



STATE BOARD OF OPTOMETRY
2450 DEL PASO ROAD, SUITE 105, SACRAMENTO, CA 95834
P (916) 575-7170 F (916) 575-7292 www.optometry .ca.gov



Continuing Education Course Approval Checklist

Title:

Provider Name:

- Completed Application
 - Open to all Optometrists? Yes No
 - Maintain Record Agreement? Yes No
- Correct Application Fee
- Detailed Course Summary
- Detailed Course Outline
- PowerPoint and/or other Presentation Materials
- Advertising (optional)
- CV for EACH Course Instructor
- License Verification for Each Course Instructor
 - Disciplinary History? Yes No

Cashiering and Board Use Only			
Receipt #	Payor ID	Beneficiary ID	Amount
1-3322	5394304	5394304	\$750

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY

GOVERNOR EDMUND G. BROWN JR.



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CONTINUING EDUCATION COURSE APPROVAL APPLICATION

\$50 Mandatory

Pursuant to California Code of Regulations (CCR) § 1536, the Board will approve continuing education (CE) courses after receiving the applicable fee, the requested information below and it has been determined that the course meets criteria specified in CCR § 1536(g).

In addition to the information requested below, please attach a copy of the course schedule and topical outline of the subject matter. Applications must be submitted 45 days prior to the course presentation date.

Please type or print clearly.

Course Title <u>"Taste of the Islands CE"</u> <u>Cataract Surgery in Patients with Corneal Pathology</u>	Course Presentation Date <u>9:00 AM - 4:30 PM</u> <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="7"/>
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Course Provider Contact Information

Provider Name <u>Coastal Vision Medical Group</u>		
<u>Gina</u> (First)	<u>Valdemar</u> (Last)	 (Middle)

Provider Mailing Address		
Street <u>225 S. Main St. #100</u>	City <u>Orange</u>	State <u>CA</u> Zip <u>92660</u>

Provider Email Address <u>gina.valdemar@coastal-vision.com</u>
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Will the proposed course be open to all California licensed optometrists?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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Do you agree to maintain and furnish to the Board and/or attending licensee such records of course content and attendance as the Board requires, for a period of at least three years from the date of course presentation?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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Course Instructor Information

Please provide the information below and attach the curriculum vitae for each instructor or lecturer involved in the course. If there are more instructors in the course, please provide the requested information on a separate sheet of paper.

Instructor Name		
<u>Jennifer</u> (First)	<u>Wu</u> (Last)	<u>Lee</u> (Middle)
License Number <u>117309</u>	License Type <u>MD</u>	
Phone Number <u>(714) 746-9679</u>	Email Address <u>gina.valdemar@coastal-vision.com</u>	

I declare under penalty of perjury under the laws of the State of California that all the information submitted on this form and on any accompanying attachments submitted is true and correct.

[Signature]
Signature of Course Provider

11-17-17
Date



March 23, 2017

State Board of Optometry
2450 Del Paso Road, Ste. 105
Sacramento, CA 95834

RE: Late submission of CE course approval-Taste of the Islands 8 Hour CE-April 30, 2017:
Five Retinal Diagnoses You Don't Want to Miss; Cataract Surgery in Patients with Corneal Pathology;
Buried Treasure: Connecting the Dots to Treating Binocular Misalignment; Patient-reported
Outcomes with Lasik: Interpreting the PROWL study; What We Know about Topography Guided
Refractive Surgery: Case Studies in Clinical Practice; Do You See What I See?; Crosslinking for Corneal
Ectasia: The Evolution of Sclera Lenses; Blink and You'll Miss It: Dry Eye in the Cosmetic Patient; Is the
Symphony Toric Lens the Answer for Every Eye Condition; Should My Glaucoma Patient with a
Cataract have a MIGS Surgery; Vitreous: Friend or Foe; Is it Cancer? The Optometrist Role in the
Diagnosis and Management of Periocular Skin Cancer; Oral Presentations of Systemic Disease: Case
Presentations; Glaucoma Management: What Should I do Next?

