VANDERBILT EYE INSTITUTE

FACULTY AWARD

Ophthalmology Society Lauds O’Day’s Contributions

By Jessica Pauley, VUMC Reporter, 6/12/2009

Longtime Vanderbilt ophthalmologist Denis O’Day, M.D., was recently presented with one of Ophthalmology’s highest honors — the Lucien Howe Medal. O’Day, Director of the Emphasis Program and Professor of Ophthalmology and Visual Sciences at Vanderbilt, was honored by the American Ophthalmological Society for his many contributions to the field.

A member of the Vanderbilt faculty since 1972, O’Day specializes in the management of corneal and external disease, with particular expertise in diagnosing difficult and unusual types of ocular infections and fungal disease. O’Day was responsible for developing the Tennessee Lions Eye Center at Vanderbilt Children’s Hospital in 1997, and served as chair of the department from 1992 to 2002.

The presentation of the medal came as a surprise to O’Day. “It is humbling,” he said. “I had absolutely no idea at all that I was receiving this honor. I was stunned. I am still stunned. Those who have received the medal are an impressive group and to be recognized among them...it’s amazing.”

Established in 1919, the Howe Medal was not awarded until 1922. The award denotes distinguished service to Ophthalmology and has only 74 recipients, including O’Day. “The Howe Medal is one of the premier honors that are bestowed in the field of Ophthalmology,” said Paul Sternberg, M.D., Chair of Ophthalmology and Visual Sciences and Director of the Vanderbilt Eye Institute. “For Dr. O’Day, it is an acknowledgement of an incredible career of accomplishment in clinical care, research, education and patient care. We are proud of him and privileged that he is still an active member in our department.”

The AOS honored O’Day for his work with the Emphasis Program, an opportunity for first- and second-year medical students to gain specialized knowledge and experience by working in one of nine areas related to medicine, his commitment to the Visitation Clinic and Hospital in Haiti, which he helped build, and his dedication to the American Board of Ophthalmology.
Dear Friends,

In this issue, we feature one of the most rewarding aspects of being a member of the academic medical center faculty: mentoring. Mentorship refers to a developmental relationship in which a more experienced person helps a less experienced person. We have many marvelous examples of mentoring throughout the Vanderbilt Eye Institute. These range from guiding undergraduates towards medical school to counseling junior faculty as they maneuver the challenges of career development. Along the way, we assist medical students in determining their interest in Ophthalmology, work with Ophthalmology residents as they look to a subspecialty fellowship or job, and help graduate students and postdoctoral fellows track successfully towards a position in academia or industry.

In discussions with our faculty, it is clear that mentorship is a high priority. It is wonderfully satisfying to have played a role in a protege’s success. However, perhaps we find this so rewarding because each of us can easily acknowledge meaningful mentors in our personal development. At multiple points along our years of training, there was a community physician, faculty member, or administrator that took a special interest in us. Perhaps, we would have extended discussions in their office after clinic or in the surgeon’s lounge between cases. We may have been invited to these homes to be part of their family for holiday celebrations or asked to join them for concerts or sporting events. Along the way, a connection would develop that transcended the conventional teacher-student relationship. Frequently, that mentor becomes the quiet voice whispering in your ear, be it at a difficult point in a surgical case or when you have to make a challenging decision regarding your career.

My professional career evolved significantly this past spring, when the new Vice Chancellor and Dean, Dr. Jeffrey Barker, asked me to take on additional leadership responsibilities at Vanderbilt. Effective July 1, I became Associate Dean for Clinical Affairs, the Chief Medical Office for Adult Clinical Affairs, and the Assistant Vice Chancellor for Adult Health Affairs. By maintaining my role at the Vanderbilt Eye Institute, Dr. Barker envisioned my new role as a “player-coach” for the clinical enterprise. As I have moved into these new roles, I frequently reflect on the leadership styles of some of my mentors, including Dr. Robert Machemer at Duke and Dr. Thomas Aeborg at Emory. Already, I find myself asking, “What would they do?” My answer is that they would expect me to seek input from the appropriate institutional leaders, and then trust my instincts, experience, and personal style to craft a path.

I have been fortunate to benefit from great mentorship along the way, and it is gratifying to see the VEI faculty so committed to this as an integral part of their job. It bodes well for the future of the Vanderbilt Eye Institute and for our profession.

Sincerely yours,

Paul Sternberg, Jr., M.D.
G.W. Hale Professor & Chair, Vanderbilt Eye Institute
Associate Dean for Clinical Affairs, Vanderbilt School of Medicine
Assistant Vice Chancellor for Adult Health Affairs

VANDERBILT EYE INSTITUTE

FACULTY

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Special interests: pediatric orthoptics.

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NEURO-OPTHALMOLOGY
Special interests: retinoblastoma.

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VISION RESEARCH
Special interests: retinal photoreceptor cell death and protection in aging and age-related degenerative diseases.

