

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION**

In re:

GLOBAL WOUND CARE MEDICAL GROUP, a  
Professional Corporation,<sup>1</sup>

Debtor.

Chapter 11

Case No. 24-34908 (CML)

**FIRST SET OF MONTHLY FEE STATEMENTS OF SUZANNE RICHARDS  
FOR SERVICES RENDERED AND FOR REIMBURSEMENT OF EXPENSES  
INCURRED AS PATIENT CARE OMBUDSMAN FOR THE PERIOD FROM  
NOVEMBER 1, 2024 THROUGH MAY 31, 2025**

Pursuant to the *Order Granting Debtor's Motion for an Entry of an Order Establishing Procedures for Interim Compensation and Reimbursement of Expenses for Retained Professionals* [Docket No. 68] (the "Interim Compensation Order"), Patient Care Ombudsman ("PCO") Suzanne Richards hereby submits this first set of monthly fee statements<sup>2</sup> (the "Fee Statements") for compensation for services rendered and for reimbursement of expenses as the PCO for the period from November 1, 2024 through May 31, 2025 (the "Application Period"). A summary chart setting forth the compensation and expenses incurred during the Application Period is set forth below:

**SUMMARY CHART**

Name of Applicant:	Suzanne Richards
Applicant's Role in Case:	Patient Care Ombudsman
Date of Appointment:	11/04/2024 [Docket No. 46]

<sup>1</sup> The last four digits of the Debtor's tax identification number in the jurisdiction in which it operates is 3572.

<sup>2</sup> As set forth in the Interim Compensation Order [Docket No. 68], "[a]ny Retained Professional who fails to submit a Monthly Fee Statement for a particular month or months may subsequently submit a consolidated Monthly Fee Statement for multiple months provided that separate fee and expense information for each applicable month is provided in the consolidated statement."



	Beginning of Period	End of Period
Time period covered by this Application:	11/01/2024	5/31/2025
Time period(s) covered by prior Applications:	Not Applicable	Not Applicable
Total amounts awarded in all prior Applications:	Not Applicable	
Total fees requested in this Application: (80% of \$7,949.00)	\$6,359.20	
Total professional fees requested in this Application:	\$7,949.00	
Total actual professional hours covered by this Application:	28.75	
Average hourly rate for professionals:	\$276.49	
Total paraprofessional fees requested in this Application:	n/a	
Total actual paraprofessional hours covered by this Application:	n/a	
Average hourly rate for paraprofessionals:	n/a	
Reimbursable expenses sought in this Application:	\$159.60	
Total to be Paid to Priority Unsecured Creditors:	Not yet known	
Anticipated % Dividend to Priority Unsecured Creditors:	Not yet known	
Total to be Paid to General Unsecured Creditors:	Not yet known	
Anticipated % Dividend to General Unsecured Creditors:	Not yet known	
Date of Confirmation Hearing:	Not yet set	
Indicate whether plan has been confirmed:	No	

### **OBJECTION DEADLINE**

**In accordance with the Interim Compensation Order, each Notice Party or any other party in interest will have until 4:00 p.m. (prevailing Central Time) on the day that is twenty-eight (28) days after the filing of this Fee Statement (“Objection Deadline”) to object to the requested fees and expenses in accordance with the procedures described in the Interim Compensation Order. Upon the expiration of the Objection Deadline, the Debtors are authorized to promptly pay the applicable Professional an amount equal to 80% of the fees and 100% of the expenses requested in the Fee Statement.**

**DETAIL FOR SERVICES RENDERED AND EXPENSES INCURRED**

1. On October 21, 2024, the Debtor commenced this proceeding with the filing of a voluntary petition under Chapter 11 of Title 11 of the Bankruptcy Code. The Debtor is authorized to continue to operate its business and manage its affairs as a debtor-in-possession. Pursuant to sections 1107(a) and 1108 of the Bankruptcy Code, no trustee or examiner has been appointed in the Chapter 11 case. No creditors committee has been appointed.

2. On November 4, 2024, Kevin M. Epstein, the United States Trustee for the Southern District of Texas, filed the *Notice of Appointment of Patient Care Ombudsman Under 11 U.S.C. § 333* [Docket No. 46], with a *Verified Statement and Affidavit of Disinterest* [Docket No. 46-1].

3. During the Application Period, among other tasks, the PCO prepared and Dentons filed on January 14, 2025, the *Submission of First Report of Suzanne Richards as Patient Care Ombudsman of the Debtor* (for the period 11/04/2024 through 12/31/2024) [Docket No. 105]; filed on March 3, 2025 the *Submission of Second Report of Suzanne Richards as Patient Care Ombudsman of the Debtor* (for the period 1/01/2025 through 2/28/2025) [Docket No. 131]; and filed on June 10, 2025 the *Submission of Third Report of Suzanne Richards as Patient Care Ombudsman of the Debtor* (for the period 3/01/2025 through 4/29/2025) [Docket No. 212].