Dear Practice and Education committee,

I am writing this letter in regards to late submission for the multi-course symposium titled "Taste of the Islands CE" scheduled for presentation on 04/30/2017. We are short of the 45 day submission request, and wanted to include a letter for late submission with our CE approval application.

We continue to work diligently to get all required items to the board needed for CE approval in a timely manner. Due to multiple speakers at the upcoming CE, we had difficulty obtaining all the lectures to meet the submission requirement timeline and would appreciate your consideration of our continuing education approval request.

Please feel free to reach out to us with any other questions. We look forward to continued relations with the State Board of Optometry and the practice and education committee.

Sincerely,

Gina Valdemar
Affiliate Relations and Education Director
Coastal Vision Medical Group
ginavaldemar@coastal-vision.com

Schedule of Events:

7:00 am-7:50 am	Registration & Breakfast	
7:50 am-8:00 am	Dan B. Tran, MD	Welcome & Opening Remarks
8:00 am-8:25 am	Timothy You, MD	5 Retinal Diagnoses You Don't Want to Miss
8:25 am-8:50 am	Jennifer Lee Wu, MD	Cataract Surgery in Patients with Corneal Pathology
8:50 am-9:15 am	Gary Lovcik, OD	Buried Treasure: Connecting the Dots to Treating Binocular Misalignment
9:15 am-9:40 am	Elizabeth Hofmeister, MD, MC, USN	Patient-reported Outcomes with LASIK: Interpreting the PROWL Study
9:40 am-10:05 am	Dan B. Tran, MD	What We Know about Topography Guided Refractive Surgery: Case Studies in Clinical Practice
10:05 am-10:30 am	Madhu Agarwal, MD	Do You See What I See?
10:30 am-11:00 am	Break	
11:00 am-11:50 am	Jennifer Lee Wu, MD	Crosslinking for Corneal Ectasia
11:50 am-12:15 pm	Justin Kwan, OD, FFAO	The Evolution of Sclera Lenses
12:15 pm-12:40 pm	Jeffrey Joseph, MD	Blink and You'll Miss It: Dry Eye in the Cosmetic Patient
12:40 pm-1:50 pm	Lunch/Luau	
1:50 pm-2:15 pm	Dan B. Tran, MD	Is the Symphony Toric Lens the Answer for Every Eye Condition?
2:15 pm-2:40 pm	Betsy Nguyen, MD	Should My Glaucoma Patient with a Cataract have a MIGS Surgery?
2:40 pm-3:05 pm	Raj Rathod, MD, MBA	Vitreous: Friend or Foe
3:10 pm-3:35 pm	Jeffrey Joseph, MD	Is it Cancer? The Optometrist's Role in the Diagnosis and Management of Periocular Skin Cancer
3:35pm-3:40 pm	Lisa D. Garbutt, MD	Ocular Presentations of Systemic Disease: Case Presentations
4:00 pm-4:25 pm	Betsy Nguyen, MD	Glaucoma Management: What Should I Do Next?
4:25 pm-4:30 pm	Closing Remarks/Raffle	

*At time of print, pending CA Board of Optometry approval. Topics and speakers are subject to change.

**Taste of the Islands 8 hour CE
(2 of 15 lectures)**

Course Title: Cataract surgery in Patients with Corneal Pathology

Course Presentation date: 4/30/17

Speaker: Jennifer Lee Wu, MD

Target Audience: This lecture is intended for optometrist seeking continuing education

Course Description: Learning objective includes how corneal lesions and scars affect astigmatism. Understanding how corneal lesions and scars may affect cataract surgery. Learn about corneal dystrophies that may affect cataract surgery decisions and understand some complex considerations for patients with corneal ectasia that also need cataract surgery.