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VISION RESEARCH
Special interests: neuroplasticity of the visual system and the genetic mechanisms of retinal disease.

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VISION RESEARCH
Special interests: growth and maintenance of retinal epithelial cells.

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RETNANOPLASTY
Special interests: macular degeneration, diabetic retinopathy, corneal surgery and international ophthalmology.

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COMPREHENSIVE OPHTHALMOLOGY
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NEURO-OPTHALMOLOGY/COMPUTER VISION SPECIALIST
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PEMPHYSEMIC SPONTANEOUS IRRITATING SUBSTRATE ATRIUM
Special interests: childhood and adult strabismus, ophthalmic genetics.

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CORNEA AND INTRAOCULAR DRAINS
Special interests: cataract and cataract surgery.

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COMPREHENSIVE OPHTHALMOLOGY
Special interests: strabismus surgery.

Jim Hui-Shen, Ph.D.
VISION RESEARCH
Special interests: mental injury and the prevention of surgical diseases.

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OCULARIMMUNOLOGY
Special interests: low-pressure glaucoma and pediatric glaucoma.

Jeffrey A. Kravis, M.D.
OCULARIMMUNOLOGY
Special interests: ocular neovascular diseases and complications.

Darwin K. Lee, O.D., F.A.A.O.
OPTOMETRY
Special interests: low vision rehabilitation, specialty optics, contact lenses.

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OPTOMETRY
Special interests: cataract surgery.

Stephen J. Kim, M.D.
RETNANOPLASTY
Special interests: anterior segment.

Mark R. Mehn, M.D.
COMPREHENSIVE OPHTHALMOLOGY
Special interests: cataract surgery.

Fred R. Meng, M.D.
GLAUCOMA
Special interests: corneal, trabecular, and surgical glaucoma.

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COMPREHENSIVE OPHTHALMOLOGY
Special interests: anterior segment, corneal and anterior segment surgery.

John S. Nore, Ph.D.
VISION RESEARCH
Special interests: molecular basis of retinal degeneration.

France Nze, M.D.
RETNANOPLASTY
Special interests: posterior uveoretinitis and uveal melanoma.

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COMPREHENSIVE OPHTHALMOLOGY
Special interests: chronic inflammatory conditions, anterior segment.

Charles L. O’Toole, M.D.
COMPREHENSIVE OPHTHALMOLOGY
Special interests: retinal vascular disease, age-related macular degeneration.

John R. Wilt, M.D.
COMPREHENSIVE OPHTHALMOLOGY
Special interests: corneal, trabecular, and surgical glaucoma.

Charles E. Wright, M.D.
COMPREHENSIVE OPHTHALMOLOGY
Special interests: corneal and anterior segment surgery.

Daniel J. Zieske, M.D.
COMPREHENSIVE OPHTHALMOLOGY
Special interests: cataract surgery.

Mark R. Weisner, M.D.
COMPREHENSIVE OPHTHALMOLOGY
Special interests: cataract surgery.

Lauren M. Weisner, M.D.
COMPREHENSIVE OPHTHALMOLOGY
Special interests: retinal degeneration, gene therapy, and diabetic eye disease.

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COMPREHENSIVE OPHTHALMOLOGY
Special interests: retinal disease and ocular oncology.

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Special interests: retinal vascular disease and macular degeneration.

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Special interests: corneal and anterior segment surgery.

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Special interests: corneal and anterior segment surgery.

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COMPREHENSIVE OPHTHALMOLOGY
Special interests: corneal and anterior segment surgery.
EDITOR'S NOTES

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Cover: Sunlight shining through trees in forest. (photo from Getty Images)
FOCUS
THE IMPORTANCE OF MENTORING

Mentoring is an essential element for continued growth at Vanderbilt Eye Institute and Vanderbilt University Medical Center. It begins with undergraduates and continues through the highest ranks of the medical center and university. Passing along knowledge, taking someone under your wing, being a friend are all part of mentoring no matter when it happens. At Vanderbilt, mentoring never ends.

Left: Ash Jayagopal, Ph.D. with his mentor John Penn, Ph.D. Center: Laura Wayman, M.D. (in glasses) with a group of VEI residents. Right: Paul Sternberg, M.D. with Jeff Somino, O.D. (photos by Rusty Russell)
Mentoring Students: Planting the Seed of Success

Guiding the Undergraduate Scientist

David Calkins has been a mentor since he himself was an undergraduate student. “It sort of came naturally to me because I had fantastic mentors through college,” he says of the 65-or-so undergraduate researchers he has guided in his career.

Through his own mentors, young Calkins was introduced to people and places he otherwise would not have encountered. They helped him “not so much by pointing it out to me, but by opening the avenues to me so that I was able to recognize a career path when I saw it.”

