

Keeping POSSted

Fall 2016

PRESIDENT'S CORNER



Healthcare Debate 2016: The Good, the Bad and the Ugly...

Dear colleagues,

Right off the bat, I want to apologize to you for not discussing uplifting topics like the need for more time off away from our practice, how to better cultivate our friends, or how you should strive to read a non-medical book each month. Instead, at the risk of ruining the last few weeks of your summer, I chose to look back at the now six-year-old Affordable Care Act (ACA), which was signed into law March 23, 2010, by President Obama. We were told that the noble intent was to insure some 40 million "uncovered" lives while eliminating waste and fraud in our system. So, where did we stray?

THE GOOD: Ninety-one percent of the U.S. population is currently covered by some health insurance plan, although the rise in premium cost continues to climb at 4 to 5 percent per year. The rising curve is being "bent," we are told, but these numbers are in the context of an unprece-



Thierry Verstraeten, MD
President
Pittsburgh Ophthalmology Society
2015-2017

dent low inflation world (except the continued rising cost of college education, buying a home, rent, etc.). The exclusion of pre-existing conditions as a denial of coverage is excellent news for our sickest patients. But is our coverage adequate? Surveys by the Kaiser Foundation and the *New York Times*, amongst others, have found that more than 50 percent of the population have more coverage than what they would deem necessary and would prefer having the option to buy a more tailor-made option

themselves. However, there are no adequate pricing tools to comparison-shop for different plans. The cynic in me believes this is by design ... people tend to choose the lower premium plans they can afford only to realize that their plan doesn't kick in until their \$5,000 deductible is met! This is particularly applicable for our ophthalmic population, where this dollar figure often matches most surgical procedures we perform, including our surgical fee combined with the hospital or surgery center's payment. I often hear young patients telling me, "Doc, I have medical coverage, but I cannot afford my deductible." So we, the physicians, are caught having, often through our staff, to explain the "system," and these are tough waters to navigate if we want to remain our patients' best advocate. The bureaucracy put us in that uncomfortable position!

THE BAD: Over the past 10 years, data I reviewed show that the

Continued on Page 2

From Page 1

rise in cost of deductibles has gone up more than 250 percent and co-insurance up 110 percent while the rise of workers' wages has increased only 32 percent. No wonder Bernie Sanders did as well as he has! The only decline seen over the past five years has been co-pays for office visits, down 26 percent. So as a society, we have to start asking ourselves if we can afford (or better, if we really need) comprehensive coverage, or would we be better off with merely catastrophic coverage, more like all other forms of insurances? The rising cost of premiums was designed to shift the tax burden on high earners to fund the subsidized premiums for people who purchased insurance through the ACA. That fact alone clearly meets the definition of redistribution of wealth. Following FDR and Truman progressive ideas, the IRS in 1951 implemented tax deduction for companies that gave their employees group health coverage. And now the wolf is in the coop: The third-party payer system is born ... just like an "all you can eat" pre-paid buffet, people started to use and expect coverage for everything rather than what they really needed. These attitudes did distort the marketplace, and we now think that healthcare dollars are other people's money (OPM). The result is over-consumption and inevitably prices rise; but there is one

exception, and that is the relative decreasing cost of cosmetic surgery over the past 10 years. Competition worked in that specific market. In the 1960s, people assumed more than 50 percent of their healthcare costs; now the share is down to 15 percent.

