



Viewpoint

Clinical Corner: Excellent Care, One Patient at a Time

It is 6:30 a.m., and the staff nurse on the fourth floor of the Harkness Eye Institute is already busy preparing for the day. Patients will begin arriving at 7:00 a.m. for their cataract, retinal and other surgeries.

In actuality, preparations for the day's surgeries began the previous day with a nurse's phone call to each patient at home. This ensures that patients understand and follow all pre-operative instructions.

"When patients arrive, they stop in the registration office first and then go to the fourth floor to be admitted," says Diane Wilson, R.N., Charge Nurse for the fourth floor of the Ambulatory Surgery Unit

at the Harkness Eye Institute. Ms. Wilson started at Columbia 20 years ago as a medical-surgical nurse for patients undergoing heart, by-pass and transplant surgeries. After working in Columbia's elite McKeen Pavilion, she transferred to the Eye Institute in 1991. Her staff at the Eye Institute includes four registered nurses, a nurse attendant, a patient care assistant and a unit clerk.

"Once patients are admitted, we check their vital signs, medical charts, eye examinations and doctor's dilating orders. We prepare them for the operating room

[OR], and when it is time for their surgery, we physically hand them off to the OR staff on the seventh floor," Ms. Wilson explains. "Following surgery, patients are returned to the recovery room on the fourth floor, where they spend about an hour before going home. The next morning, a nurse calls every patient to check on his or her progress."

It's a busy place to work. "We may have as many as 34 patients on any
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Charles Manby

L to R:
Priscila Ramirez, R.N., M.P.A.
and Diane Wilson, R.N.

"...From the moment I arrived at the Eye Institute for processing, to the moment I left... I was deeply impressed with the special effort made by every member of the staff – administrative, nurses and doctors – to put me at ease, and help me feel comfortable and secure in the knowledge that I would receive the very best care possible. It was a wonderful experience – the best I have had... I wanted you all to know what wonderful and caring people I encountered that day."
– A grateful patient, Rutherford, NJ

Science Insight: Small Molecules, Big Potential

"The major reason I came to Columbia was to bring treatments to patients," asserts Konstantin "Kosta" Petrukhin, Ph.D., the former head of ophthalmic research at Merck Research Laboratories. Dr. Petrukhin joined the research faculty of the Department of Ophthalmology in September. "I strongly believe that the future of age-related macular degeneration research lies not only in the creation of new basic knowledge but also in its rapid conversion into novel therapeutics and diagnostics." Originally from Chelyabinsk, Russia, Dr. Petrukhin is no stranger to Columbia University. After com-

pleting his Ph.D. at Moscow's Shemyakin Institute of Bioorganic Chemistry in 1987, Dr. Petrukhin held a visiting fellowship in Columbia's Department of Genetics and Development. He then returned to Moscow as a senior scientist at the Shemyakin Institute for three more years, before coming back to Columbia in 1991 for post-doctoral work in human genetics and neuroscience in the Department of Psychiatry, where he eventually rose to the faculty rank of Assistant Professor. There he identified the gene for Wilson disease, a disorder that affects copper metabolism and can

cause neurological, psychiatric, hepatic and ocular abnormalities.

In 1996, Merck recruited Dr. Petrukhin for its ophthalmic genetics program to develop drug targets for atrophic ("dry") age-related macular degeneration (AMD). He is perhaps most well known for his landmark work in identifying the gene responsible for Best macular dystrophy (a rare, inherited form of macular degeneration), as well as his work in isolating the disease gene responsible for Stargardt-like macular dystrophy. Overall,
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Konstantin
"Kosta"
Petrukhin, Ph.D.

Charles Manby



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Dear Friends,

Providing extraordinary patient care is our single most important goal. From routine eye exams to complex retinal surgeries, we deliver excellent vision care in a compassionate manner to each person who comes to us.

In this newly redesigned issue of *Viewpoint*, we illustrate our constant focus on patient care. We are proud to showcase the stellar team, led by Priscila Ramirez, R.N., M.P.A., that so capably runs our Ambulatory Surgery Unit. This unit – doctors, nurses and support staff – is responsible for over 3,400 outpatient eye surgeries at the Harkness Eye Institute each year and is considered the premier unit in the New York metropolitan area.

