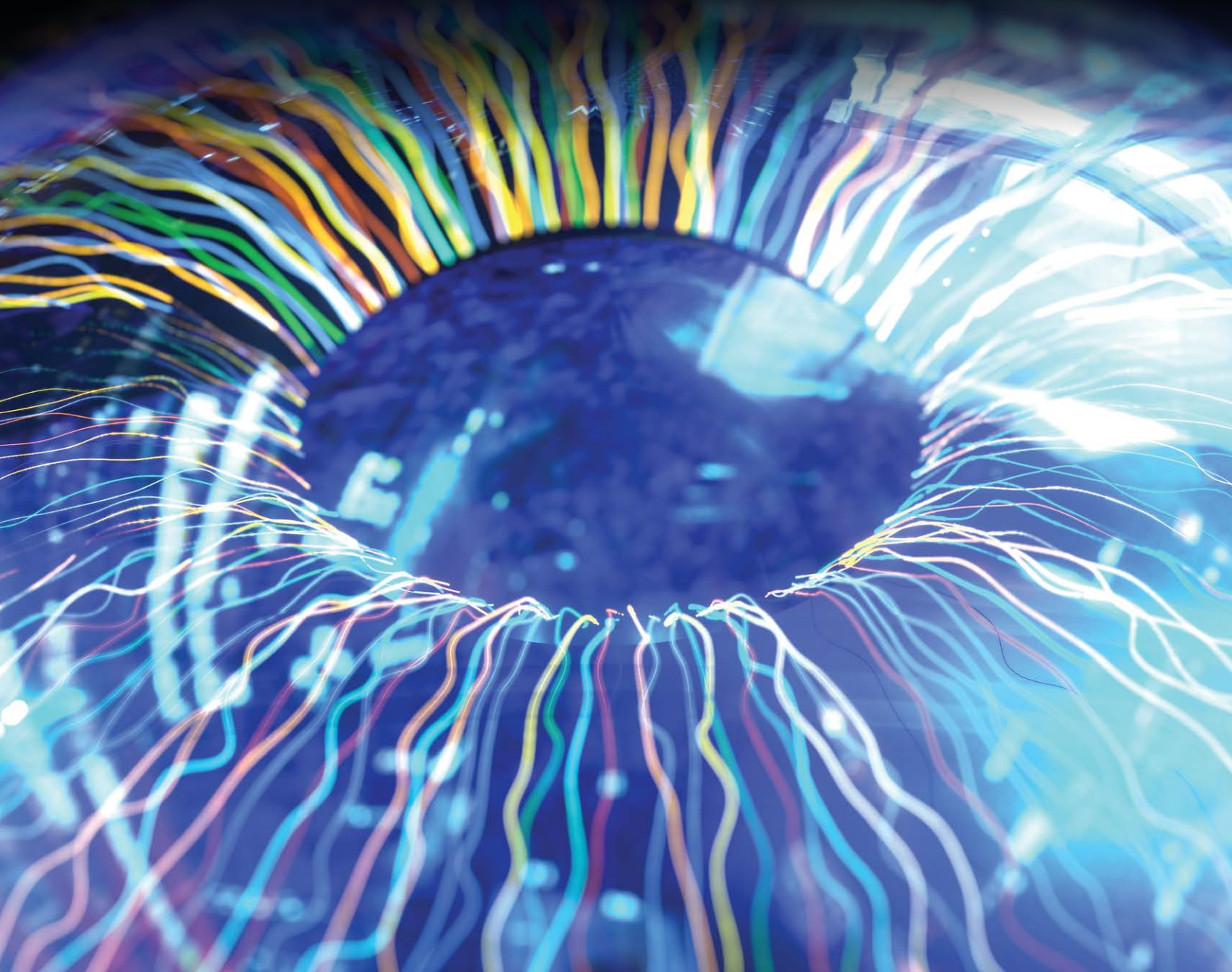


Eye Level

FALL 2023

News & Views From Wills Eye Hospital



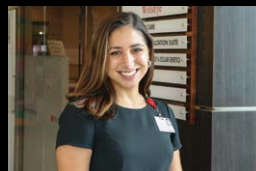
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From Our Leaders



JULIA A. HALLER, MD

Ophthalmologist-in-Chief

JOSEPH P. BILSON

Chief Executive Officer

Welcome to the Fall 2023 issue of *Eye Level*. The theme for this newsletter is **Innovation**. What could be more reflective of this than Wills Eye Hospital and our nearly 200-year history as a global leader in advancing eye care!