Now Director of Research for the Vanderbilt Eye Institute, Calkins thinks mentoring should be a critical part of the university experience. “The Ph.D. track is rife with personal, social, financial and other issues that can overwhelm students. Undergraduates face many decisions and navigate a very sophisticated social network that is not always supportive.”

His soft spot for undergraduates isn’t lost on them. “Dr. C. is one of the most available and accessible PIs (primary investigators),” says Vanderbilt undergraduate Sarah MacNamee. “You can’t just hide in the lab and assume that if he doesn’t come find you, you’re off the hook.”

Ms. MacNamee knew early that she wanted to study Neuroscience. But with a minor in Medicine, Health and Society, MacNamee wasn’t sure she wanted to major in Pre-Med like her classmates. Only after joining the Calkins lab did she really understand how Neuroscience fits into other disciplines. “I have to say I don’t think I knew what my career path would be until I had a mentor.”

Calkins believes in taking a holistic approach to mentoring. “I look at the individual and try to incorporate the needs and wishes of the whole...
person as opposed to just the career part of it,” he claims.

This training takes the form of a formal writing class for his entire lab team – undergrads, graduate students and postdoctoral students alike. “If they’re going to take on the responsibility of doing serious biomedical science,” Callins says, “then they’re also taking on the responsibility of presenting it in a professional manner.”

**Teaching the Art of Networking**

Along with personal attention come networking opportunities. John Penn takes his graduate students everywhere from Buenos Aires to Beijing to Budapest, introducing them to leaders in the research community. This is something that his own mentors did for him, and something that he says made all the difference in his career.

Because of his love of mentoring, Penn jumped at the opportunity to take on the role of Assistant Dean of Faculty Development for the School of Medicine, where he now mentors junior faculty in an official capacity. “This is far and away the most satisfying and rewarding aspect of my job, and I think it always has been.”

Penn advises faculty how to compete for extramural funding, how to position themselves for academic promotion and tenure, how to appropriately promote their scientific ideas, how to manage people, how to negotiate – virtually every aspect of professional development.

“Dr. Penn’s advice is largely the reason I have a job right now,” recalls Ash Jayagopal, a collaborator of Penn’s and now an Assistant Professor in Chemistry at Vanderbilt. “I was able to market my strengths in a way that made the Chemistry Department decide they wanted to retain my services.”

Unlike most newly minted Ph.D.s, Jayagopal was able to step straight into a faculty position without the usual requisite postdoctoral training. Having worked in industry between undergraduate and graduate school, Penn’s mentee is preparing to step onto the tenure track...a process facilitated by Penn, whose non-threatening manner of proposing various alternatives for career paths allows mentees to make informed decisions about what’s best for them.
Another ingredient of good mentoring is generosity with intellectual property. When mentees arrive in his lab, Penn gives them a stake in the lab’s research, which enables students to spread their wings, build important skills and take ownership of the science. With this ownership comes responsibility.

“If it goes well,” Penn says, “the trainee gets all the credit. If it doesn’t go well, the trainee takes responsibility. This is a lesson that must be learned sooner of later. Better to get it out of the way while there’s not so much resting on the outcome. There’s mentoring, and there’s mentoring.”

Creating a Stake in The Research

Sean Donahue, Chief of Pediatric Ophthalmology at the Tennessee Lions Eye Center, believes in hands-on experience for his mentees.

“You can read all you want about research and clinical procedures,” explains Donahue, “but until you actually see what’s happening, it’s difficult to understand.”

Evan Silverstein agrees. When he first met with Dr. Donahue in the School of Medicine’s Emphasis Program, he knew he wanted to learn about Pediatric Ophthalmology, so Dr. Donahue offered him a choice of projects in Silverstein’s area of interest.

“I’ve always been interested in Ophthalmology and I’ve always liked kids,” explains medical student Silverstein. “I wanted to see what Pediatric Ophthalmology was all about and I wanted to do some clinical research.”

Dr. Donahue was determined that his mentee’s work be publishable, presentable, and “doable”. Silverstein chose a project that evaluated the data of 15,000 children who had been screened for risk factors of amblyopia. His research explored the usefulness of altering referral criteria to focus on kids who really have the problem.

“No matter what the results are of this research,” Donahue told his new mentee, “people are going to be curious about it.”

It’s a rare medical student who is an author and who has presented a major paper. To groom Silverstein for a meeting of the American Association of Pediatric Ophthalmology, Donahue helped him boil hours’ worth of academic work down to a seven-minute presentation.

“He initially hated me when he found out he had to get up in front of 500 people and give a talk,” Donahue laughs about the experience.

“I saw him out of the corner of my eye,” Silverstein recalls of the meeting, at which he was the youngest individual and the only medical student presenting. “He never needed to speak up, but it was nice to know that he was there supporting me.”

“The right mentorship and hands-on resources can make the sky the limit for one’s career development,” explains Donahue. He believes it’s essential for a mentor to guide the mentee in his or her choice of career path.