We also welcome Konstantin “Kosta” Petrukhin, Ph.D., the former head of ophthalmics research at Merck, to our research staff. Dr. Petrukhin is collaborating with other research faculty on drug development initiatives for age-related macular degeneration and other degenerative diseases.



Charles Manley

Additionally, we highlight neuro-ophthalmology co-chief Myles Behrens, M.D., as well as our many outstanding faculty and fellows.

Finally, we are deeply honored to announce that advisory board members Mr. and Mrs. Martin Kimmel have taken a leadership role in the *Vision for the Future* campaign by establishing the Helen and Martin Kimmel Assistant Professorship of Ophthalmology. The *Vision for the Future* campaign offers many opportunities to support key research programs, faculty development and state-of-the-art facilities. Your participation is crucial to increasing and improving our ability to provide patients with the very best care possible.

As we approach the season of gratitude and giving, we remain especially thankful for your past generosity and look forward to your continued support and commitment to advancing ophthalmology and vision care. Again, thank you sincerely for all that you do.

With best wishes to you and yours,

Stanley Chang, M.D.
K.K. Tse and Ku Teh Ying Professor
Edward S. Harkness Professor
Chairman, Department of Ophthalmology

Excellent Care, One Patient at a Time continued from page 1



Charles Manley

Staff of the 4th floor Ambulatory Surgery Unit. Front row, L to R: Diane Wilson, R.N.; Corazon Algenio, R.N.; Odetta Nurse; Modesta Lopez; Donna James; Melita Jonas. Back row: Debbie Caruth, R.N.; Gail Anthofer, R.N.

given day,” notes Priscila Ramirez, R.N., M.P.A., Patient Care Director. In her 33 years as a nurse at Columbia, Ms. Ramirez knows how to run a tight ship. Prior to joining the staff of the Eye Institute in 1997, she spent several years managing the primary OR at Columbia’s Milstein Hospital. Now she is responsible for the smooth operation of the Ambulatory Surgery Unit, which includes Ms. Wilson and her fourth floor staff, as well as 14 OR nurses, an OR technician, three nursing attendants and another unit clerk on the seventh floor. She is also responsible for staffing, finances, materials and

supplies, coordination of activities and performance improvement.

“In 2004, we served 3,234 patients. In 2005, that number grew to 3,407, and keeps increasing. We are definitely seeing more cases, due to the expertise of our doctors and staff,” Ms. Ramirez remarks. “The beauty of working here is that everyone has a common goal – to provide high-quality, safe patient care in an efficient manner.” Ms. Ramirez backs up her team by arriving at 7 a.m. every morning and staying until the last patient leaves because she wants to be sure the nurses have her support “no matter what.”

The staff of the Ambulatory Surgery Unit is exceptionally responsive. “The staff-to-patient ratio is very low, which means we can provide a great deal of individualized attention to patients,” Ms. Wilson says. “The nurses know they may have to come in on very short notice to cover a shift, and often work until 9 or 10 p.m. if surgeries become complicated and run late. Our nurses gladly stay until whatever time is necessary to ensure patients are cared for properly.”

A grateful patient from Yonkers, NY, says, “You have the most wonderful staff working on the fourth floor preparing patients for eye surgery. I have been there many

times, and every time I have received the best treatment. Your staff is kind, considerate, compassionate and very capable at the jobs and tasks they encounter every day... They made it all very comfortable for me throughout the entire procedure. They were in contact with my family all along while I was there and put their minds at ease as well.”

Richard Braunstein, M.D., Division Chief of Anterior Segment and Laser Vision Correction, concurs. “It’s easy to compliment the staff, as they do an outstanding job. Every week I have patients who praise the quality of care that they received at

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Charles Manley

Staff of the 7th floor OR. L to R: Zoraida Lucca; Akthar Khan; Jalcki Robinson, C.R.N.A.; Benedicta Fonacier, R.N.; Candace Melton, R.N.; Jerris Motta; Priscila Ramirez, R.N., M.P.A.; Arvid Johnsen, R.N.; Ellen Flynn Reyes, R.N.; Sharon Alexander.