In 1832, Wills Eye became the nation's first hospital dedicated to the prevention and treatment of eye disease. Its team of professionals pioneered the establishment of ophthalmology as a distinct branch of medicine in the United States. As the field developed, it became clear that subspecialists were needed to fill an ever-increasing need. Wills Eye stepped to the fore, leading in the creation of subspecialties: retina, glaucoma, cornea, pediatrics, oculoplastics, oncology, neuro-ophthalmology, and pathology.

Wills innovators have shaped technology as well. In 1962, the late Charles D. Kelman, MD, a Wills Eye-trained surgeon, invented a method to extract cataracts with a cryosurgical freezing probe, later also adapted for retinal surgery. Cryo-extraction became the standard procedure for removing cataracts. In 1967, Dr. Kelman—not only an esteemed ophthalmologist, but an accomplished jazz saxophonist—further transformed the field with **phacoemulsification**, using ultrasound to break up cataracts, suctioning them out with a tiny probe. This became the standard of care for the millions of cataract surgeries performed each year around the world. The technique was also adopted by neurosurgeons to dissect tumors. These advances led to the innovation of intraocular lenses to correct vision. The first IOL implantation in the United States took place at Wills Eye Hospital.

These are just a few of many firsts, too numerous to mention. Our hospital would not be what it is today without passing the torch of innovation to each new generation. It takes our entire remarkable team to bring these innovations to our ongoing mission to preserve and restore vision.

On page 1, meet our new Chief Nursing Officer Sean Koger, BSN, RN, MBA, who shares what piqued his interest in joining our staff and the goals he has in mind.

Our cover story features Joel S. Schuman, MD, FACS (page 2); Jose S. Pulido, MD, MS, MPH, MBA, and Tatyana Milman, MD

(page 3); and Rebecca Procopio, licensed certified genetic counselor (page 4).

Dr. Schuman takes us behind the scenes of how he and a group of colleagues invented optical coherence tomography (OCT), altering the trajectory of ophthalmology. Dr. Schuman is conducting research to improve OCT and striving to enhance patient care in the Glaucoma Service and advance therapeutics.

Drs. Pulido and Milman are immersed in collaborative work with partners outside the eye world that has led them closer to clinical trials. Their research is advancing toward early detection of ocular and systemic disease and more precise diagnoses of eye infections.

We are pleased to share the inspiring story of Alex Cummings, page 5. In 2015, Alex contracted a fungal infection, which led to vision loss in her right eye. Enter Christopher J. Rapuano, MD, Director of the Cornea Service, who performed a full corneal transplant. Grateful for the gift of vision, Alex's life was transformed. She is now the Community Relations Manager for AltruVision, formerly Lions Eye Bank of Delaware Valley.

AltruVision recently celebrated its 65th anniversary. The organization has touched the lives of countless patients and families throughout the tri-state region. Wills Eye is proud of its long-standing partnership with the Eye Bank. Recovery technicians retrieve corneal tissue from donors, examine and preserve it, and deliver it to our operating room. Our physicians perform hundreds of transplants annually; the results have been nothing short of astounding.

We have relished attending Eye Bank events. Often it is a chance for families of donors to meet transplant recipients. There is not a dry eye in the room; emotions are palpable. What a gift!

Speaking of corneal transplantation, this year's Wills Eye Ball will take place Saturday, October 21 at The Bellevue Hotel in Philadelphia. We will honor former Cornea Service Directors Peter Laibson, MD, and Elisabeth Cohen, MD, and current Director Christopher J. Rapuano, MD.