4. By this Fee Statement, the PCO requests payment of \$6,359.20 (80% of \$7,949.00) as compensation for reasonable and necessary legal services rendered and \$159.60 for reimbursement of actual and necessary expenses, for a total of \$6,518.20 for the Application Period.

5. In support of this Fee Statement, attached are the following exhibits:

- Exhibit A (Compensation related to one Project Category) is a schedule of the aggregate number of hours expended and fees incurred by the PCO;

- Exhibit B (Compensation for Professional) is a schedule of certain information regarding the PCO's services for which compensation is sought in this Fee Statement;
- Exhibit C (Expenses by Category) is a schedule of the expenses incurred by category for which reimbursement is sought in this Fee Statement; and
- Exhibit D (Invoices) consists of the PCO's six Invoices for services rendered and expenses incurred during the Application Period.

6. Although every effort has been made to include all fees and expenses incurred in the Application Period, some fees and expenses might not be included in this Fee Statement due to delays caused by accounting and processing during the Application Period. Accordingly, the PCO reserves the right to seek allowance of such fees and expenses not included herein. Subsequent monthly fee statements will be submitted in accordance with the Interim Compensation Order.

### **NOTICE**

7. Pursuant to the Interim Compensation Order, notice of this Fee Statement will be provided to the following Notice Parties via electronic mail: (a) the Debtor: Global Wound Care Medical Group, a Professional Corporation, % Owen B. Ellington, M.D., 2400 Augusta Drive, Suite 369, Houston, Texas 77057 (oellington@thewoundpros.com); (b) Raymond Millien, General Counsel, Wound Pros Management Group, 5901 West Century Boulevard, Suite 250, Los Angeles, California 90045 (raymond.millien@woundpros.com); (c) the Office of the U.S. Trustee for the Southern District of Texas, Attn: Ha Nguyen, 515 Rusk Street, Suite 3516, Houston, Texas 77002 (ha.nguyen@usdoj.gov); and (d) any other parties that the Court may designate.

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**CONCLUSION**

Wherefore, the PCO respectfully requests payment and reimbursement of fees and expenses incurred during the Application Period in the total amount of \$6,518.20 consisting of (a) \$6,359.20, which is 80% of the fees incurred by the PCO for reasonable and necessary legal services, and (b) \$159.60, which is 100% of the actual and necessary expenses incurred, in accordance with the procedures set forth in the Interim Compensation Order.

Dated: July 10, 2025

Respectfully submitted,

/s/ Suzanne Richards

Suzanne Richards  
Patient Care Ombudsman  
SMR Healthcare Management, Inc.  
4525 Dean Martin Drive, Unit 2308  
Las Vegas, Nevada 89103  
+1 714 290 6226  
E-Mail: [suzannerichards94@gmail.com](mailto:suzannerichards94@gmail.com)

**CERTIFICATE OF SERVICE**

This is to certify that I have on July 10, 2025, I caused a copy of the foregoing document to be served by the Electronic Case Filing System for the United States Bankruptcy Court for the Southern District of Texas.

/s/ Casey S. Doherty, Jr.

**EXHIBIT A****COMPENSATION BY PROJECT CATEGORY**

<b>Project Category</b>	<b>Month</b>	<b>Hours</b>	<b>Fees</b>
Work as Patient Care Ombudsman	November 2024	3.50	\$875.00
Work as Patient Care Ombudsman	January 2025	6.50	\$2,437.50
Work as Patient Care Ombudsman	February 2025	6.25	\$1,787.50
Work as Patient Care Ombudsman	March 2025	5.50	\$1,342.75
Work as Patient Care Ombudsman	April 2025	1.75	\$437.50
Work as Patient Care Ombudsman	May 2025	5.25	\$1,068.75
<b><i>TOTALS:</i></b>		<b>28.75</b>	<b>\$7,949.00</b>

**EXHIBIT B****COMPENSATION BY PROFESSIONAL**

Name of Professional	Position	Month	Hourly Rate	Hours Billed	Fees
Suzanne Richards	PCO	November 2024	\$250.00	3.50	\$875.00
Suzanne Richards	PCO	January 2025	\$250.00	6.50	\$2,437.50
Suzanne Richards	PCO	February 2025	\$250.00	4.00	\$1,000.00
			\$350.00	2.25	\$787.50
Suzanne Richards	PCO	March 2025	\$174.00	1.00	\$174.00
			\$175.00	1.75	\$306.25
			\$250.00	1.00	\$250.00
			\$350.00	1.75	\$612.50
Suzanne Richards	PCO	April 2025	\$250.00	1.75	\$437.50
Suzanne Richards	PCO	May 2025	\$175.00	3.25	\$568.75
			\$250.00	2.00	\$500.00
TOTALS:				28.75	\$7,949.00