CE Credit: .50 CE Units

1 **Cataract Surgery
in Patients with
Corneal Pathology**

Jennifer Lee Wu, MD
Cornea, Cataract, Refractive Specialist
Coastal Vision Medical Group

2 **Case 1**

- ▶ CC: referred for cataract evaluation OU
- ▶ HPI: 78 yo M, c/o decreased distance VA and increasing glare from lights making driving difficult
- ▶ BCVA: OD 20/30, OS 20/25
- ▶ BAT: OD 20/60, OS 20/50

3 **Case 2**

- ▶ MRx:
 - ▶ OD: -0.50 +2.00 x 125
 - ▶ OS: -0.25 +2.25 x 125

4 **Case 1**

5 **Case 1:**

- ▶ PMH: thyroid disease
- ▶ POH:
 - ▶ marginal keratitis with Salzmann nodules, s/p excision with pseudopterygium
 - ▶ Non-exudative macular degeneration
 - ▶ MGD

6 **Case 1:**

- ▶ Slit Lamp Exam:
 - ▶ Pseudopterygium N + T with Fe lines OU
 - ▶ Subepithelial scars OU
 - ▶ 2+ NSC OU, 1+ anterior cortical OU
- ▶ DFE
 - ▶ geographic atrophy OU

7 **Case 1**

8 **Case 1**

- ▶ What is your surgical plan?
 - ▶ Staged PTG excision then CE/IOL or CE/IOL only?
 - ▶ Do you place toric lens?

9 **Pterygium**

- 1 ▶ Picture of PTG
- 2 ▶ Determine if pterygium is visually significant (crossing visual axis or causing

astigmatism)

- Determine if pterygium is stable or causing ocular surface symptoms
- Recommend removal prior to cataract surgery
- Wait 3 months after removal for cornea shape to stabilize

10 **Salzman Nodules**

- 2
 - Determine if nodules are visually significant (causing irregular astigmatism)
 - Treat underlying cause, usually chronic dry eye or ocular surface inflammation
 - Recommend removal prior to cataract surgery, use MMC
 - Wait 3 months after removal for cornea shape to stabilize

11 **Case 2**

- CC: 51 yo Male referred for post-LASIK ectasia corneal evaluation
- HPI: worsening vision in both eyes over last 1-2 years with increasing astigmatism
- PSH: Myopic Lasik performed 5 years prior
- BCVA: OD 20/40, OS 20/50
- Mrx: OD +3.25 -2.50x 40, OS +4.50 -5.75 x 130

12 **Case 2**

13 **Fuchs Endothelial Corneal Dystrophy (FED)**

- 1
 - Bilateral autosomal dominant genetic disorder
 - Accelerated death of endothelial cells, which normally pump fluid from the cornea to keep it clear
 - Visual morbidity from guttae and/or corneal edema
 - Symptoms include glare when driving at night, diurnal variation in vision (worse in AM)

14 **Endothelial Keratoplasty (EK)**

- 1
 - Selective replacement of the endothelial layer
 - DSAEK
 - DMEK

15 **Phakic Fuch's Corneal dystrophy patients**

- 1
 - Is it the Fuchs or is it the cataract?
 - History-Listen to patient's main complaint (inability read small print versus fluctuations in vision)
 - Patient's occupation and visual needs
 - Careful dilated slit lamp exam (use retro-illumination)
 - Check corneal pachymetry
 - Check endothelial cell count and cell morphology
 - What is status of the other eye
 - Staged cataract versus combination EK/PE/IOL?
 -
 -