THE UGLY: Patients are really not well-educated to be good consumers, and shopping around is discouraged. We were promised inter-state exchanges, which were expected to breed competition, but they were not found to be practical. The billing processes are still dauntingly complicated for both physicians and our poor patients; you need accounting expertise to navigate the forms. Compared to Canada and many European countries, the United States spends about \$3,000 more per year per capita for a five-year shorter life expectancy. The healthcare annual budget is more than \$3 trillion which represents 17 percent of GDP. So we are either paying too much for what we are getting, or we are getting a poor "product" for what we spend. Where is the money going? The administration costs represent 10 percent of the healthcare budget, physician/professional payments 31 percent, hospitals 37 percent, drugs and devices 12 percent, and nursing homes 10 percent. So why can't the government engage the pharmaceutical companies like other countries do and negotiate

lower prices for large insurance groups or allow re-importation? How could we give consumers more skin in the game? Premium support for the Medicare population may be coming soon. Rationing has been tried through HMO models, incentives for PCPs who control the access to specialists have seen mixed results just like pre-procedures authorization and mandatory second opinion before elective surgery. All these attempts have not moved the needle and probably never will. If the physicians are viewed as the drivers of healthcare costs, simply cutting the CPT payments in a fee-for-service model may discourage us at some breaking point, but ultimately patients will still come to us because they expect to see better. Should elective surgery like cataract surgery no longer be a covered item? Would people gladly pay \$700 out of pocket to their ophthalmologist for vision improvement? Should insurance only cover life-saving hospital admission or surgery? Pay for performance (P4P) is slated to appear in 2017, but it remains to be seen if this will lower consumption. We need to be bold and educate our patients to be smarter "shoppers" and firmly remain on their side. If we present ourselves as their unwavering advocate, we will retain their trust in navigating the unfriendly bureaucratic waters.

Thierry Verstraeten, MD

MEMBERSHIP UPDATE

Currently, the Society has 122 active members; 25 residents and fellows; and 31 retired honorary members for a total of 178. The organization welcomed new member Sara Otaibi, MD, Pedi-

atric Ophthalmologist, UPMC Eye Center, in October 2015.

If you know of an ophthalmologist in your area who is not a member of the POS, or are welcoming a

colleague to your practice, please contact Nadine Popovich, who would be happy to send an application for membership.

David G. Buerger, MD, FACS

MEMBERSHIP DUES

Membership dues statements will be sent Oct. 1. Yearly dues are \$375 and are instrumental in defraying the cost of providing quality educational programming each month. Please submit payment by check, made payable to “Pittsburgh Ophthalmology Society,” or credit card (Visa, MasterCard, Discover). For your convenience, you may contact Nadine Popovich to process your payment.

Your continued support ensures that we remain an active and strong specialty organization that provides quality programming and collegial social opportunities with a focus on advocacy to protect and enhance our profession. Thank you for submitting your dues in a timely manner.

TREASURER’S REPORT

For the past several years, POS expenses have slightly exceeded revenues. The reasons for this include increased travel expenses for speakers, CME costs, and food expenses.

In order to reverse this trend, we are attempting to implement a better registration response from members, which will lead to a more accurate catering count for each monthly meeting. We also relocated the Spring Meeting to the Pittsburgh Marriott City Center, whose facility costs overall were lower.

Through a continued effort to expand membership

and a strong focus on identifying sponsorship for support of the monthly meetings, we are hoping we will close the gap on revenue loss for 2017.

Other measures approved by leadership to offset the increasing costs include increasing the monthly sponsorship fee to \$2,500 and adjusting the allied ophthalmic personnel registration from \$155 to \$175. To address the rising costs for the Annual Banquet, the annual dinner guest fee has increased to \$95.

Marshall W. Stafford, MD

LEGISLATIVE UPDATE

With the first clinical observations of intraocular Pokémon beginning to appear, the Pennsylvania Academy of Ophthalmology (PAO) stands ready to ensure patient safety with our Definition of Ophthalmic Surgery legislation. Organized optometry will certainly have in its sights a desire to expand their scope of practice into the use of Pokeballs to address the potential burgeoning threat of epidemic ocular Pokémon disease. They will certainly start with a request for only the use of Regular Pokeballs. We all know, though, that they will not stop there. As we have seen with therapeutics and surgery, they will surely want to expand their scope of practice further each year and undoubtedly they will one day try to gain the use of Great, Ultra, and even Master Pokeballs, regardless of appropriate education, training, and patient safety concerns. The language of our Definition of Ophthalmic Surgery legislation, SB 795, would include the use of Pokeballs for capture of Pokémon within the ocular tissues.