All proceeds will benefit the Cornea Service. We hope to see many of our supporters at what is sure to be a spirited, uplifting evening. 🍷

Eye Level

NEWS & VIEWS FROM
WILLS EYE HOSPITAL
FALL 2023
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On the Cover: *Digital eye/iris wave lines reflection.*

A SIT-DOWN WITH SEAN D. KOGER, RN, BSN, MBA

MEET THE NEW CHIEF NURSING OFFICER
WHO JOINED OUR TEAM IN JUNE 2023.



Q. What led you to Wills Eye Hospital?

A. When I received a call from an external recruiter about a position at Wills Eye Hospital, it really opened my mind to an amazing opportunity. When I visited the hospital for an interview and met with several physicians, it further piqued my interest in the institution and the position. I had spent several years working for large tertiary academic medical centers. During the interview process, I learned that Wills Eye was far different from these other institutions in size and culture. These were really positive points and I felt that Wills Eye would offer an opportunity to allow me to be more creative as a change agent and provide a more sustainable work-life balance.

Q. What made you choose nursing as a profession?

A. I always wanted to be a healthcare professional. I initially thought I would train to be a physician but was introduced to the profession of nursing in my sophomore year of college. What I liked about the profession was the ability to cross into so many subspecialties and being able to easily transition between them throughout my career. Little did I know I would grow fond of perioperative nursing and leadership!

Q. Please share a brief summary of your professional and educational background.

A. I am a Philadelphia native and received all of my education at Philadelphia institutions: a bachelor's degree in nursing from Temple University in 2003, and a Master of Business Administration (MBA) from Drexel University in 2009. After graduating from Temple, I worked as an operating room nurse at the Hospital of the University of Pennsylvania. Over the last 13 years, I have held various perioperative nursing leadership positions within the University of Pennsylvania Health System, Temple University Health System, and most recently, Cooper University Health. After working as a staff nurse for seven years, I spent a year as a Clinical Education Consultant for Advanced Sterilization Products (ASP).

Q. What are your responsibilities as Chief Nursing Officer?

A. I have the pleasure of leading the following departments: Nursing, Quality, Materials Management, Sterile Processing, and Pharmacy. I am responsible for the financial and clinical operations of each of these departments to ensure that the hospital is meeting regulatory standards and has the necessary resources to provide high quality care to all of our patients. I collaborate with physicians and other senior department leaders on all initiatives.

Q. Do you have any specific goal(s) in mind in your new position?

A. My biggest short-term goal is to support the hospital through our Accreditation Commission for Health Care (ACHC) survey. The window opened on July 27th and we can be surveyed at any point between then and the following 90 days. Another short-term goal is the opening of the new pharmacy on the 8th floor. In terms of long-term goals, my focus will be on creating sustainable processes and maintaining a healthy work environment for all. I also hope to have the Cerner (electronic medical records) implementation completed by this time next year.

Q. What is something about you that people would not expect?

A. I went to the Walter B. Saul High School in Roxborough, aka "The Farm School." I milked cows. One thing to keep in mind is to be careful not to stand directly behind them. It's not really about getting kicked. It's because you don't want to be in the way if mother nature suddenly calls (yes, it happens)! Also, I majored in plant sciences and was recognized locally for my floral arrangements. 🌿



Visit the **Wills Eye Knowledge Portal** to register for the latest in continuing medical education, conferences, lectures, and more. willseye.cloud-cme.com



Visit give.daysofgiving-willseye.org/2023 from September 23 to October 12 to make your gift!

JOEL S. SCHUMAN, MD, FACS, BRINGS VISIONARY SCIENCE TO WILLS EYE

In May 2023, the internationally renowned glaucoma clinician-scientist joined the Vickie and Jack Farber Vision Research Center at Wills Eye Hospital. Dr. Schuman serves as the Kenneth L. Roper Endowed Chair and Vice Chair for Research Innovation, as well as Co-Director of the Glaucoma Service.

“Wills Eye is a phenomenal institution, both in terms of the skills and expertise of the people here, and the very positive and inclusive culture,” said Dr. Schuman, who has been working closely with Jonathan Myers MD, Director of the Glaucoma Service, and the team of subspecialists to evaluate and develop novel approaches to glaucoma assessment and treatment, including new surgical techniques and pharmaceuticals.