Philanthropic Focus: Kimmels Endow New Professorship

Helen and Martin Kimmel, longtime members of the Department of Ophthalmology's Board of Advisors, have recently endowed the Helen and Martin Kimmel Assistant Professorship of Ophthalmology. Staunch contributors to medical science research, the Kimmels decided to establish this professorship in support of the *Vision for the Future* campaign and in recognition of the importance of attracting first-class young faculty to advance Columbia's vision research initiatives.

The Kimmel Assistant Professorship is unusual in that it will be implemented as a five-year rotating term appointment, rather than as a typical endowed professorship. Highly selective, this professorship is intended to develop and energize the careers of outstanding and talented young physician-scientists in vision research. While they are

establishing their clinical practice at Columbia, recipients will have the flexibility to pursue innovative and specialized research interests in such emerging fields as nanotechnology, proteomics, informatics, stem cell biology and genetics, all as applied to vision research.

"We are deeply grateful to Mr. and Mrs. Kimmel for their leadership on the Board and for their tremendous generosity," says Stanley Chang, M.D. "The Kimmel Assistant Professorship is a critical part of our ongoing strategy to nurture a cadre of talented young people as they become exceptional physician-scientists and infuse the Department's exciting clinical and basic science research with fresh ideas and approaches."

A committee has been formed to select the inaugural recipient.



NYU Photo Bureau/Byron Brown

Helen and Martin Kimmel

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Small Molecules, Big Potential continued from page 1

he identified two of six genes associated with juvenile macular degeneration.

At the peak of his career as a geneticist, Dr. Petrukhin shifted his laboratory's focus toward drug development. "I came to the conclusion that genetic discoveries, while important and exciting, do not directly benefit a majority of patients whose quality of life we are trying to improve," he explains. He is strongly motivated by Dr. Stanley Chang's focus on translational research – the process of bringing basic science research to clinical application more quickly via scientist and physician collaboration.

"Kosta is a very accomplished scientist and a great addition to the department," says Rando Allikmets, Ph.D., Director of Research at the Harkness Eye Institute and a longtime friend and colleague who also studied at Moscow State University and the Shemyakin Institute in the 1980s. Dr. Allikmets collaborated with Dr. Petrukhin in studies on Best disease and in identifying the gene for Stargardt-like macular dystrophy. "Those were important studies for rare monogenic diseases. Our main

interest now is finding a cure for AMD."

"One of the challenges in developing treatments for AMD is that there are very few clinically testable hypotheses," notes Dr. Petrukhin. "However, Dr. Janet Sparrow's work in understanding the causal link between intracellular accumulation of A2E lipofuscin and photoreceptor degeneration is one of the few areas in which it is possible to measure the impact of small molecule therapies." Small molecules are chemical compounds that interact with a drug target, usually a protein involved in disease origination and development.

According to Dr. Petrukhin, "Once we have identified a drug target, we can then develop an assay of potential compounds to see how they interact with the protein and change it." High-throughput screening is a technique common in the pharmaceutical industry in which a nanoplate assay of 3,456 compounds, each in individual two-microliter wells, can be screened very quickly against the drug target. While it is possible to screen a million compounds in about a week, Dr. Petrukhin acknowledges that the most time-consuming part of the process is developing, testing and miniaturizing the appropriate assay.



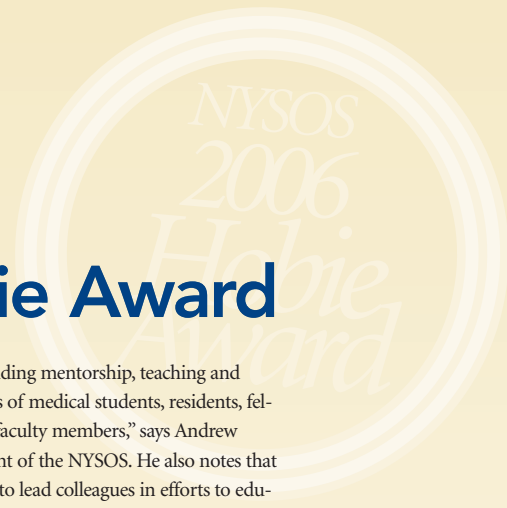
A microtiter plate analyzer used in assay development.