Kidding aside, as the Pennsylvania legislative session winds to a close with the summer recess and the November elections, SB 795 has for another year accomplished its goal: no expansion of optometric scope of practice into surgery in Pennsylvania. Optometry this year introduced their bill, SB 1012, which would have allowed them to perform injections, drain cysts, remove penetrating foreign bodies, prescribe narcotics, order CTs and MRIs, and call themselves “optometric physicians.” SB 1012 has been stopped in the Senate Licensure Committee. Although our bill SB 795 also is stuck in that committee, it is because of SB 795, and its previous iterations in past years, that the Pennsylvania legislature is aware of the need to consider patient safety. This was accomplished only with the hard work of the PAO, its lobbyists and, very importantly, ophthalmologists across the state contacting their legislators and letting them know the facts about patient safety.

Visit **www.paeyemds.org** to make a contribution to the Pennsylvania Eye PAC.
If you aren't a member, join today!

The legislative involvement of optometrists across the country far exceeds that of ophthalmologists. In Pennsylvania, they support the PA Optometric Association. Their PAC has raised roughly twice as much as ours has. More ophthalmologists need to support the PAO and donate to our PAC, especially in this election year. It's a harsh reality of the world we live in.

What happens across the country as organized optometry tries to expand its scope of practice into surgery affects the entire country. The AAO's Surgical Scope Fund is certainly one of our most effective advocacy tools in each and every one of these battles. So far this year, we have successfully stopped dangerous bills in Alaska, California, Delaware, Iowa, and Puerto Rico, BUT Illinois and Massachusetts remain as threatened states. Each state that falls to a compromise on surgical standards for patient safety makes it that much harder to defend patient safety in the next. Make a contribution to the Surgical Scope Fund, www.aa.org/ssf, as we're all in this together.

While it seems like I'm asking for money (and I am), I'm really asking you to think for a bit about quality eye care, patient safety, and the profession that we all care so much about. (And also about what would happen to Pikachu should he be hit with a Pokeball thrown by someone without the appropriate education and training.)

Kenneth P. Cheng, MD

Legislative Chair, PAO
Metro East Regional Representative, State Affairs Secretariat, AAO
Chair, AAO Surgical Scope Fund

PAO NEWS

POS member honored by PAO

Michael Azar, MD, POS Chair, Bylaws and Rules Committee; Thorpe Circle Administrator; and Past President, was honored at the Dec. 3 meeting with the Pennsylvania Academy of Ophthalmology's Distinguished Service Award.

The award is presented for extraordinary work on behalf of the PAO, or to a member of the Academy who has made an extraordinary contribution to his specialty.

Dr. Azar has been a member of the Pennsylvania Academy of Ophthalmology Board of Directors for 20 years. His previous positions on the PAO board include Secretary of Medical Practice and Payment Systems, representative on the Medicare Carrier Advisory Committee and President (2003-05).

Kenneth Cheng, MD, presented this prestigious award during the Dec. 3 business meeting.

POS members provide leadership for PAO

The Society is pleased to recognize the following members who play an active role in the Pennsylvania Academy of Ophthalmology (PAO) by serving in a leadership position. The local representation is exceptional, and we are fortunate to have a dedicated group of colleagues who give of their time to better the professional interests of ophthalmology and our profession.

President Elect (installation Fall of 2017)
Robert L. Bergren, MD

Chair, Bylaws and Rules Committee
Michael J. Azar, MD



Michael Azar, MD, left, is pictured with Kenneth Cheng, MD, after being presented with the Pennsylvania Academy of Ophthalmology's Distinguished Service Award.

