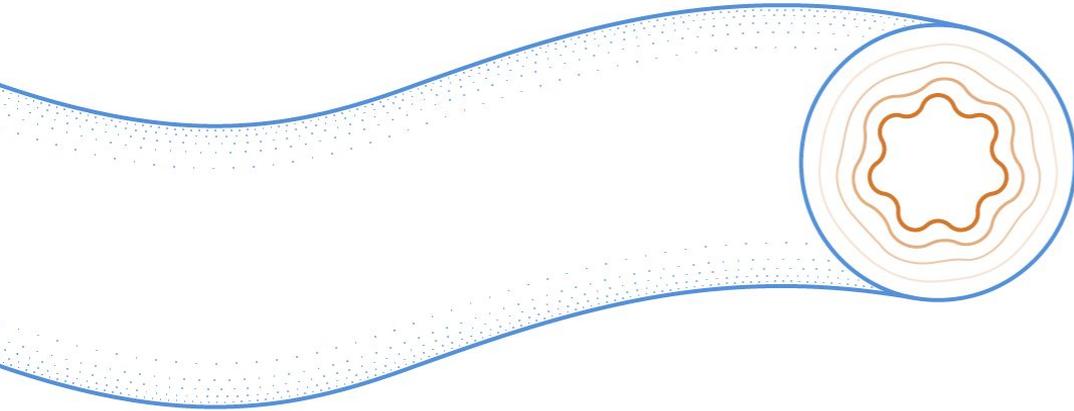
TRIGEMINAL NERVE

OPTION B



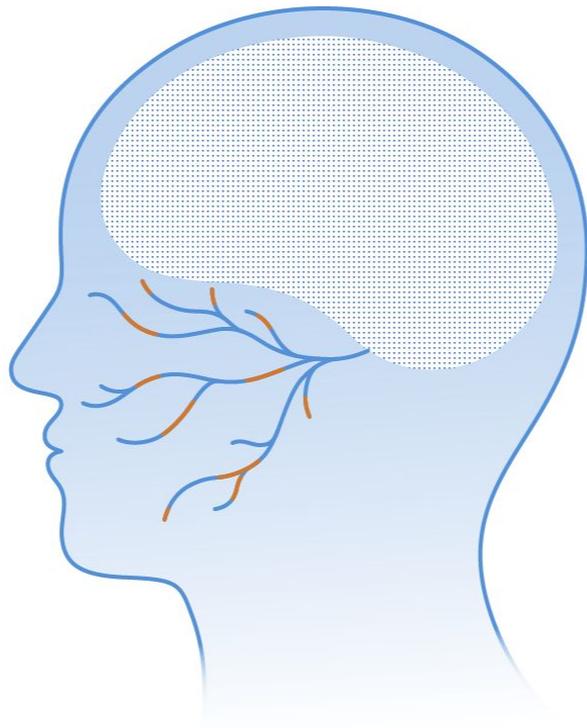
VASOCONSTRICTION OF THOSE BLOOD VESSELS

OPTION B



TRIGEMINAL NERVE

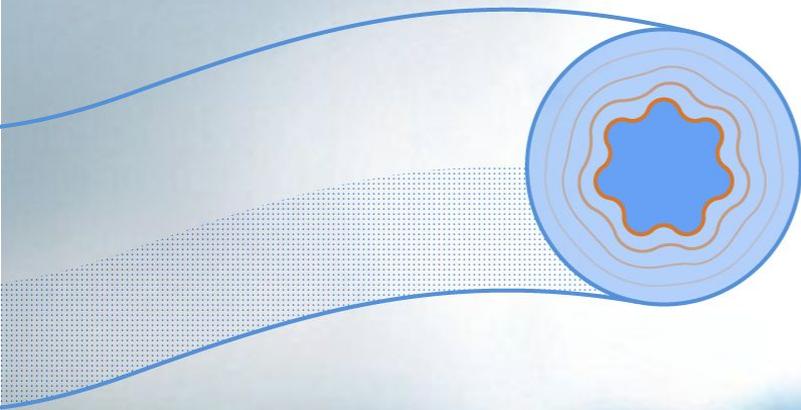
OPTION C

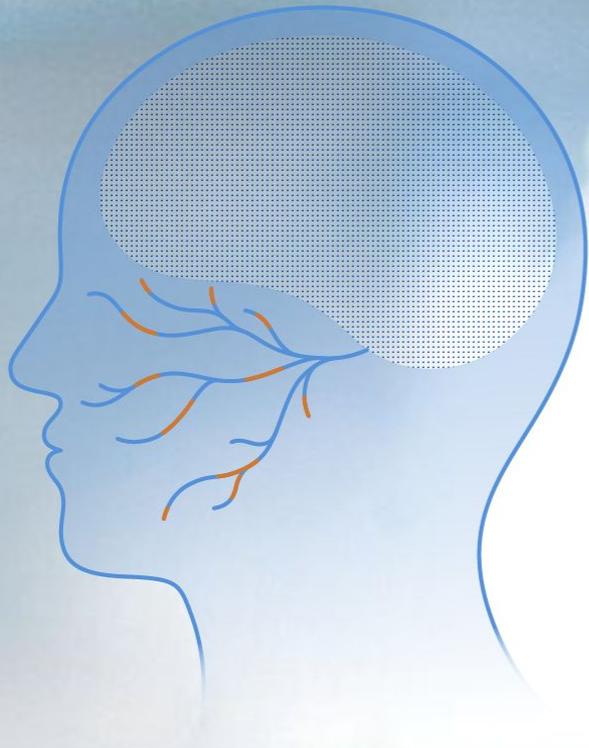


VASOCONSTRICTION OF THOSE BLOOD VESSELS

OPTION C

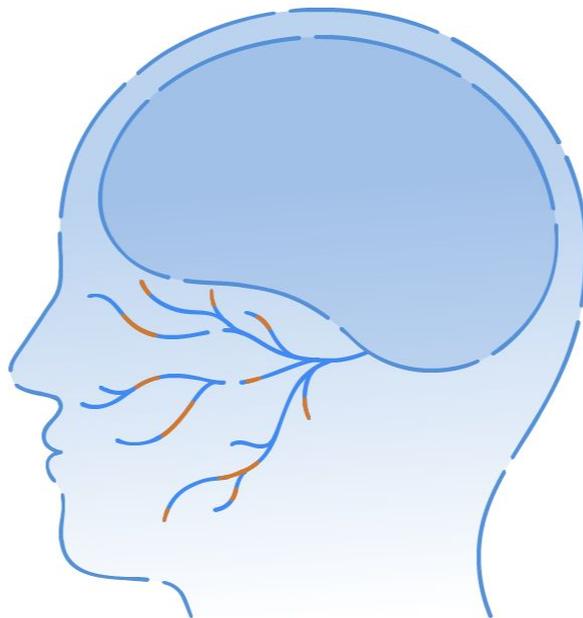






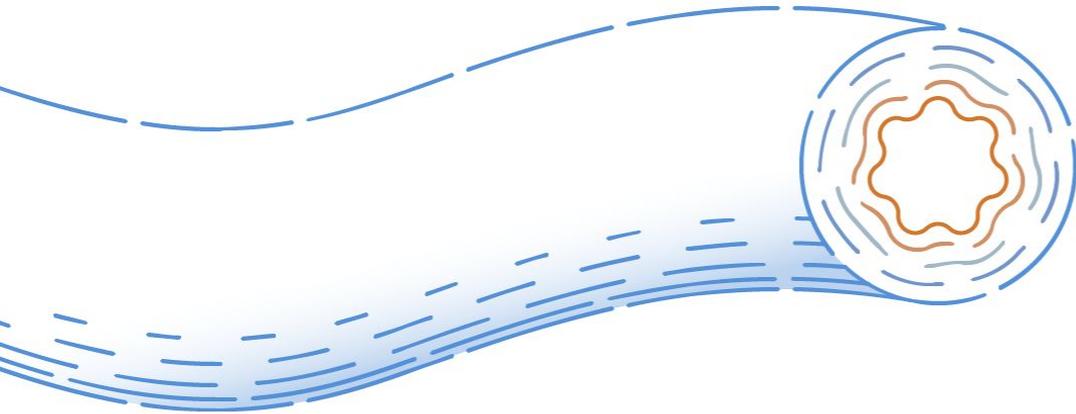
TRIGEMINAL NERVE

OPTION D



VASOCONSTRICTION OF THOSE BLOOD VESSELS

OPTION D



HOST



Audition Clips:

<https://darencott.smugmug.com/ELHost/n-wCNJcz/>

Password: migraine

Janora's Site: <http://janoramcduffie.com/>

Janora's Instagram: <https://www.instagram.com/jmcdeezie/?hl=en>

While at Carolina she was inducted into the Order of the Golden Fleece, crowned Miss University of North Carolina and gave the commencement speech for her graduating class.

Janora then joined the corporate ranks as a Consultant for Cap Gemini Ernst & Young in Atlanta, Georgia. It was there that she made the decision to leave her cubicle behind and pursue her childhood acting dreams.

After relocating to Los Angeles, she's had appearances on "The Unit", "24", "Lie to Me", "The Fosters" and most notably recurring as 'Social Worker Janet' on seasons 7 & 8 of "Grey's Anatomy." Janora also works as a Voice Actor in commercials, animation, video games and various loop groups.





Dr. Andy Blumenfeld

<https://www.migraineworldsummit.com/2019-andrew-blumenfeld/>

<https://www.migraineworldsummit.com/2019-andrew-blumenfeld/>

<https://www.foxla.com/good-day/357563091-video>

Dr. Blumenfeld is director of the Headache Center of Southern California. As director, he has encouraged the development of a center addressing the multi-faceted needs of headache sufferers. These needs include acute care, educational programs and other specialty services. This comprehensive approach treats the whole person in a highly individualized manner and addresses the growing demand for one-stop treatment services.