16 **Cornea Ectasia**

- 1
 - Keratoconus

- Post-Lasik ectasia
 - Terrien's marginal degeneration
- 2 ➤ Questions:
 - 1) Is the cornea stable?
 - 2) Check Mrx history
 - 3) Does the patient need Corneal Cross-Linking first?
- 17 **Cornea Ectasia**
 - 1) Is the cornea shape stable from disease or from chronic CTL wear?
 - 2) Is the patient willing to wear contact lens after cataract surgery?
 - 3) How much astigmatism is there? Is there anisometropia?
- 18 **Case 3**
 - CC: referred for cataract evaluation OU
 - HPI: 72 yo F, c/o blurred VA OU even with new glasses and increasing glare from headlights. She no longer drives at night.
 - BCVA: OD 20/25, OS 20/25
 - BAT: OD 20/50, OS 20/50
- 19 **Case 3**
- 20 **Case 3**
 - MRx:
 - OD: +1.50 +1.25 x 177
 - OS: +2.00 +1.00 x 175
- 21 **Case 3:**
 - Slit Lamp Exam:
 - Cornea- subepithelial scar and stromal scar inferior
 - Iris dilates well
 - 1+ NSC OU, 1+ central PSC OS, 1+ posterior cortical OD
 - DFE- wnl
- 22 **Case 3:**
 - Peri-operative management:
 - Increase famcyclovir to TID starting 2 days before surgery, continue 2 weeks, then back to baseline dose
 - Add PredForte 1% QID starting 2 days before surgery
 - Aggressive steroid use after surgery 8x/day x 1 week, then QID, follow regular taper, return to baseline dose at 6 weeks
 -
 - Intra-operative:
 - IV acyclovir (if available)
 - Minimize phaco energy (Femto if available)
- 23 **Corneal scars (eg HSV)**
 - Is the scar abutting the visual axis?
 - Check topography

- ▶ Check endothelial cell count

24  **Femto-laser assisted cataract surgery (FLACS) for compromised endothelium and cornea scars**

- ▶ Lens fragmentation reduced phaco energy required
- ▶ Laser capsulorhexis aids in areas of poor corneal visibility due to scarring

25  **Thank you!**

Questions?

jennywu@coastal-vision.com



Cataract Surgery in Patients with Corneal Pathology

Jennifer Lee Wu, MD
Cornea, Cataract, Refractive Specialist
Coastal Vision Medical Group



Case 1

- ▶ CC: referred for cataract evaluation OU
- ▶ HPI: 78 yo M, c/o decreased distance VA and increasing glare from lights making driving difficult
- ▶ BCVA: OD 20/30, OS 20/25
- ▶ BAT: OD 20/60, OS 20/50