"The right mentorship and hands-on resources can make the sky the limit for one’s career development." — Sean Donahue, M.D., Ph.D
FOCUS
THE IMPORTANCE OF MENTORING

“Time to talk about desired outcomes, evaluating what’s going well and what isn’t.”

But science is the easy part of mentoring – it’s the human side that proves much more prickly.

“You have to resign yourself to the fact that the person you’re mentoring has goals that are completely independent of what your goals are,” says David Calkins.

“You’re not out to create clones of yourself...What you’re there to do is to help people identify and articulate their objectives and to help them create a plan to achieve those objectives.”

“A mentor,” asserts Penn, “is a little bit friend, a little bit parent and a little bit taskmaster. Listening is the most important skill.”

“I think that at the end of my career, when I look back at what I’ve achieved, the most important aspect will be the people,” concludes Calkins. “The earlier you learn that lesson, the easier it’s going to be and ultimately the more rewarding it’s going to be.”

Vanderbilt medical student Evan Silverstein and Dr. Sean Donahue, Chief of Pediatric Ophthalmology, VEI.

“Building a Foundation of Teamwork”

It’s not unusual to find VEI researchers – and their mentees – in the lab on evenings and weekends. In the world of science, that’s a great experience to observe somebody who’s established and is where you want to be,” says Silverstein. “Dr. Donahue gave me a great opportunity.”
Post-Med School Mentoring: Helping Doctors Become Their Best

Finding Your Path in a Medical Career

But Morrison’s mentoring didn’t stop there. “When I came to Vanderbilt for my fellowship in Pediatric Ophthalmology, Sean Donahue opened so many doors for me. I was working with one of the best, and he taught me everything he knew.”

Now Dr. Morrison, an Assistant Professor of Ophthalmology at Vanderbilt Eye Institute, sees mentoring as one of his primary roles. “To me, it’s all about passing along knowledge to the next generation of doctors. That’s why I choose to be a mentor...to give others the advantages I’ve had.”

One of Dr. Morrison’s current mentees is William Watkins, M.D. Dr. Watkins has taken a nontraditional route to residency. Graduating from the University of Mississippi’s School of Medicine in 2007, he wasn’t certain of the specialty he was going to pursue and was late applying for residency slots. By the time he approached the Vanderbilt Eye Institute, the faculty had already matched its next class of residents.

“I expected to be met with a lot of apprehension since I was late getting into the process,” says Watkins. “But the faculty at the Vanderbilt Eye Institute was so gracious...they didn’t question my motives. I needed to be productive during my year off, and David Morrison created a job for me in his lab.”

This decision proved to be the right one for both doctors. Dr. Watkins got a mentor who helped him navigate the residency application process, and Dr. Morrison got a talented researcher who helped him develop a measurement test that was critical to his research project. Dr. Watkins is back in Mississippi doing his internship and is slated to begin his residency at Vanderbilt in 2010.

“Dr. Morrison helped me weed through the residency programs and identify the ones that fit my personality,” explains Watkins. “But the most important thing I’ve learned from him is how to be a doctor and still have a balanced life. Dr. Morrison has a successful academic career, but he also has a wife and two young girls — and a life beyond Vanderbilt. That’s the kind of success I want.”
Getting Started Off on the Right Foot

Mentoring is written into Laura Wayman’s job description. As Program Director of the Vanderbilt Eye Institute’s residency program, she is responsible for the clinical and surgical training of all the residents. But it’s the mentoring she really enjoys.

“New residents are different from students in that they’ve already figured out what specialty they want to pursue. But when they begin their residency they come to Ophthalmology, where the equipment is different, the terminology is different.”

“These residents have been superstars along the way,” she says. “For someone not comfortable with admitting their shortcomings, residency can be a painful experience at first. It’s my job to provide the structure so they can learn the pace, and to reassure them that this steep learning curve will pass.”

One of the VEI’s newest residents is Scott Schultz. An NCAA swimmer at the University of Florida, Schultz didn’t decide on a career in medicine until his sophomore year in college, when he sustained a sports injury tearing his ACL.

“I went to the orthopedic surgeon who treats the Miami Dolphins, Dr. Erol Yoldas,” explains Schultz. “I
had actually shadowed him for a couple of summers...but this time I got to experience his care from the patient’s perspective. From that point forward, I was hooked on medicine. He helped me make decisions about my career: what classes to take, where to apply for residency, etc.”

“Now that I’m at Vanderbilt, I’m finding that the faculty is very nurturing and approachable. Each resident is assigned a mentor – mine is David Morrison. He has made himself available to me whenever I need him. It’s so important to know that you’ve got someone on the faculty who’s watching your back.”

“I’ve had great mentors along the way,” says Laura Wayman. “My residency program director at Mayo Clinic, John Pack, could even make the male residents cry. He made that program great. I still e-mail him from time to time with issues in my own work.”