Secretary, Legislation & Representation
Kenneth P. Cheng, MD

Chair, Nominating Committee
Roger P. Zelt, MD, FACS

Co-Secretaries, Medical Practice and Payment System
Robert L. Bergren, MD, and James B. Dickey, MD

AAO Councilor
James B. Dickey, MD

AAO Alternate Councilor
Sharon L. Taylor, MD, FACS

Annual Meeting 2016

The 52nd Annual Meeting was held March 18 at the Pittsburgh Marriott City Center hotel, with more than 85 physicians attending the yearly conference.

The society was honored to welcome Michael E. Snyder, MD, who served as the 36th annual Harvey E. Thorpe Lecturer. Dr. Snyder is a member of the Board of Directors, Cincinnati Eye Institute, and chair, Clinical Research Steering Committee. A globally recognized leader in the field of ophthalmology and for work in pioneering artificial iris prosthesis use in the United States, Dr. Snyder presented, "PPV for Anterior Segment Surgeon: Abandoning the Limbus," "Zonulopathies Young and Old," and the featured Thorpe Lecture, "Funky Iris Cases: Surgical Management With and Without Iris Prostheses."

Distinguished guest faculty included: Sean M. Blaydon, MD, FACS, Texas Oculoplastic Consultants Eye and Face, Austin, TX (invited by member David Bueger, MD, FACS); Carl D. Regillo, MD, FACS, Director, Retina Service, Wills Eye Hospital, Philadelphia, PA; and Gregory Skuta, MD, President and Chief Executive Officer, Dean McGee Eye Institute, Edward L. Gaylord Professor and



Thierry Verstraeten, MD, President, presented the Thorpe Award to Dr. Snyder during the POS 52nd Annual meeting, held at the Pittsburgh Marriott City Center.

Chair, Department of Ophthalmology, University of Oklahoma College of Medicine, Oklahoma City. Dr. Regillo and Dr. Skuta were invited by Dr. Verstraeten.

Following the meeting, members and their spouse/guest attended the annual banquet, held at the Duquesne Club. The Fountain Room provided the perfect atmosphere for members to socialize. In his opening remarks, Dr. Verstraeten thanked the allied course directors Pamela Rath,

MD, Laurie Roba, MD, and Sharon Taylor, MD, and the POS Board for their support to ensure a successful program year.

Bruce Rabin, MD, PhD, invited by Dr. Verstraeten, presented "Coping With Stress for a Better Quality of Mental and Physical Health." Dr. Rabin's educational presentation served to help one understand the mental and physical effects of stress and provide skills to minimize the effects of stress on one's health.



Attendees of the Ophthalmic Personnel Meeting held March 18 at the Pittsburgh Marriott City Center learn how to operate OCT machines provided by Carl Zeiss Meditech and Heidelberg Engineering.



2016 Ophthalmic Personnel Meeting

Running concurrently with the Physician Annual Meeting was the 37th Annual Meeting for Ophthalmic Personnel. This year, more than 160 ophthalmic technicians, assistants, coders, photographers, and front staff attended this full-day program. The well-respected program is designed specifically for ophthalmic personnel to enhance the quality, expertise, and safety of ophthalmic patient care.

A total of 28 breakout sessions were offered, all accredited by JCAHPO. Participants had the opportunity to create their own track of programming, and receive up to 7.0 CE credit hours based on course attendance. A balance of front- and back-office sessions were offered to educate office personnel, including the annual Certified Ophthalmic Review prep course. Course directors Pamela Rath, MD; Laurie Roba, MD; and Sharon Taylor, MD, worked tirelessly to plan a high-level educational offering.

The Society depends and relies on local expertise and talent to present each session. This year was no exception, with local physicians and healthcare professionals providing quality presentations. Thank you to all local faculty who prepared and presented lectures. Your hard work and dedication ensured a successful program. Overall, course comments were exceptional and registrants appreciated the numerous topics applicable to all team members. The hands-on training sessions (in collaboration with Carl Zeiss Meditech and Heidelberg Engineering) for the IOL master, NFL analysis and macular OCT sessions were a highlight and great addition to the day's programming. Participants learned how to operate both Zeiss and Heidelberg OCT machines, as well as basic OCT interpretation.