Dr. Blumenfeld grew up in South Africa and graduated from St. Andrews College, South Africa, with a first class pass and distinction in mathematics. He attended the University of the Witwatersrand, Johannesburg, South Africa Medical School and completed a neurology residency at Johannesburg Hospital. In 1986 he moved to the United States and completed a neurology residency at the University of Massachusetts Medical School. Following this, he completed an EEG and EMG fellowship, also at University of Massachusetts Medical School.

He served as staff neurologist at Kaiser Permanente, San Diego from 1990 to 2004. As Chief of Neurology Service at Kaiser from 1999-2004, his unit was named a Neurotoxin Center of Excellence by Thomas Jefferson University and Jefferson Medical College. The Neurotoxin Centers of Excellence recognize excellence in neurologists and other physicians who specialize in headache management.



Dawn Buse, PhD

<https://americanheadachesociety.org/news/qa-dr-dawn-buse-migraine-depression-anxiety/>

<http://www.dawnbuse.com/>

<https://www.youtube.com/watch?v=aj8XqaaPH1Y&pbjreload=10>

Dawn C. Buse, Ph.D., is a Professor in the Department of Neurology of Albert Einstein College of Medicine of Yeshiva University and Assistant Professor in the Clinical Health Psychology Doctoral Program of Ferkauf Graduate School of Psychology of Yeshiva University. She is a licensed clinical psychologist and a member of the Board of Directors and a Fellow of the American Headache Society.

Dr. Buse conducts research on migraine, pain, and stress among other conditions and is a co-investigator on the American Migraine Prevalence and Prevention (AMPP) Study, the Chronic Migraine Epidemiology and Outcomes (CAMEO) Study and the International Burden of Migraine (IBMS) Study. She has coauthored 76 manuscripts in peer-reviewed scientific journals, 54 review articles, and book chapters and 343 scientific abstracts. Her manuscripts have won the American Headache Society's "Wolff Award" twice (2008 and 2017), the Italian Society for the Study of Headache's "Enrico Greppi Award" twice (2010 and 2017), the British Medical Journal's "Patient's Choice Award", and the 2015 "Headache Reader's Choice" Award. In 2009 she won the National Headache Foundation, "Partners in Excellence" Award and in 2016 she won the American Headache Society "Seymour Solomon" Award.

Dr. Buse is the psychological and behavioral section editor for Current Pain and Headache Reports and she serves on the advisory board of the Journal of Headache and Pain, Pain Management News, and Pain Pathways Magazine. She is on the American Headache Society Board of Directors, Scientific Committee, and Electronic Media Committee, and the American Academy of Neurology Digital Strategy Subcommittee.

At the Montefiore Headache Center in New York City, Dr. Buse provides clinical care to individuals using biobehavioral techniques which include cognitive behavioral therapy, guided visual imagery, biofeedback and mindfulness training. She offers free guided visual imagery and relaxation exercises at www.dawnbuse.com. You can also find abstracts for her articles there. You can follow her on Twitter at [@dawnbuse](https://twitter.com/dawnbuse).



Dr. Suzan Khoromi, MD

<https://www.facebook.com/Suzan-Khoromi-MD-1069268963169710/>

https://www.researchgate.net/profile/Suzan_Khoromi

<https://www.linkedin.com/in/suzan-khoromi-md-207493aa>

Dr. Suzan Khoromi is a dependable and compassionate neurologist serving the community of Washington, DC. Dr. Khoromi attended George Washington University, where she received her medical degree, and completed her residency in neurology and a fellowship in pain management at the University of South Florida. Dr. Khoromi is certified by the American Board of Psychiatry and Neurology. She is a member of the American Academy of Neurology, the International Association for the Study of Pain, and the American Pain Society. She is fluent in English, French and Spanish. Patients trust Dr. Khoromi's expertise because she consistently provides high quality care that leads to positive and lasting health outcomes.

WARDROBE

KOL // Wardrobe

Wardrobe neutrals, navy blue. No black no brown. No oranges. No loud patterns,

If dress then it needs to be knee length.

Professional yet approachable.

The Host's wardrobe should be clean and professional yet with a friendly look.

Subtle cooler colors work as they will not draw attention from the main focus, the person being interviewed.

Specs:

- Button down shirts
- Blouses
- Office pants or skirt - Pleated and non pleated. Varying colors and fabrics.
- Shoes - Leather or tan. Low heels.

Notes:

- She should have a lightness to her. When possible add layers but nothing bulky or heavy.
- While the reference pics may be GAP, H&M, and the usual suspects, please try to go beyond the typical big box brands to find something that is a little more unique