“I was attracted to Wills Eye because of the opportunity to contribute something through my research and to enhance patient care.” Dr. Schuman’s projects focus on advancing ocular imaging—specifically optical coherence tomography (OCT)—and stem cell research to treat glaucoma.

“OCT has been one of the most rapidly adopted technologies worldwide,” said Dr. Schuman, a co-inventor of the technology. “It’s an essential tool for the detection and treatment of diseases including glaucoma, macular degeneration, and diabetic retinopathy. It is used across subspecialties to conduct non-invasive, high resolution, 3D mapping of the eye, including the cornea, retina, and optic nerve.”

Most eye care professionals have an OCT device in their office, explained Dr. Schuman, who previously served as Ophthalmology Department Chair at both UPMC/University of Pittsburgh and NYU Langone Health/NYU Grossman School of Medicine.

How OCT Was Born

In 1989, as a Glaucoma Fellow at Massachusetts Eye and Ear, Dr. Schuman was working on a project in the laser lab. He learned of a new technology—optical coherence domain reflectometry (OCDR)—being studied in a Massachusetts Institute of Technology (MIT) lab as a feedback mechanism for laser refractive surgery. “The technology wasn’t working for this purpose,” said Dr. Schuman. “I realized that the wavelength being used would have the ability to assess the back of the eye. I was interested in developing an objective, quantitative way of assessing glaucoma.”

Dr. Schuman approached the lab director, Carmen A. Puliafito, MD, requesting to collaborate on the project. “I packed a bag of calves’ eyes and met with David Huang, an MD, PhD student at Harvard and MIT, and James G. Fujimoto, PhD, who were conducting the experiments,” he recalled. “We placed the hemisected eyes under the OCDR beam and left the lab to get some Diet Cokes.” When they returned, there was a signal. “We had proof of principle that we could measure retinal thickness with this technology,” said Dr. Schuman, of this pivotal moment of discovery.

Dr. Huang later created a B scan, using OCDR to create a cross-sectional image of tissue instead of measuring thickness at a single point. “The technology went from OCDR to OCT,” noted Dr. Schuman. It was later refined by Eric Swanson, PhD, who built the first prototype OCT device. “We were able to do imaging in animals, eventually advancing into humans,” said Dr. Schuman, the first to use OCT to conduct retinal imaging to assess glaucoma.

“To go from the lab to the clinic and have this level of benefit for patients is very rare,” said Dr. Schuman. “It’s a good feeling to know that you’ve made a contribution.”

Stem Cell Research

For over a decade, Dr. Schuman has been collaboratively researching the use of stem cells to treat glaucoma. “The idea is that the stem cell transplant will regenerate trabecular meshwork—the drainage channel of the eye,” said Dr. Schuman. “It’s this tissue that causes eye pressure to rise in glaucoma. The transplant would restore the drain and return pressure to normal.”

Dr. Schuman hopes that a Phase I clinical trial will begin within a few years. However, costs can be daunting and a limiting factor on moving forward.