“Jacqueline Leavitt at Mayo Clinic was paired with me from the first day of medical school and stayed with me through residency. Her encouragement was personal – she was extremely helpful in preparing me for interviews and making phone calls on my behalf. She helped me keep my sense of humor. Now it’s my responsibility,” explains Dr. Wayman, “to make sure our residents come out competent ophthalmologists. I’m going to make sure they get help if they need it before they leave here.”

“Dr. Wayman is great,” says Scott Schultz. “She takes pride in her residents. It’s her heartfelt desire that we do well.”

**Transitioning to Independence**

When a doctor comes into the Vanderbilt Eye Institute Fellowship in Vitreoretinal Diseases and Surgery, they’re put in the care of Dr. Franco Recchia, director of the fellowship and Chief of the Retina division.

“Vanderbilt takes mentoring seriously. They give you the resources you need and help you find other mentors if you want to branch out into another area.” — Janice Law, M.D.

“All of their academic lives, fellows have been told what to read, what to study,” explains Dr. Recchia. “On July 1st after completing their fellowship, it’s their name on the office door, their name on the billing sheet – they have the final say. It’s daunting!”

Ophthalmologist fellows are learning a specialized and detailed craft. The fellowship is the time when they’re developing their surgical skills – and their dexterity. They’re also learning to form judgments, determine surgical indications, and do post-operative evaluations – the nuts and bolts of retinal surgery.

“It’s all about confidence,” says Recchia. “It’s like helping a child learn to ride a bike...after some point you have to take off the training wheels and let them ride by themselves. As a teacher, that’s the biggest thrill.”

“I’ve been fortunate to have had great mentors,” he says. “George Williams and Tony Capore at Beaumont Hospital during my fellowship; Paul Sternberg since I’ve
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Franco Recchia, M.D. and Janice Law, M.D. in the library at VEBI (photo by Rusty Russell)

been here. But I learn just as much from the fellows as they do from me.”

If this is true, then Janice Law, M.D., is his latest teacher. Dr. Law recently completed the VEBI Vitreoretinal Surgical Fellowship, and has just joined the faculty as the Associate Director of Residency Education under Laura Wayman.

"Vanderbilt takes mentoring seriously," says Dr. Law. "They give you the resources you need and help you find other mentors if you want to branch out into another area."

“When a retinal specialist, I’ve had the best mentors anyone could hope for at Vanderbilt. Dr. Sternberg has built up a great retina department here at the Vanderbilt Eye Institute.”

Dr. Law’s new role starts her down her chosen career path as a clinician-educator. “My father was an educator.” She explains: “A professor of microbiology and molecular biology. He taught me that you don’t really master material until you teach it.”

“Teaching has always been a skill set and a talent I wanted to pursue,”

says Law. “Adult education is very different...there are many ways to teach medicine and everyone has a different learning style. And in the operating room, it’s a whole different ball game. I’ve had great models here at the Vanderbilt Eye Institute and I want to pass that along.”

Her new faculty position also pairs her with a new mentor. “Dr. Wayman has assured me that she will take me under her wing and teach me everything she knows,” she says. "I'm looking forward to that."

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“There's no book on how to be a chief of staff. That's why seeking out a mentor with experience and skills relevant to one's position – and passing along knowledge – is crucial.”
– Wright Pinson, M.D.

Mentoring at the Top: It’s Never Too Late to Learn

Passing Along the Gift of Mentorship

When Paul Sternberg, M.D., was approached to take on the dual roles of Assistant Vice Chancellor for Adult Health Affairs and Associate Dean for Clinical Affairs in the School of Medicine, there wasn’t long to prepare.

Unlike the nine months of interviews and visits that had preceded his current role as Chair of the Vanderbilt Eye Institute, Sternberg had little time to study up on his new position. That’s why guidance from his predecessor, Wright Pinson, M.D., was of the essence.

Mentorships aren’t just for students. Or residents, fellows, or doctoral candidates. For an administrator in a new position, finding a mentor is more important than ever. As Pinson passes along the Chief Medical Officer torch to Sternberg, he will also pass along the most important brand of mentorship: the sharing of experience between senior faculty and administrators.

Wright Pinson, M.D. (photo Vanderbilt News & Affairs staff)
FOCUS
THE IMPORTANCE OF MENTORING

For administrators like Pinson and Sternberg, senior-level mentorships benefit everyone down the line. “There’s no book on how to be a chief of staff or how to deal with bad behavior in physicians,” Pinson points out. “That’s why seeking out a mentor with experience and skills relevant to one’s position — and passing along knowledge — is crucial.”

“A lot of life’s key teachings, the things that people really hold onto in terms of the big picture of what they do, comes from this informal learning,” says Pinson. “It’s a natural part of life and a gift when somebody will sit down and talk. It’s one of the greatest gifts you can give.”