Charles Manley

Vision loss from AMD is related to degeneration of the photoreceptor rods and cones of the macula, the tiny portion of the retina responsible for fine, central vision. Retina-specific nuclear receptor (RNR), a recently discovered protein expressed only in the retina's photoreceptor cells, is thought to play an important role in photoreceptor development and health. Dr. Petrukhin is using high-throughput screening assays to explore which compounds may interact with RNR and other drug targets to prevent photoreceptor degeneration. He is quick to note that the expertise of other departmental research faculty in such areas as transgenic mouse modeling, ocular imaging and x-ray crystallization will augment his efforts.

Strategies to prevent photoreceptor degeneration may also benefit those suffering from retinal detachment. "In a retinal detachment, photoreceptors separate from the retinal pigment epithelium and die. It might be possible to give this treatment prior to surgery to prevent photoreceptor death for a better surgical outcome," Dr. Petrukhin notes.

"Kosta brings an important scientific and entrepreneurial view to our existing studies in small molecule therapy," Dr. Allikmets affirms. "His extensive experience in drug development from his work at Merck combined with a promising new approach offers exciting collaborative possibilities."



Chang Receives Hobie Award

On September 29, 2006, Stanley Chang, M.D. was awarded the 2006 Hobie Award by the Board of Directors of the New York State Ophthalmological Society (NYSOS). Named for esteemed ophthalmologist Hobart "Hobie" A. Lerner, M.D., the award is the NYOS's highest honor and recognizes extraordinary achievements in the fields of ophthalmic research, resident training and patient care.

"Stanley Chang has pioneered revolutionary surgical approaches for the management of retinal detachments

and provided outstanding mentorship, teaching and guidance to hundreds of medical students, residents, fellows, colleagues and faculty members," says Andrew Prince, M.D., President of the NYOS. He also notes that Dr. Chang continues to lead colleagues in efforts to educate state lawmakers about the effects of proposed legislation, as well as encourage resident awareness and membership in NYOS. "Patients universally find him kind, warm, generous and caring. Dr. Chang truly embodies the spirit of Hobart Lerner." ■

Faculty News

Lama Al-Aswad, M.D.,

Assistant Professor of Clinical Ophthalmology, traveled to her native Syria in June to moderate a



Lama Al-Aswad, M.D.

continuing medical education conference for the Syrian-American Medical Association. Dr. Al-Aswad also lectured and demonstrated complicated glaucoma surgeries for physicians and residents at Alasad Teaching Hospital at the University of Damascus.

Michael F. Chiang, M.D., M.A.,

Assistant Professor of Ophthalmology and Biomedical Informatics, has been selected to hold the Herbert Irving Assistant Professorship, a three-year appointment. Mr. Irving, the New York City philanthropist and co-founder of SYSCO, endowed the professorship in 1987. Gaetano Barile, M.D., the first Irving Professorship recipient in the Department of Ophthalmology, held the appointment from 2002-2005.

Howard F. Fine, M.D., M.H.Sc.,

a Vitreoretinal Clinical Fellow in the Department of Ophthalmology, was one of four graduating retinal fellows from around the country selected to receive the Ronald G. Michels Fellowship Award at the 2006 Annual Meeting of the

American Academy of Ophthalmology (AAO). This prestigious award is given each year in honor of the late Dr. Michels, who made major contributions to vitreoretinal surgery before his untimely death at the age of 49 from leukemia in 1991.