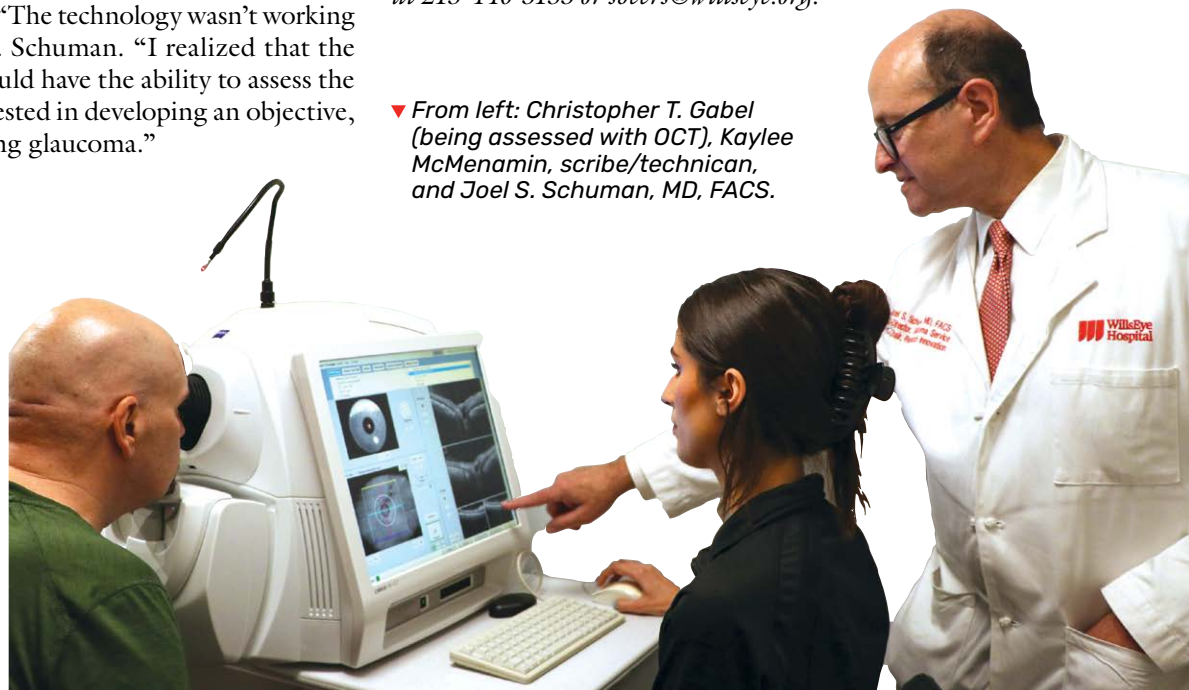
“Wills Eye is providing an incredibly supportive environment,” said Dr. Schuman. “To work with such outstanding faculty, residents, fellows, and staff is a real privilege.” ■

To support research at Wills Eye, contact Suzanne Beers at 215-440-3153 or sbeers@willseye.org.

▼ From left: Christopher T. Gabel (being assessed with OCT), Kaylee McMenamin, scribe/technician, and Joel S. Schuman, MD, FACS.

“To go from the lab to the clinic and have this level of benefit for patients is very rare.”

—Joel S. Schuman, MD, FACS



ATION

TRANSLATIONAL RESEARCH

Leading the Way to Early Detection and Life-Saving Diagnoses

In their pursuit of improving lives and preserving vision, two Wills Eye faculty members are collaborating on several studies with colleagues in non-ophthalmic fields of inquiry. This multidisciplinary, team approach has proven pivotal.

The translational work of Jose S. Pulido, MD, MS, MPH, MBA, the Larry A. Donoso Endowed Chair of Translational Ophthalmology, and Tatyana Milman, MD, Professor, Ophthalmology and Pathology, encompasses newly developed, non-invasive and minimally invasive techniques that will lead to early detection, treatment, and a better understanding of ocular and systemic diseases.

Stella Sarraf, PhD, a chemist and founder/CEO of the San Diego-based Amydis, Inc., is the co-inventor of a platform of chemical compounds called “tracers” that are administered during an eye exam and imaged with ocular cameras. “When these tracers bind to disease-specific biomarkers, a strong fluorescent signal (a beam of light) is emitted,” said Dr. Sarraf. This technology, developed a decade ago with the founding of Amydis, is now in human trials for neurodegenerative diseases: ALS, Parkinson’s, Cerebral Amyloid Angiopathy, and Alzheimer’s. Such biomarkers are known to be present early in the disease, enabling physicians to prescribe therapeutics to potentially prolong and save lives.