**EXHIBIT C**

**EXPENSES BY CATEGORY**

<b>Expense</b>	<b>Total</b>
Mileage	\$159.60
<b><i>TOTALS:</i></b>	<b>\$159.60</b>

**EXHIBIT D**

**INVOICES**

**SMR Healthcare Management Inc**

4525 Dean Martin Dr

Unit 2308

Las Vegas, NV 89103-8118 USA

9098155051

suzannerichards94@gmail.com

# INVOICE

**BILL TO**

Global Wound Care Medical

Group

Case No: 24-34908

**INVOICE #** 1179**DATE** 06/29/2025**DUE DATE** 06/29/2025**TERMS** Due on receipt

SERVICE	DESCRIPTION	QTY	RATE	AMOUNT
Virtual Meeting	November 8, 2024 Meeting with Debtor's Counsel-Sam Maizel and Tania Moyron	0.50	250.00	125.00
Virtual Meeting	November 22, 2024 Interview with Dr Ellington, CMO	1	250.00	250.00
Virtual Meeting	November 22, 2024 Interview with Dr Releford, CEO	1	250.00	250.00
Review of Information Collected	November 27, 2024. Review of Notes from November 22nd meeting to set up more interviews and request reports to review for quality of services for patients	1	250.00	250.00

BALANCE DUE

**\$875.00**

**SMR Healthcare Management Inc**

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**INVOICE****BILL TO**

Global Wound Care Medical

Group

Case No: 24-34908

**INVOICE #** 1156**DATE** 03/02/2025**DUE DATE** 03/31/2025**TERMS** Due on receipt

SERVICE	DESCRIPTION	QTY	RATE	AMOUNT
<b>Report Writing</b>	January 13 Report writing of 1st Report	1.50	250.00	375.00
<b>Virtual Meeting</b>	January 21--interview with Ralph Cetrulo, Chief Financial Officer	0.75	250.00	187.50
<b>Virtual Meeting</b>	January 22-interview with Shameka Crump, NP, Regional VP of Clinical Services	1	250.00	250.00
<b>Virtual Meeting</b>	January 22-interview with Daisy Mota, Senior Medical Records Manager	1	250.00	250.00
<b>Virtual Meeting</b>	January 22-interview Mary Bogasky, Compliance and Privacy Officer	0.75	250.00	187.50
<b>Virtual Meeting</b>	January 22-Aldridge Westrich, NP, Clinical Scheduling Manager	0.75	250.00	187.50
<b>Virtual Meeting</b>	January 23-Nick Hines, Chief Operations Officer	0.75	250.00	187.50
<b>Virtual Meeting</b>	January 24-Daniel Yeager, Executive Vice President Operations	0.75	250.00	187.50
<b>Virtual Meeting</b>	January 30=Adebola Adefuye, NP	0.75	250.00	187.50
<b>Virtual Meeting</b>	January 30-Garrett Cuppels, Medical Director	0.75	250.00	187.50
<b>Virtual Meeting</b>	January 31-Nicholas Welch, Medical Director--no show (wait time 15 min)	0.25	250.00	62.50
<b>Virtual Meeting</b>	January 31-Melissa Cavazos, Training and Education Supervisor	0.50	250.00	125.00
<b>Virtual Meeting</b>	January 31-Sevara Bailey, NP--no show (wait time 15 min)	0.25	250.00	62.50

BALANCE DUE

**\$2,437.50**

**SMR Healthcare Management Inc**

4525 Dean Martin Dr

Unit 2308

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**INVOICE****BILL TO**

Global Wound Care Medical

Group

Case No: 24-34908

**INVOICE #** 1180**DATE** 06/29/2025**DUE DATE** 06/29/2025**TERMS** Due on receipt

SERVICE	DESCRIPTION	QTY	RATE	AMOUNT
<b>Expenses</b>	2/7/25. Mileage for travel to Nevada warehouse from NV residence NV Residence: 4525 Dean Martin Drive, Las Vegas, NV 89103 NV Warehouse: 6180 N Hollywood Blvd., Las Vegas, NV 89115--17 miles each way for a total of 34 miles	0.70	34.00	23.80
<b>In Person Meeting</b>	2/7/25 Tour of warehouse with Daniel Yeager, Executive Vice President Operations and Kevin Smith, Vice President of Supply Chain.	2.25	350.00	787.50
<b>Review of Information Collected</b>	2/28/25. Review of Notes for Report Writing All January Interview Notes Tour of Distribution Center Notes Organizational Chart HIPAA Test and Training Volume Statistics Ongoing WPS-SOP WPS Supply Chain--Warehouse Pre-pack Process SOP WPS Supply Chain--Warehouse Management SOP WPS Supply Chain--Warehouse Return Orders Management SOP	2.50	250.00	625.00
<b>Report Writing</b>	2/28/25 PCO 2nd Report Writing	1.50	250.00	375.00