John Flynn, M.D.,

Anne S. Cohen Professor of Pediatric Ophthalmology, Vice Chairman of the Department of Ophthalmology and Chief of the Division of Pediatric Ophthalmology, attended the World Retinopathy of Prematurity (ROP) Meeting, held at the University of Vilnius in Lithuania in September. More than 300 registrants from 50 countries

(including 38 developing countries) represented some 90% of the world's population, and included pediatric ophthalmologists, neonatologists, nurses and respiratory therapists.

The conference, titled "East Meets West: Is Blindness from ROP Preventable?" explored advances in the number one preventable cause of infant blindness. Dr. Flynn spearheaded an effort that raised nearly \$50,000 to underwrite airfare expenses for 40 doctors from devel-



John Flynn, M.D.

oping countries. "The energy and spirit of the participants was just incredible," notes Dr. Flynn with enthusiasm. "The presentation quality was exceptional. All of the participants, particularly those from the developing world, were hungry for knowledge. They squeezed us for information, and soaked it up like sponges. We also learned a great deal about the challenges they face. It was tremendously inspiring."



Reza Iranmanesh, M.D.

Reza Iranmanesh, M.D.,

Assistant Professor of Clinical Ophthalmology and vitreoretinal specialist, recently joined Columbia Ophthalmology Consultants. A native of Iran who grew up in California, Dr. Iranmanesh earned his undergraduate degree in psychology from the University of California at Los Angeles and his medical degree from St. Louis University School of Medicine. Following an internship at the University of Hawaii and residency in ophthalmology at the Rocky

Resident-Fellow Research Day 2006



Sarah Moayer

Resident-Fellow Research Day is held annually in June after the final Grand Rounds of the year. Residents, clinical fellows and research fellows each give in-depth presentations on research topics developed during the course of the academic year and departing senior residents who have completed their training are honored. Yuri Oleynikov, M.D., Ph.D., a 2006 resident, received the B. Doblí Srinivasan, M.D. Award for the best paper presented by a resident or fellow.



Judith Pisano

L to R: John Flynn, M.D., Stanley Chang, M.D. and outgoing clinic director B. Doblí Srinivasan, M.D.

Mountain Eye Institute at the University of Colorado Medical Center, Dr. Iranmanesh held the prestigious Flanzer Retina Fellowship at Columbia, where he worked under the direction of Drs. Chang, Del Priore, Barile and Schiff.

Amilia Schrier, M.D., Associate Clinical Professor of Ophthalmology, is the new A. Gerard DeVoe – B. Doblí Srinivasan Director of Ambulatory Eye Care at the Harkness



Amilia Schrier, M.D.

Christine Kennedy

Eye Institute. Dr. Schrier, who has taught residents in the ITT Eye Clinic since 1998, assumed responsibility for resident training and clinic operation upon Dr. Srinivasan's retirement at the end of June.

Stephen L. Trokel, M.D., Professor of Clinical Ophthalmology, Vice Chairman of the Department of Ophthalmology and Director of Columbia Vision Correction, lectured on advances in excimer laser refractive surgery and led Grand Rounds as part of the Bausch and Lomb Visiting Professorship at the University of Rochester in September. ■

Promotions

Michael Kazim, M.D. promoted to Clinical Professor of Ophthalmology and Surgery

Hugh Moss, M.D. promoted to Clinical Professor of Ophthalmology

William Schiff, M.D. promoted to Associate Professor of Clinical Ophthalmology

Michael Weiss, M.D., Ph.D. promoted to Clinical Professor of Ophthalmology



Myles M. Behrens, M.D.

Faculty Spotlight: Myles M. Behrens, M.D.

“The symptoms of neuro-ophthalmologic disorders, such as double vision or visual loss, can be especially frightening to patients as they try to understand what is happening to their vision,” explains Dr. Behrens, a professor of clinical ophthalmology and co-chief of the neuro-ophthalmology clinic at the Harkness Eye Institute.

Dr. Myles M. Behrens is considered a “diagnostic genius” by colleagues and patients who praise his meticulous and thoughtful clinical approach to neuro-ophthalmologic disorders and vision-robbing neurological diseases. His study of optic nerve disease has yielded important new understandings of disease mechanisms and treatments. But perhaps his most significant contribution to the field of neuro-ophthalmology is the dedicated training he has provided to so many over more than four decades at Columbia.