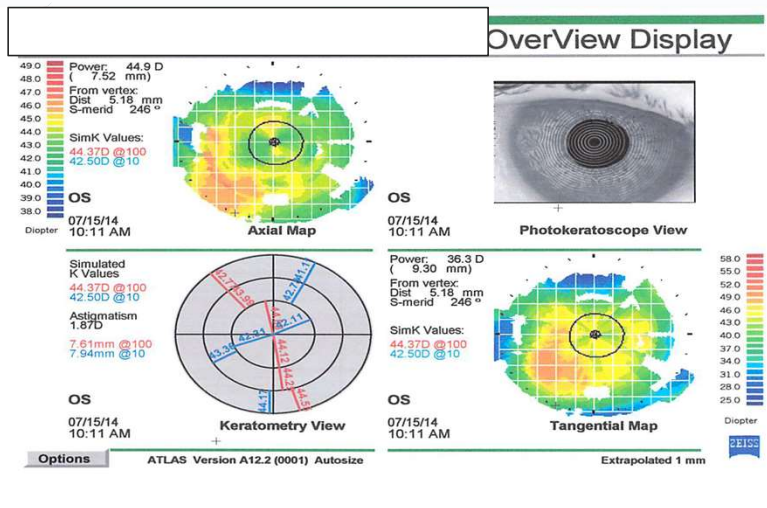
Case 2

- MRx:
 - OD: -0.50 +2.00 x 125
 - OS: -0.25 +2.25 x 125

Axial length values							
OD right			OS left				
Phakic			Phakic				
Comp. AL: 23.33 mm (SNR = 128.4)			Comp. AL: 23.51 mm (SNR = 188.5)				
AL	SNR	AL	SNR	AL	SNR		
23.35 mm	3.5	23.33 mm	4.0	23.50 mm	2.8		
23.35 mm	4.1	23.38 mm	4.3	23.55 mm	3.6		
23.33 mm	6.5	23.37 mm	2.1	23.52 mm	3.2		
23.32 mm	6.1	23.34 mm	4.6	23.55 mm	5.9		
23.34 mm	3.3	23.36 mm	3.2	23.43 mm	3.6		
23.36 mm	4.9	23.35 mm	3.2	23.55 mm	6.1		
23.35 mm	2.4	23.33 mm	7.2	23.47 mm	3.3		
23.33 mm	6.3	23.37 mm	5.2	23.41 mm	2.9		
24.14 mm	4.2	23.32 mm	2.4	23.49 mm	3.4		
23.34 mm	7.8	23.31 mm	2.8	23.52 mm	4.4		
				23.51 mm	5.8		
Keratometer values							
MV: 43.38/45.61 D		SD: 0.00 mm		MV: 42.61/45.12 D		SD: 0.01 mm	
K1: 43.32 D x 13°	7.79 mm			K1: 42.56 D x 13°	7.93 mm		
K2: 45.61 D x 103°	7.40 mm			K2: 45.12 D x 103°	7.48 mm		
ΔK: +2.29 D x 103°				ΔK: +2.56 D x 103°			
K1: 43.32 D x 14°	7.79 mm			K1: 42.56 D x 14°	7.93 mm		
K2: 45.67 D x 104°	7.39 mm			K2: 45.12 D x 104°	7.48 mm		
ΔK: +2.35 D x 104°				ΔK: +2.56 D x 104°			
K1: 43.44 D x 16°	7.77 mm			K1: 42.67 D x 14°	7.91 mm		
K2: 45.61 D x 106°	7.40 mm			K2: 45.18 D x 104°	7.47 mm		
ΔK: +2.17 D x 106°				ΔK: +2.51 D x 104°			
Anterior chamber depth values							
ACD: 2.82 mm			ACD: 2.73 mm				
2.82 mm	2.82 mm	2.83 mm	2.82 mm	2.83 mm	2.73 mm		
2.73 mm	2.73 mm	2.73 mm	2.73 mm	2.73 mm	2.73 mm		
White-to-white values							
WTW : 11.8 mm		Pup: 7.6 mm		WTW : 12.0 mm		Pup: 7.5 mm	
Ix:+0.4mm Iy:+1.1mm		Px:+0.3mm Py:+1.1mm		Ix:-0.4mm Iy:+0.2mm		Px:+0.3mm Py:+0.3mm	

Remark: (* = value has been edited, ! = borderline value)

Case 1



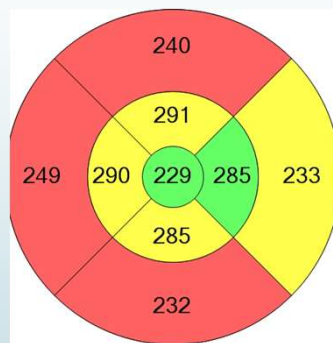
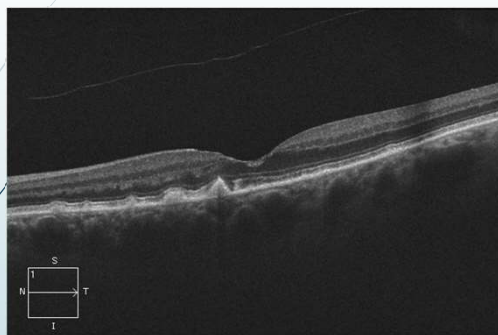
Case 1:

- ▶ PMH: thyroid disease
- ▶ POH:
 - ▶ marginal keratitis with Salzmann nodules, s/p excision with pseudoptygium
 - ▶ Non-exudative macular degeneration
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Case 1:

- ▶ Slit Lamp Exam:
 - ▶ Pseudoptygium N + T with Fe lines OU
 - ▶ Subepithelial scars OU
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 - ▶ geographic atrophy OU

Case 1



Case 1

- ▶ What is your surgical plan?
 - ▶ Staged PTG excision then CE/IOL or CE/IOL only?
 - ▶ Do you place toric lens?