2017 Thorpe Lecturer announced

Thierry Verstraeten, MD, President, is pleased to announce Warren E. Hill, MD, Medical Director, East Valley Ophthalmology, Mesa, AZ, as the 37th Thorpe Lecturer. Dr. Hill will be featured during the Annual Spring Meeting scheduled for Friday, March 17, 2017, at the Pittsburgh Marriott City Center, Pittsburgh, PA. The annual banquet will take place the evening of Friday, March 17, at the Duquesne Club.

Dr. Hill has devoted the majority of his professional activities to performing challenging anterior segment surgery for other ophthalmologists and the mathematics of intraocular lens power calculations in unusual clinical

situations. He has published many scientific articles, served as visiting professor for numerous grand rounds and has delivered more than 550 presentations to ophthalmic societies both in the United States and internationally. Dr. Hill was extended the invitation to serve as the Thorpe Lecturer by member Deepinder Dhaliwal, MD. The Annual Meeting brochure, along with registration, will be sent to the membership in January. Members also are encouraged to visit the Society website for updates (www.pghoph.org).

Planning is in progress with the complete list of guest faculty to be announced by December.



Warren E. Hill, MD

Please check the website periodically for updates on guest speakers, topics and full meeting agenda.

THORPE CIRCLE

The Thorpe Circle welcomes Avni Vyas, MD, who joined March 17, 2016.

A special acknowledgement and thank you to E. Ronald Salvitti, MD, who made a second contribution to the Thorpe Circle in 2016. Dr. Salvitti is a founding member of the Thorpe Circle, initially contributing in 2014.

Thank you to all of the 58 individ-

uals who have made a contribution. Your contribution ensures your legacy as one devoted to the recognition of academic and clinical excellence in ophthalmology.

If you are not a member of the Thorpe Circle, please consider contributing. The Thorpe Circle, established in 2014, was created to offset the costs of the Thorpe Lecturer. Your donation strengthens the fund and enables

the POS to continue the tradition of excellence by inviting distinguished guest faculty to serve as the Thorpe Lecturer. Donations may be in the form of an annual contribution, estate planning, by patients or family members in honor of an ophthalmologist (practicing or retired), or in memoriam. Visit the Society website at www.pghoph.org and click on Thorpe Circle for information on

Continued on Page 9

THORPE CIRCLE

From Page 8

how to donate, or to view the list of Thorpe Circle members.

As of August 1, 2016, the fund's balance is \$28,529. All monies are invested in the Vanguard Life Strategy Moderate Growth Fund. The fund is used sparingly for the targeted purpose of sustaining the long-term education mission of the POS.

The named lecture honors Harvey E. Thorpe, MD, an ophthal-

mologist whose techniques and inventions of medical instruments contributed to the study of the eye.



Dr. Thorpe

The lecture is the highlight of the annual meeting, which began in 1980 when Harvey E. Thorpe was named "Man of the Year" by the Society. Past distinguished Thorpe Lecturers include: Lorenz Zimmerman,



Frederick Jakoiec, Bart Mondino, Carmen Puliafito, David Guyton, Donald Budenz, and most recently in 2016, Michael Snyder.

Michael J. Azar, MD

38th Meeting for Ophthalmic Personnel set

Running concurrently with the Annual Meeting, the Allied Ophthalmic Personnel meeting will take place on Friday, March 17, 2017, at the Pittsburgh Marriott City Center, Pittsburgh, PA. The POS has been proud to host this yearly educational forum for ophthalmic personnel for more than 30 years. Pamela Rath, MD, and Laurie Roba, MD, have taken on the responsibilities by serving as course directors. Thank you to Sharon Taylor, MD, who served as course director since 2009. Dr. Taylor was instrumental in planning high-quality and relevant clinical and technical sessions designed for allied health personnel. Under her leadership, the allied program continually attracted a robust attendance, with course evaluation scores consistently rated "excellent" by attendees. Dr. Taylor is slated to become POS President in March 2017.