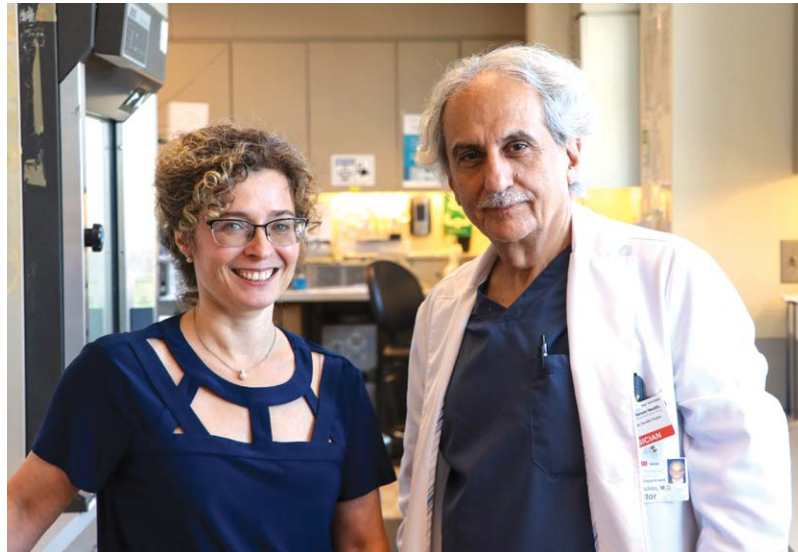
“Working with Drs. Pulido and Milman, we have expanded our use of ocular tracers to look for systemic disease,” said Dr. Sarraf, “which really speaks to the power of collaboration.”

The team’s focus has been on early detection of a progressive and often fatal systemic disease, transthyretin amyloidosis (ATTR). “A large percentage of patients go undiagnosed, particularly elderly and African Americans with ATTR-related heart failure,” explained Dr. Sarraf. “We completed critical proof of concept studies using human eye tissue supplied by Wills Eye.” The results have been submitted for publication.

“The beauty of this technology is that we can look for systemic diseases—non-invasively—using the eye rather than expensive diagnostics like PET scans and other time-consuming, costly tests,” said Dr. Pulido.

Another study, examining diseases and corneal infections of the eye, is with Yongxin “Leon” Zhao, PhD, Eberly Family Associate Professor of Biological Sciences at Carnegie Mellon University. “Ocular infections, such as corneal ulcers, can lead to vision loss,” said Dr. Milman, adding that bacterial and fungal infections are difficult to examine under a microscope.

“A pathogen, like a tiny virus, is about 100 to 1,000 times thinner than a human hair,” explained Dr. Zhao,



▲ Tatyana Milman, MD, and Jose S. Pulido, MD, MS, MPH, MBA

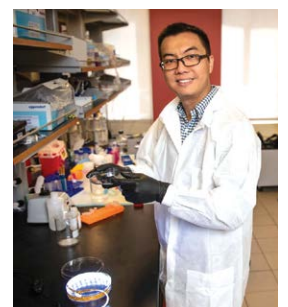
“We are melding our clinical expertise with the bench research our colleagues are conducting, which will lead to amazing progress.”

—Tatyana Milman, MD

a chemist-turned bioengineer and member of Wills Eye’s Translational Ophthalmology Department. Dr. Zhao, with his Carnegie Mellon colleagues, invented an imaging tool called Magnify. “It chemically transforms and magnifies tissue samples, making them appear about 1,000 times larger,” he said. The samples are converted into a form of hydrogel, he elaborated, similar to the material in a baby diaper (which expands and absorbs a lot of water).

Drs. Pulido and Milman supplied corneal tissue samples from patients with various types of infections. “Viewing these tissue samples in an expanded form allows us to detect and identify microorganisms and their environment using traditional microscopes,” said Dr. Milman. “This enables us to make precise diagnoses and offers insight into the infectious disease process.

“What we are doing is truly translational research. We are melding our clinical expertise with the bench research our colleagues are conducting, which will lead to amazing progress.” ■■■



▲ Yongxin “Leon” Zhao, PhD, Eberly Family Associate Professor of Biological Sciences, Carnegie Mellon University.



▲ Stella Sarraf, PhD, Founder/CEO, Amydis, Inc.

INNOVATION continued on next page

GENETIC COUNSELING BROADENS ITS REACH

Knowledge is power and that's no exception when it comes to genetics. "There are genetic eye diseases in every subspecialty in ophthalmology," explained Rebecca Procopio, a licensed certified genetic counselor, who works with a diverse patient population at Wills Eye.

Ophthalmologists specializing in pediatrics, retina, glaucoma, neuro-ophthalmology, and cornea often refer patients to the hospital's stand-alone genetic counseling service, which is expanding.