“Once you’ve had a profound experience as a mentee,” claims Sternberg, “it does stimulate you to want to be a mentor.” His first great mentor was his father, also an ophthalmologist. But he’s had many others along the way, especially Tom Aaberg at Emory Eye Center, where Sternberg spent 15 years.

“I’ve also had incredible mentors since I’ve been at Vanderbilt,” Sternberg recalls. “Harry Jacobson, Steve Gabbe, Jeff Balser and others. But I really get a lot from the other department chairs. We try to spend some collegial time together off campus where we don’t talk about Vanderbilt, and it pays off.”

“There’s no better way to know a topic than to become a teacher of it,” Pinson emphasizes. “Mentees help you crystallize and clarify your thinking. When you’re in the teaching mode, that’s when you actually get to know a topic.”

For Sternberg, being a mentor himself is one of the most gratifying things that he can do — the truest form of “paying it forward.”

“Ultimately it is our legacy,” he adds. “The people that we train, the impact we can have on them, is how we live on afterwards.”

Mentoring as an Ongoing Exercise

“I’m fortunate to have mentors who coach me every day,” says David Raiford, M.D., Associate Vice Chancellor for Health Affairs and Senior Associate Dean for Faculty Affairs. “The day one thinks he doesn’t need to continue to develop and learn is a bad day.”

Dr. Raiford is currently mentoring the VEI’s John Penn in his new role as Assistant Dean for Faculty Development. “I’m learning a brand new skill set, and David’s been amazing,” says Penn. “He’s incredibly busy, but he always finds time for me to run something by him.”

Raiford believes that every good mentoring relationship is a synergistic, mutually beneficial interaction, with the senior person gaining as much from the experience as the person being mentored, and both parties benefiting from a cross-pollination of ideas. For him, a mentorship is based on mutual respect for each other’s talents.

“I hadn’t worked much with John before this, and he brings an entirely new set of experiences. I try to tap into that body of experience and determine how that person can benefit the whole.”

But how does one mentor another person to be a dean? Dr. Raiford believes it is exposing his mentee to the broad themes that present themselves. “As a dean, one’s obligations are not only to each student and faculty member but to the collective. Aligning your thinking with the larger institutional needs can be a challenge.”

He advises new administrators to question which hat they’re wearing when weighing a decision. “Are you having the conversation as a subordi-
nate, a colleague, or a tennis partner?” he asks. “Having a clear sense of one’s loyalties can be difficult and dialogue can be helpful in sorting out problems.”

In a senior leadership role, asserts Raiford, one has to have pretty good antennae to discern not only what is important, but what is urgent. He or she must have the ability to engage colleagues in a peer-based fashion and to exercise tact, judgment and civility even when tensions are high.

“One of the reasons Dr. Sternberg and Dr. Penn were chosen for greater leadership roles is that they had demonstrated these skills already,” he says.

“I think all of us who are successful can point to people along the way who have impacted us,” says John Penn. “We do not develop into who we are in a vacuum.”

“To this day,” Penn admits of his first mentor, “I ask myself, ‘What would my graduate school advisor, Ted Williams, do in this situation?’ Yet another mentor is a close colleague, Robert E. “Gene” Anderson, with whom he still communicates. “I’ve got a number of angels out there that look over me and take care of me when times get tough,” he muses. “a half dozen guys that, for what it’s worth, my career is built upon. That’s the way it works.”

“My greatest contribution to Vanderbilt would be for me to leave one or two young faculty members out there thinking that about me.”
Joe Ellis spends a few moments catching up with Karen Joos, M.D., Ph.D. (photo by Rusty Russell)

Philanthropy as Mentoring:
One Family's Impact on Glaucoma

Joe Ellis understands how difficult it can be to get funding for projects. After college, he started his career with nothing and built a manufactured housing and RV business into a hugely successful enterprise.

In his fifties, Mr. Ellis was diagnosed with elevated eye pressure, which would eventually result in glaucoma. Through the years, he consulted many glaucoma specialists across the country, from Bascom-Palmer in Miami to Johns Hopkins in Baltimore. When he and his wife, Barbara, moved back to his native Middle Tennessee in 1991, his ophthalmologist at Johns Hopkins referred him to Dr. Denis O'Day at Vanderbilt.

Not long thereafter, Karen Joos, M.D., a promising young clinician-researcher specializing in glaucoma, accepted a position with Vanderbilt Ophthalmology and took over his care. Mr. Ellis took an immediate interest in her research work.

“Dr. Joos works day and night trying to find a cure for glaucoma, and I want her to succeed,” says Mr. Ellis. “She was doing some important research, but she needed funding.”

In the research process, sometimes the approaches that appear the least likely to succeed can be the most fruitful. But obtaining funding to pursue novel ideas can be
"We have always lived by the premise that you should share what you've got with others. If someone else with glaucoma can benefit from research we've helped support, then that's our legacy." – Joe Ellis

challenging. A request for seed money from a foundation for even short-term support is likely to be declined for being too risky.