Dr. Rath and Dr. Roba have begun planning the program, already identifying an excellent slate of educational offerings. The submission for the JCAHPO accreditation process is scheduled to begin in October.

The conference provides exceptional educational opportunities for ophthalmic personnel in and around the region and continually attracts well-respected local faculty, who present quality instruction through numerous breakout sessions. Ophthalmology practices, administrators and past attendees will receive a Save the Date card in September, with registration information published on the society website, www.pghoph.org.

2016-17 Monthly Educational Series

Mark your calendars for the 2016-17 monthly educational offerings, hosted by the Society.

A total of five monthly meetings and the Annual Spring Meeting will comprise the academic calendar. All meetings are CME accredited. **Note:** There is no October meeting, as the American Academy of Ophthalmology will meet October 15-18, 2016, in Chicago, IL.

Members will receive registration information (by email, unless otherwise indicated) one month prior to the date of the program. Please plan on joining your colleagues as we welcome the following guest faculty:

SEPTEMBER 8, 2016

Kendall E. Donaldson, MD, MS (Cornea) - Associate Professor of Clinical Ophthalmology; Medical Director of Bascom Palmer Eye Institute at Plantation, Plantation, FL. Thank you to Deepinder Dhaliwal, MD, for inviting Dr. Donaldson, and thank you to Omeros for providing support for this meeting.



Dr. Donaldson



Meeting Agenda Refresher

- 4:00 p.m. – Registration
- 4:30 p.m. – 1st lecture by guest faculty
- 5:35 p.m. – Resident Case presentation
- 5:50 p.m. – Society Business Meeting
- 6:00 p.m. – Social
- 6:45 p.m. – Dinner service begins
- 7:05 p.m. – 2nd lecture by guest faculty

Dr. Donaldson will present the following (1st lecture beginning at 4:30 pm and the 2nd lecture beginning at 7:05 pm):

1st Lecture – Astigmatism Correction/Integration of Technology for Achieving Our Best Outcomes

2nd Lecture – Femtosecond Laser Technology (FLACS) – Ethics, Outcomes and Recent Advances

NOVEMBER 3, 2016

Sean Donahue, MD, PhD, (Pediatric Ophthalmologist) Vanderbilt Eye Institute, Nashville, TN. The November meeting serves as the Brian Caputo, MD, Memorial Lecture. Check the website periodically for additional information on this



Dr. Donahue

lecture. Thank you to Kenneth Cheng, MD, for inviting Dr. Donahue.

DECEMBER 8, 2016

Nathan M. Radcliffe, MD, (Glaucoma Specialist and Cataract Surgeon) New York University, NY; NYU Langone Ophthalmology Associates, New York, NY. Thank you to Ian Conner, MD, PhD, for inviting Dr. Radcliffe.



Dr. Radcliffe

JANUARY 5, 2017

Joseph F. Rizzo, III, MD, (Neuro-Ophthalmology) David G. Cogan Professor of Ophthalmology in the field of Neuro-ophthalmology; Director, Neuro-Ophthalmology Service, Massachusetts Eye and

Continued on Page 11

ANNOUNCEMENTS

SEEKING INDUSTRY SUPPORT!

As industry support is instrumental in offsetting our monthly meeting expenses, please remember to thank pharmaceutical and ophthalmological supply representatives with whom you come in contact and remind them of the opportunity to sponsor a monthly meeting. Benefits of sponsoring a meeting are numerous; highlights include: five minutes of time at the podium to present their product and the opportunity to engage with members during the social.

Past sponsors include: Abbott, Alcon, Alimera Sciences, Allergan,

Bausch & Lomb, Carl Zeiss Meditech, Diopsys, Dutch Ophthalmic USA, Genentech USA, Heidelberg Engineering, Microsurgical Technologies, NovaBay, Omeros Corp, OMIC, Optovue, RPS Detectors, Regeneron, Vertical Solutions, Virtual OfficeWare and VisionCare Ophthalmic Technologies.