Neuro-ophthalmology is the study and treatment of visual disorders that originate in the nervous system. Brain disorders including stroke, tumor and trauma as well as systemic neurological diseases like multiple sclerosis (MS) are some of the most obvious causes of neuro-ophthalmologic disorders, but diabetes, hypertension and thyroid irregularities also cause neurological damage that can affect vision.

Dr. Behrens began his career at Columbia 48 years ago as a medical student, then an intern and an assistant resident in medicine. He went on to study immunology and infectious diseases for two years at the National Institutes of Health before returning to Columbia for his ophthalmology residency. He then spent a year as a fellow with neuro-ophthalmology pioneer Dr. William Hoyt at the University of California at San Francisco, and then the summer at the National Hospital for Neurologic Diseases in London under Professors Alan Bird and Michael Sanders, another of Dr. Hoyt’s former fellows.

Dr. Behrens was invited back to the Harkness Eye Institute and the Neurological Institute of New York at Columbia following his fellowships to restructure the neuro-ophthalmology consulting and teaching program. His approach emulated that of Dr. Hoyt. In 1985, Dr. Behrens asked Jeffrey Odel, M.D., one of his former neuro-ophthalmology fellows, to join him in leading the neuro-ophthalmology ser-

vice at Columbia. They have trained numerous students, residents and fellows over the years, including recipients of fellowships from the Heed Ophthalmic Foundation. Dr. Behrens, a former Heed Fellow himself, was honored in 1986 with the prestigious Heed Ophthalmic Foundation Award for his leadership and teaching excellence, as well as his clinical and research contributions to neuro-ophthalmology.

Over these decades, Dr. Behrens has witnessed important advances in neuro-ophthalmologic diagnosis and treatment, aided by the many patients and outstanding ancillary services for clinical and neuro-radiologic evaluation at the Neurological Institute. “With the advent of the CT scan in 1975 and the MRI in 1985, we gained huge advances in more accurately pinpointing the causes of neuro-ophthalmologic disorders,” he observes, concluding, “Our goal is to accurately diagnose, treat and manage the root causes of patients’ symptoms as quickly and effectively as possible in order to restore vision and prevent or delay further damage.”

Drs. Behrens and Odel have been particularly interested in understanding diseases of the optic nerve. “Our research has focused on the realm of optic nerve disease, following in the tradition of Frank Carroll, M.D.,” notes Dr. Behrens, speaking of the late Columbia professor widely regarded as the pre-

mier optic nerve specialist in the country for a generation. In the past decade, Drs. Behrens and Odel have collaborated with other faculty at Columbia, in particular Professor Donald Hood, to explore optic nerve defects using non-invasive diagnostic tools such as multi-focal visual evoked potential (mfVEP) and multi-focal electroretinography (mfERG), as well as optical coherence topography (OCT).

MfVEP provides objective visual field testing. “The pattern of defect in the visual field suggests where the basis for visual impairment may be localized in the brain, if not the retina or optic nerve. This tool allows us to separate organic from non-organic disease and distinguish the underlying pathogenesis – such as whether an optic nerve defect is circulatory or inflammatory, as in MS,” Dr. Behrens says.

“MfERG, if abnormal, indicates a retinal rather than optic nerve basis for a defect. OCT allows us to measure loss of the retinal nerve fiber layer. All of these tools have expanded our ability to diagnose and follow disease progression in glaucoma, optic neuropathy and systemic neurological diseases such as MS.”

We salute Dr. Behrens for his sharp diagnostic insights and continued dedication to exemplary patient care at Columbia, and for his valued contributions to training the next generation of leaders in the field of neuro-ophthalmology. ■

Excellent Care, One Patient at a Time *continued from page 2*

the Eye Institute. From my own perspective, the staff at the Eye Institute is highly professional, well-trained, patient-oriented and motivated to provide the highest quality ophthalmic surgical care.”