To receive major funding from sources such as the National Institutes of Health National Eye Institute, new ideas must be tested, developed, and confirmed to produce solid pilot data. These pilot results must then be published in a research journal and submitted as part of the grant proposal.

Dr. Joos has been busy collecting such data. In addition to laboratory research developing a glaucoma model and exploring mechanisms of early optic nerve damage, her glaucoma research work includes improving surgical techniques.

She has collaborated with Anita Agarwal, M.D., a Vanderbilt Eye Institute retinal specialist, on one such method (see Vision, Spring 2009). The two have developed a procedure using a miniature intraocular endoscope to safely prepare the c yc for insertion of a glaucoma drainage tube in the back when the direct view through the operating microscope is obscured. A manuscript describing their technique and outcomes has been submitted for publication.

In 1998, in support of Dr. Joos and other V E I glaucoma researchers, Joe, Barbara, and Pati Ellis, their daughter, established the Joseph Ellis Family Glaucoma Research Fund, which has provided seed money through four significant gifts.

"The Joseph Ellis Family Glaucoma Research Fund has been so valuable to me over the last several years," says Dr. Joos. "It has provided the flexibility to rapidly explore and develop new ideas for glaucoma."

In fact, Dr. Joos is writing a new glaucoma bench-research manuscript in which the Ellis Family Fund was the key support. She hopes that additional funding for the Vanderbilt Eye Institute will be realized in the future as a result of preliminary data realized through the Ellis gifts.

"We have always lived by the premise that you should share what you've got with others," says Joe Ellis. "If someone else with glaucoma can benefit from research we've helped support, then that's our legacy."

Originally from Springfield, Tennessee, Mr. Ellis left as a young man to attend Northwestern University. It was in Chicago that he met Barbara, who had begun her career as a nurse. They eventually settled in South Bend, Indiana, where they built their business and raised their daughter.

Today, Mr. Ellis serves on the Vanderbilt Eye Institute's advisory board. "I can't get just a little bit involved," he laughs. "I want to know what they're doing over there!"
FACULTY APPOINTMENTS

Paul Sternberg, Jr., M.D., G.W. Hale Professor & Chairman of the Vanderbilt Eye Institute, has been named Assistant Vice Chancellor for Adult Health Affairs and Associate Dean for Clinical Affairs in the School of Medicine. He will retain his current position as Chair of the Department of Ophthalmology and Visual Sciences and Director of the Vanderbilt Eye Institute.

John S. Penn, Ph.D., Snyder Professor & Vice Chairman of the VEI, has been named Assistant Dean of Faculty Development.

David Calkins, Ph.D., was named Director of Research for the Vanderbilt Eye Institute.

Ronald J. Biernacki, C.O., C.O.M.T., a VEI pediatric orthoptist since 2000, joins the VEI faculty as Assistant Professor, Ophthalmology and Visual Science.

John B. Bond, III, M.D., joins the VEI faculty as Assistant Professor, Ophthalmology and Visual Science. Dr. Bond's specialties are Neuro-Ophthalmology and Strabismus.

Edward D. Cherney, M.D., joins the VEI faculty as Associate Professor, Ophthalmology and Visual Science. Dr. Cherney is a retina specialist who comes to Vanderbilt from private practice.

Mark D. Ewald, M.D., joins the VEI faculty as Assistant Professor, Ophthalmology and Visual Science. Dr. Ewald recently completed a fellowship in Cornea and External Diseases at Wills Eye Institute.

Janice C. Law, M.D., joins the VEI faculty as Assistant Professor, Ophthalmology and Visual Science. Dr. Law who recently completed the VEI fellowship in Vitreoretinal Diseases and Surgery was named Associate Director of Residency Education.

Rebecca M. Sappington, Ph.D., who recently completed the VEI Postdoctoral Fellowship, joined the faculty as Assistant Professor, Ophthalmology and Visual Science.

BOARDS

Paul Sternberg, M.D., was elected as Vice President of the Association for Research in Vision and Ophthalmology (ARVO), the largest vision research organization in the world, during its annual meeting in May. Sternberg, a member since 1976, is completing his final year as a trustee on the board.

John Penn, Ph.D. was elected to the ARVO board as a trustee. Prior to his board appointment, Penn served on the ARVO Long-Range Planning Committee.

GRANTS

Karen Joos, M.D., Ph.D., has received an R21 grant from the National Eye Institute for her research project "Intraocular OCT Real-Time Monitoring of Laser Retinectomy".

Louisc Mawn, M.D., has received an R21 grant from the National Center for Research Resources (NCRR) for her research project "Technology Development of Electromagnetically Tracked Flexible Endoscope".

AWARDS

Denis O'Day, M.D., Director of the Vanderbilt School of Medicine's Emphasis Program and Professor of Ophthalmology and Visual Sciences, was honored by the American Ophthalmological Society with its Lucien Howe Medal – one of Ophthalmology's highest honors – for his many contributions to the field (see full article on the back of this issue).