Procopio tailors an individualized plan for each referral, citing examples of its real-world impact: "In our Retina Service, there are patients who have different forms of inherited retinal diseases. Most of these conditions can cause severe visual impairment. There's a lot of overlap in the presentation of inherited diseases, so genetic testing helps us provide a more definitive diagnosis as to why a patient may be experiencing specific symptoms."

One major advantage of genetic testing and counseling, she elaborated, is that it opens the door for different treatments and enrollment in clinical trials. For some patients, simply receiving information has proven valuable. "Patients can determine how this knowledge might impact family members, including whether there's a chance that a disease might be passed on to their children," said Procopio. "In other cases, the findings provide reassurance and put fears to rest."



▲ Rebecca Procopio, MS, CGC, holds up a diagram showing the relationship between DNA, genes, chromosomes, and cells.

Telehealth Continues to Benefit Patients

Soon after joining Wills Eye in 2021, Procopio launched a telehealth platform. Critically important at the height of the pandemic, the service continues to be a comfort and convenience. A number of our patients are visually impaired, explained Procopio, so this eliminates the need for navigating transportation to Philadelphia.

A simple cheek swab (part of a test kit), administered in the comfort of one's own home, can reveal vital information about the presence or absence of a genetic component or predisposition to a specific disease.

"Genetic diagnosis can have a significant impact on a patient's understanding and management of their condition," said Procopio, who aspires to increase access to this invaluable offering. ■■■



▲ Archer & Greiner, P.C. Foursome -1st Place Team Net From left: Carter Williams, Michael Fingerman, Dennis Wasilewski, Dan Jones. Archer & Greiner, P.C. was a Gold Sponsor of the event.

The 42nd Annual Wills Eye Golf Classic took place on July 17 at Whitmarsh Valley Country Club in Lafayette Hill, Pennsylvania.

Funds raised will support our Center for Academic Global Ophthalmology (CAGO), which bridges the gaps in education, research, and clinical care that exist across the globe in eye care. ■■■

CONGRATS CLASS OF 2023!



Graduation for the Wills Eye Residency Program at Jefferson and the Wills Eye Hospital Fellowships took place June 30. We look forward with pride to watching the career trajectories of these gifted physicians. ■■■



▲ Front row, from left: Wills Eye Residents Sarah Amanullah, MD, Cathy Zhang, MD, Alina Yang, MD, Ophthalmologist-in-Chief Julia A. Haller, MD, Lucy Cobbs, MD, Bonnie Sklar, MD. Back row, from left: Anthony Obeid, MD, MPH, Charles Brodowski, MD, Patrick Rapuano, MD.

WILLS EYE HOSPITAL SECURES \$1 MILLION GRANT

Wills Eye Hospital has received a \$1 million grant from the Benjamin and Mary Siddons Measey Foundation. The grant will fund an Endowed Chair in Medical Education, which will provide support for excellence and leadership, as well as consistency and coordination of the hospital's top-ranked medical educational programs. Douglas S. Wisner, MD, Director of the Cataract and Primary Eye Care Service (CPEC), is the proposed inaugural chairholder.

Endowed Chairs at Wills Eye are fully funded at \$2.5 million. The Wills Eye Foundation is engaging supporters and partners to identify matching funds with the goal for the Chair to be operational by 2026. Learn more at www.willseye.org/giving. ■■■

Grateful for the Gift of Sight

ALEX CUMMINGS SHARES THE TRAUMATIC EXPERIENCE THAT TRANSFORMED HER LIFE

Alex Cummings remembers quite vividly the day she stood in front of a classroom of second graders at a charter school in Manhattan. Alex, now 30, was excited about her first teaching position and the potential journey that would unfold. But upon waking on that August morning in 2015, she felt like something was off in her right eye.

As the morning progressed, her eye became red and irritated. She visited the school nurse who suspected it was pink eye, which is highly contagious. So, Alex was sent home.

When the irritation wasn't improving, Alex visited an urgent care center. She was told it was a minor abrasion on her cornea and given eye drops. "My eye started stinging and burning," recalled Alex, who then visited several ophthalmologists in Manhattan. She was diagnosed with a bacterial infection and treated with an antibiotic and eye drops to use every 30 minutes round-the-clock.

After weeks of this sleepless, stressful regimen, her eye was getting worse. She couldn't be around bright light or walk outdoors. Even the light emitted from opening the refrigerator caused severe pain.