Even with a highly conscientious staff, it is a constant challenge to keep each day’s schedule on track. “When a simple cataract procedure unexpectedly turns into a more serious retinal surgery, it takes extra time,” Ms. Wilson explains. “Delays in the operating room do happen occasionally, and we communicate

the reason for the delay as quickly as possible to waiting patients. We know that it can be nerve-racking to wait, but most people understand that a delay means that the patient before them is receiving all the attention necessary for a positive outcome, just as they would expect for themselves.”

Ms. Wilson and Ms. Ramirez have been instrumental in improving patient flow and comfort. “We recognize how important it is to care for family members while surgery is in progress,” remarks Ms. Wilson.

“We offer a small snack to keep them comfortable and reduce anxiety. After the surgery, we invite family members into the recovery room to be with the patient.”

“Patients generally are happy with their experience. Patient education is a big part of that. The doctors and nurses are very good about explaining exactly what patients should expect,” says Ms. Ramirez. “Patients also appreciate our individual recovery rooms, which offer more privacy than typical spaces separated by curtains. We have

recliners in the rooms, rather than beds, which are easier for patients with limited mobility.” Ms. Ramirez says the best part of her job is when patients come back from the operating room and can see clearly without any complications. “A successful outcome is a big part of my satisfaction,” she acknowledges.

Ms. Wilson agrees. “Unlike other types of nursing, here we get to see immediate results,” she says. “It feels like we are really making a difference, and I’m pleased to be a part of that.” ■

Rising Talent

O'Neil Biscette, M.D.,

from St. Lucia, West Indies, is a Vitreoretinal Clinical Fellow. After teaching high school in St. Lucia for



O'Neil Biscette, M.D.

two and one-half years, Dr. Biscette changed direction and earned an undergraduate degree in electrical engineering from City College of the City University of New York. He then headed to Detroit to pursue a graduate degree in computer engineering at Wayne State University, while working as a product development and test engineer at Ford Motor Company. Dr. Biscette earned his medical degree from the University of Michigan Medical School and interned at Howard University Hospital in Washington, DC, where he also completed his residency in ophthalmology and conducted volunteer glaucoma screening. Most recently, he was awarded first place in Howard University's Resident/Faculty Scientific Research Competition for his research on electronic retinal implants.

Dr. Biscette's current clinical and research interests include vitrectomy

in patients with uveitis, intraocular drug delivery systems, electronic retinal implants and the study of the effects of age-related macular degeneration (AMD) treatments.

"I believe that clinical research is extremely important to medical progress and plays a vital role in translating research from the laboratory to the bedside," says Dr. Biscette. "A dedicated opportunity to contribute to that effort, particularly in the area of vitreoretinal diseases, is invaluable to me."

Mark Donaldson, M.D.,

of Brisbane, Australia, is a Vitreoretinal Surgery Clinical Fellow who earned his medical and surgical degrees from The University of Queensland

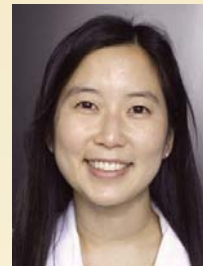


Mark Donaldson, M.D.

School of Medicine. He interned at Princess Alexandra Hospital in Brisbane, and served as a House Officer in ophthalmology, neurosurgery, otolaryngology and emergency medicine before becoming a Senior House Officer in ophthalmology at the Royal Brisbane

Hospital. Following that appointment, he was accepted into the Ophthalmology Registrar training program at the Royal Victorian Eye and Ear Hospital in Melbourne. Most recently, he completed a fellowship in retina and vitreous surgery at The Mayo Clinic in Rochester, MN.

"There is no better place in the world to learn about the management of complicated retinal detachments," says Dr. Donaldson. "With the techniques I learn here, I hope to make a valuable contribution to the care of patients with this visually disabling condition."



Susan Lee, M.D.

Susan Lee, M.D.,

a native New Yorker, is a Clinical Fellow in Glaucoma. She earned her undergraduate degree in biology from Yale University and her

medical degree from Yale's School of Medicine, graduating cum laude at both institutions. Following an internship at St. Vincent's Medical Center in New York, she returned to Yale for her ophthalmology residency. While at Yale, she conducted glaucoma research under M. Bruce Shields, M.D.