Jennifer Harvey recently was honored with the Jules Elias Excellence in Immunohistochemistry Award given by the National Society of Histotechnology. Jennifer is histologist for the Vanderbilt Eye Institute and the Vanderbilt Vision Research Center.
Dear Friends,

In this issue, we feature one of the most rewarding aspects of being a member of the academic medical center faculty: mentoring. Mentorship refers to a developmental relationship in which a more experienced person helps a less experienced person. We have many marvelous examples of mentoring throughout the Vanderbilt Eye Institute. These range from guiding undergraduates towards medical school to counseling junior faculty as they maneuver the challenges of career development. Along the way, we assist medical students in determining their interest in Ophthalmology, work with Ophthalmology residents as they look to a subspeciality fellowship or job, and help graduate students and postdoctoral fellows track successfully towards a position in academia or industry.

In discussions with our faculty, it is clear that mentorship is a high priority. It is wonderfully satisfying to have played a role in a protégé’s success. However, perhaps we find this so rewarding because each of us can easily acknowledge meaningful mentors in our personal development. At multiple points along our years of training, there was a community physician, faculty member, or administrator that took a special interest in us. Perhaps, we would have extended discussions in their office after clinic or in the surgeon’s lounge between cases. We may have been invited to their homes to be part of their family for holiday celebrations or asked to join them for concerts or sporting events. Along the way, a connection would develop that transcended the conventional teacher-student relationship. Frequently, that mentor becomes the quiet voice whispering in your ear, be it at a difficult point in a surgical case or when you have to make a challenging decision regarding your career.

My professional career evolved significantly this past spring, when the new Vice Chancellor and Dean, Dr. Jeffrey Barker, asked me to take on additional leadership responsibilities at Vanderbilt. Effective July 1, I become Associate Dean for Clinical Affairs, the Chief Medical Office for Adult Clinical Affairs, and the Assistant Vice Chancellor for Adult Health Affairs. By maintaining my role at the Vanderbilt Eye Institute, Dr. Barker envisioned my new role as a “playcoach” for the clinical enterprise. As I have moved into these new roles, I frequently reflect on the leadership styles of some of my mentors, including Dr. Robert Macrander at Duke and Dr. Thomas Aebig at Emory. Already, I find myself asking, “What would they do?” My answer is that they would expect me to seek input from the appropriate institutional leaders, and then trust my instincts, experience, and personal style to craft a strategy.

I have been fortunate to benefit from great mentorship along the way, and it is gratifying to see the VECI faculty so committed to this as an integral part of their job. It bodes well for the future of the Vanderbilt Eye Institute and for our profession.

Sincerely yours,

Paul Sternberg, Jr., M.D.
J.W. Hale Professor & Chair, Vanderbilt Eye Institute
Associate Dean for Clinical Affairs, Vanderbilt School of Medicine
Assistant Vice Chancellor for Adult Health Affairs
VANDERBILT EYE INSTITUTE
FACULTY AWARD

Ophthalmology Society Lauds O’Day’s Contributions

By Jessica Pauley, VUMC Reporter, 6/12/2009

Longtime Vanderbilt ophthalmologist Denis O’Day, M.D., was recently presented with one of Ophthalmology’s highest honors — the Lucien Howe Medal. O’Day, Director of the Emphasis Program and Professor of Ophthalmology and Visual Sciences at Vanderbilt, was honored by the American Ophthalmological Society for his many contributions to the field.

A member of the Vanderbilt faculty since 1972, O’Day specializes in the management of corneal and external disease, with particular expertise in diagnosing difficult and unusual types of ocular infections and fungal disease. O’Day was responsible for developing the Tennessee Lions Eye Center at Vanderbilt Children’s Hospital in 1997, and served as chair of the department from 1992 to 2002.

The presentation of the medal came as a surprise to O’Day. “It is humbling,” he said. “I had absolutely no idea at all that I was receiving this honor. I was stunned. I am still stunned. Those who have received the medal are an impressive group and to be recognized among them...it’s amazing.”

Established in 1919, the Howe Medal was not awarded until 1922. The award denotes distinguished service to Ophthalmology and has only 74 recipients, including O’Day. “The Howe Medal is one of the premier honors that are bestowed in the field of Ophthalmology,” said Paul Sternberg, M.D., Chair of Ophthalmology and Visual Sciences and Director of the Vanderbilt Eye Institute. “For Dr. O’Day, it is an acknowledgement of an incredible career of accomplishment in clinical care, research, education and patient care. We are proud of him and privileged that he is still an active member in our department.”

The AOS honored O’Day for his work with the Emphasis Program, an opportunity for first- and second-year medical students to gain specialized knowledge and experience by working in one of nine areas related to medicine, his commitment to the Visitation Clinic and Hospital in Haiti, which he helped build, and his dedication to the American Board of Ophthalmology.