One night as she sat on the couch in her apartment next to her boyfriend (now husband), Adam Friedant, she realized she had lost all vision in that eye. "It was really frightening," said Alex. "I couldn't do anything. I had trouble dressing myself as the pain was so severe." Adam, who grew up in South Jersey, suggested they visit Wills Eye Hospital.

In late September, they went to the Wills Eye Emergency Room. That same day, Alex was sent to the office of Christopher J. Rapuano, MD, Director of the Cornea Service. "Within 24 hours, I was properly diagnosed with a rare fungal infection called aspergillus," said Alex, stunned to learn it was not bacterial, but also that the infection had spread and was destroying her entire cornea.

"This type of fungal infection is very rare," said Dr. Rapuano, adding that it often occurs in warmer climates. "It can be associated with contact with vegetable matter, dirt, and plants as well as contact lenses." Alex was a contact lens wearer, but the cause of the infection was inconclusive.

"We suspected it was a fungal infection, but we didn't know for sure until we cultured it," said Dr. Rapuano. "Once the infection reaches past the edge of the cornea, it is much more difficult to cut out." The only chance to restore Alex's vision was to have a full thickness cornea transplant. The prognosis was uncertain.

"When we cut out fungal ulcers (infections)," explained Dr. Rapuano, "we can't use anti-rejection medications for

several weeks, as we do in other transplants, because they are steroids, which are basically food for fungus."

Physicians in the Cornea Service perform hundreds of transplants each year. In the majority of cases, the success rate is over 90 percent. "I define success as restoring vision within a year or so after surgery," said Dr. Rapuano.

Luckily for Alex, within a few months, her vision started to come back. "You really don't appreciate your vision until you don't have it anymore," said Alex, who returned to teaching with a transformed outlook on life.

A Turning Point

Shortly after the surgery, Alex received a packet in the mail from Lions Eye Bank of Delaware Valley, now known as AltruVision. She learned that her donor tissue came from a man in his 60s. "I realized that someone had to lose their life in order for me to regain my sight," said Alex. Deeply moved by this act of altruism, she wrote a letter of gratitude to the donor's family and started sharing her story as a volunteer for the Eye Bank.

Fast forward to 2019. Alex and Adam were relocating to Philadelphia. She contacted Jerilyn Giardina, the Eye Bank's Director of Partner Outreach and Community Relations, inquiring of any area nonprofits that might be hiring. "I was hoping that I could work there," said Alex, who was shocked when a position became available, and she was hired as Community Relations Manager.

Alex's life has come full circle. She now oversees the Heartfelt Letters program (the one she participated in as a donor recipient), coordinates fundraising events, and interviews donor recipients and families. She also created the Remembrance Butterfly program. Working with volunteers, they fashion clay butterflies that are sent to families of donors. "The butterfly is a symbol of new life and hope," said Alex. "I want the families to know that their loved one's legacy lives on."

"I am so grateful to everyone at Wills Eye, especially Dr. Rapuano. Because of him, AltruVision, and my donor, I went from not having vision, not being able to work and not having my independence, to not only regaining my vision, but to finding my true passion and calling." ■■■

www.altruvision.org

Alex Cummings holds up a handmade butterfly from the Remembrance Butterfly program.



"You really don't appreciate your vision until you don't have it anymore... I am so grateful to everyone at Wills Eye, especially Dr. Rapuano."

—Alex Cummings

SAVE THE DATE: OCT 20-21
24th Biennial Cornea Conference



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WELCOME WILLS EYE RESIDENCY CLASS OF 2026



From left: Eric Kim, MD, Bailey Harrison, MD, Samantha Massenzio, MD, Eric Lee, MD, Julie Kim, MD, Brian Cheng, MD, Sunidhi Ramesh, MD, Bryce Hwang, MD,

CELEBRATING THE WILLS EYE CORNEA SERVICE

Wills Eye Ball

SATURDAY
OCTOBER 21
2023

6:00 P.M. COCKTAILS
7:00 P.M. DINNER, PROGRAM, AND DANCING

THE BELLEVUE HOTEL
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