Dr. Lee works closely with Drs. Max Forbes, Lama Al-Aswad and Rajendra Bansal, seeing glaucoma patients in both the clinic and the operating room. She is also actively involved in Columbia's free glaucoma screenings in the community.

Eric Wolf, M.D.,

born in New York City and raised in northern New Jersey, is a Clinical Fellow in Anterior Segment. He earned his undergraduate degree at Columbia in math and religion and a graduate degree



Eric Wolf, M.D.

from Yeshiva University in philosophy before returning to Columbia for his medical degree. Dr. Wolf completed an internship in internal medicine at Long Island Jewish Medical Center, coming back to Columbia for his ophthalmology residency. He served as Chief Resident in the ITT Eye Clinic in his final year.

Dr. Wolf specializes in cataract and refractive surgery, medical and surgical diseases of the cornea and external eye disease. He works primarily with Dr. Richard Braunstein, as well as Drs. Amilia Schrier, George Florakis and Lynda Kleiman.

2006 Ophthalmology Residents



Ophthalmology residents complete a three-year residency in the ITT Eye Clinic under the supervision of Amilia Schrier, M.D.

From L to R: Irena Tsui, M.D., 2nd year; Michael Weisberg, M.D., 1st year; Michael Engelbert, M.D., 2nd year; Irene Barbazetto, M.D., 3rd year; Loh-Shan Bryan Leung, M.D., 1st year; Joseph Walrath, M.D., 3rd year. (Not pictured: Joseph Tseng, M.D., 1st year; Suzanna Airiani, M.D., 2nd year; Carolyn Shih, M.D., 3rd year; Samuel Wong, M.D., 3rd year.)



A Legacy of Gratitude

"He saved my life," declares Helen Friedman with emotion, speaking of Dr. Stanley Chang and the retinal reattachment surgery that preserved her vision. "Dr. Chang's surgical expertise saved my eye. He gave me back my vision and my life."

Now both retired from important careers on Wall Street, Mr. and Mrs. Friedman have an extra appreciation for the gift of vision that allows them to remain active and independent. As they split their time between Manhattan and Palm Beach, Mrs. Friedman is particularly grateful that she can continue to play tennis and add to her significant bronze sculpture and antique collections.

As Mr. Friedman tells it, both he and Mrs. Friedman were

"desperate" after she underwent two unsuccessful surgeries for a detached retina. He called every major eye institute in the United States in a relentless search to find the surgeon who could save his wife's eye. Finally, he spoke to a well-known surgeon in the retina division at Johns Hopkins' Wilmer Eye Institute, who told him, "If anyone can do it, it will be Stanley Chang."

After the surgery, Mr. and Mrs. Friedman made a gift to the Gouverneur Morris Pooled Income Fund at Columbia to show their appreciation to Dr. Chang. This type of planned gift provides immediate tax benefits and lifetime income, while simultaneously providing support to the Department. More recently, the Friedmans made

the decision to increase their commitment by including a bequest to Department of Ophthalmology in their estate plans. They acknowledge that gratitude and deep respect are the primary motivators behind their philanthropy.

"Dr. Chang is a warm and compassionate man," says Mr. Friedman. "I have tremendous respect for him, not only as a surgeon, but as a human being. We really just wanted to express our appreciation for what he did for Helen. We felt it was the very least we could do." ■



Charles Marley

Helen and Sidney Friedman

For more information on how a planned gift to the Department of Ophthalmology can benefit your personal situation, or to learn more about how to include a bequest in your estate plans, please contact Jane Heffner at (212) 305-7827.

Important Patient Care Telephone Numbers

Cornea/External Ocular Disease: 212.326.3320

Glaucoma: 212.342.0943

Pediatric Ophthalmology and Strabismus: 646.422.0200

Refractive Surgery/LASIK: 212.326.3320

Vitreoretinal and Uveitis: 646.422.0200



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