BALANCE DUE

**\$1,811.30**

**SMR Healthcare Management Inc**

4525 Dean Martin Dr

Unit 2308

Las Vegas, NV 89103-8118 USA

9098155051

suzannerichards94@gmail.com

**INVOICE****BILL TO**

Global Wound Care Medical

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Case No: 24-34908

**INVOICE #** 1169**DATE** 05/09/2025**DUE DATE** 06/09/2025**TERMS** Due on receipt

SERVICE	DESCRIPTION	QTY	RATE	AMOUNT
<b>Telephone Calls</b>	3/12/25 Telephone call with Angela Roach, Director of Clinical Management to outline onsite visits to SNF sites.	0.25	250.00	62.50
<b>Expenses</b>	3/24/25 Mileage 22miles + 22miles = 44miles round trip	44	0.70	30.80
<b>Travel Rate</b>	3/24/25 Travel rate billed per hour traveled	1.75	175.00	306.25
<b>Contractor Level 1 On-Site Rate</b>	3/24/25 Meeting with Peter Khoupichane, Nurse Practitioner and Angela Roach, Director of Clinical Management onsite at Sierra View--Baldwin Park 8am to 9am	1	350.00	350.00
<b>Virtual Meeting</b>	3/24/25 Meeting with Mary Bogasky, Compliance Officer	0.75	250.00	187.50
<b>Expenses</b>	3/25/25 Mileage 26miles + 26miles = 52miles round trip	52	0.70	36.40
<b>Travel Rate</b>	3/25/25 Travel rate billed per hour traveled	1	174.00	174.00
<b>Contractor Level 1 On-Site Rate</b>	3/25/25 Meeting with LaCreasure White Nurse Practitioner MissionCare Riverside	0.75	350.00	262.50

BALANCE DUE

**\$1,409.95**

**SMR Healthcare Management Inc**

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# INVOICE

**BILL TO**

Global Wound Care Medical

Group

Case No: 24-34908

**INVOICE #** 1181**DATE** 06/29/2025**DUE DATE** 06/29/2025**TERMS** Due on receipt

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SERVICE	DESCRIPTION	QTY	RATE	AMOUNT
Virtual Meeting	4/22/25. RITA Software walkthrough with Information Technology team--Adam Aguirre and Cherubim May Alhgog from the Phillipines	0.75	250.00	187.50
Virtual Meeting	4/24/25. Meeting with Justin Dalton--Human Resources Director. Discussed recruitment, retention and onboarding process	0.50	250.00	125.00
Virtual Meeting	4/25/25. Meeting with Melissa Cavazos--Director of Training. Discussed training and in person skills day, competency analysis of clinical staff.	0.50	250.00	125.00

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**BALANCE DUE****\$437.50**

**SMR Healthcare Management Inc**

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**INVOICE****BILL TO**

Global Wound Care Medical

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Case No: 24-34908

**INVOICE #** 1178**DATE** 06/03/2025**DUE DATE** 06/03/2025**TERMS** Due on receipt

SERVICE	DESCRIPTION	QTY	RATE	AMOUNT
<b>Report Writing</b>	5/8/25. Report Writing of 3rd PCO Report	1	250.00	250.00
<b>In Person Meeting</b>	5/30/25. Review of Competency Assessment for Nurse Practitioners for Annual Review ; interview with Adrienne Olson, SVP of Clinical Operations and Mary Bogasky, Chief Compliance Officer	1	250.00	250.00
<b>Travel Rate</b>	5/30/25. Drive Time to Westin Hotel in Los Angeles Chino Hills to Los Angeles	1.50	175.00	262.50
<b>Travel Rate</b>	5/30/25. Drive Time from Westin Hotel in Los Angeles to Chino Hills	1.75	175.00	306.25
<b>Expenses</b>	5/30/25. Mileage from Chino Hills to Los Angeles and return visit 49miles + 49miles Total Round Trip 98miles	98	0.70	68.60

BALANCE DUE

**\$1,137.35**