Help us to identify potential sponsors! If you know of a pharmaceutical company not listed, please email Nadine Popovich the contact name and email or phone number. You also may direct them to the POS website as sponsorship information can be downloaded!

CME Credits

CME credit transcripts were emailed to all who attended meetings from September 2015 through March 2016. If you did not receive your transcript, or have a discrepancy in the transcript, please contact Nadine Popovich, npopovich@acms.org or (412) 321-5030.

Reminders for the 2016-17 academic year:

- Monthly meeting evaluations are distributed every other meeting (not every meeting).
- Members **must sign in** at every meeting to ensure credits will be received.

From Page 10

Ear, Boston, MA. Thank you to John Charley, MD, for inviting Dr. Rizzo.



Dr. Rizzo

FEBRUARY 2, 2017

TBD – check the website (www.pghoph.org) for updates and confirmation of speaker.

MARCH 17, 2017

Annual Spring Meeting and 38th Annual Ophthalmic Personnel Meeting, Pittsburgh Marriott City Center

POS OFFICERS & CHAIRS 2015-17

President
Thierry C. Verstraeten, MD

President-Elect
Sharon L. Taylor, MD

Secretary
Joel D. Brown, MD

Treasurer
Marshall W. Stafford, MD

Immediate Past President
Robert L. Bergren, MD

Bylaws and Rules
Michael J. Azar, MD

Legislative
Kenneth P. Cheng, MD

Provider Relations
Joel D. Brown, MD

Nominating
Robert L. Bergren, MD

Membership
David G. Buerger, MD

Public Relations
Constantine Balouris, MD

Allied Personnel
Pamela P. Rath, MD
Laurie A. Roba, MD

Thorpe Circle Administration
Michael J. Azar, MD

Online Registration for Meetings

In an effort to streamline the registration process and ensure an accurate meal count, the registration format has been modified and will be facilitated **online**. Registration for each meeting is **required**. Here are a few guidelines to register for each meeting:

- Visit www.pghoph.org
- Select your registration type and click "Register"
- Complete all information
- Meal selections will be listed; **kindly remember to choose your meal selection when registering**. If you have a special dietary request, no

problem, as this will be an option when choosing your meal.

• A confirmation will be sent to the email you provide. If you do not receive a confirmation in your designated email, your registration was not completed.

- Feel free to contact Nadine Popovich, administrator, at npopovich@acms.org or (412) 321-5030 should you have any questions or to cancel your reservation.

Thank you in advance for your cooperation and efforts in transitioning to the online registration system!

RESIDENTS & FELLOWS

The members of the Pittsburgh Ophthalmology Society would like to welcome new residents and fellows and acknowledge current faculty as they will be attending monthly meetings of the Society beginning in September. Congratulations to Jason Hooton, MD, Chief Resident. Dr. Hooton will coordinate and assign residents to present monthly case presentations.

UPMC Eye Institute

1st Year Residents:
Tigran Kostanyan, MD

Jennifer Lee, MD
Anagha Medsinghe, MD
Ken Taubenslag, MD
Siwei Zhou, MD
Leo Zlotcavitch, MD

2nd Year Residents:
Lance Bodily, MD
Igor Bussel, MD
Luis Gonzalez, MD
Tarek Shazly, MD
Dante Sorrentino, MD
Joe Vojtko, DO

3rd Year Residents:
Jason Hooton, MD
Swarupa Kancherla, MD

Matt Klocek, MD, PhD
Peter Knowlton, MD
Faizan Pathan, MD
Ann Shue, MD

Fellows:

Edward Chay, MD (Glaucoma)
Mallika Doss, MD (Retina)
Katie Duncan, MD (Oculoplastics)
Kate Fallano, MD (Glaucoma)

Fellows remaining for 2nd year:

Ailee Laham, MD (Retina)
Steven Kane, MD (Cornea)
Somya Chowdhary, MD
(Pediatrics)