Pterygium

- Picture of PTG

- Determine if pterygium is visually significant (crossing visual axis or causing astigmatism)
- Determine if pterygium is stable or causing ocular surface symptoms
- Recommend removal prior to cataract surgery
- Wait 3 months after removal for cornea shape to stabilize



Salzman Nodules

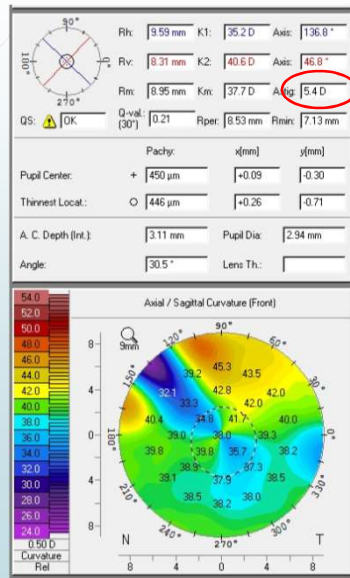
- Determine if nodules are visually significant (causing irregular astigmatism)
- Treat underlying cause, usually chronic dry eye or ocular surface inflammation
- Recommend removal prior to cataract surgery, use MMC
- Wait 3 months after removal for cornea shape to stabilize

Case 2

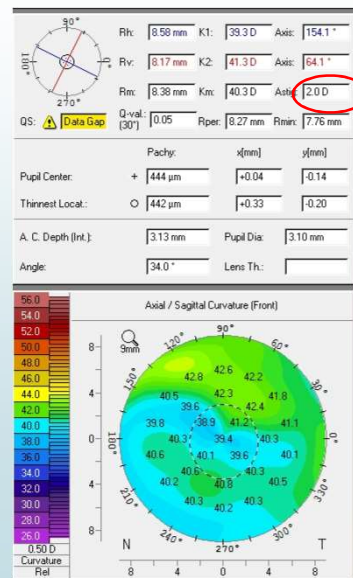
- ▶ CC: 51 yo Male referred for post-LASIK ectasia corneal evaluation
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- ▶ PSH: Myopic Lasik performed 5 years prior
- ▶ BCVA: OD 20/40, OS 20/50
- ▶ Mrx: OD +3.25 -2.50x 40, OS +4.50 -5.75 x 130

Case 2

Baseline OS



POM#2





Fuchs Endothelial Corneal Dystrophy (FED)

- ▶ Bilateral autosomal dominant genetic disorder
- ▶ Accelerated death of endothelial cells, which normally pump fluid from the cornea to keep it clear
- ▶ Visual morbidity from guttae and/or corneal edema
- ▶ Symptoms include glare when driving at night, diurnal variation in vision (worse in AM)



Endothelial Keratoplasty (EK)

- ▶ Selective replacement of the endothelial layer
- ▶ DSAEK
- ▶ DMEK

Phakic Fuch's Corneal dystrophy patients

- ▶ Is it the Fuchs or is it the cataract?
- ▶ History-Listen to patient's main complaint (inability read small print versus fluctuations in vision)
- ▶ Patient's occupation and visual needs
- ▶ Careful dilated slit lamp exam (use retro-illumination)
- ▶ Check corneal pachymetry
- ▶ Check endothelial cell count and cell morphology
- ▶ What is status of the other eye
- ▶ Staged cataract versus combination EK/PE/IOL?

Cornea Ectasia

- ▶ Keratoconus
 - ▶ Post-Lasik ectasia
 - ▶ Terriens marginal degeneration
- ▶ Questions:
 - ▶ 1) Is the cornea stable?
 - ▶ 2) Check Mx history
 - ▶ 3) Does the patient need Corneal Cross-Linking first?



Cornea Ectasia

- ▶ 1) Is the cornea shape stable from disease or from chronic CTL wear?
- ▶ 2) Is the patient willing to wear contact lens after cataract surgery?
- ▶ 3) How much astigmatism is there? Is there anisometopia?

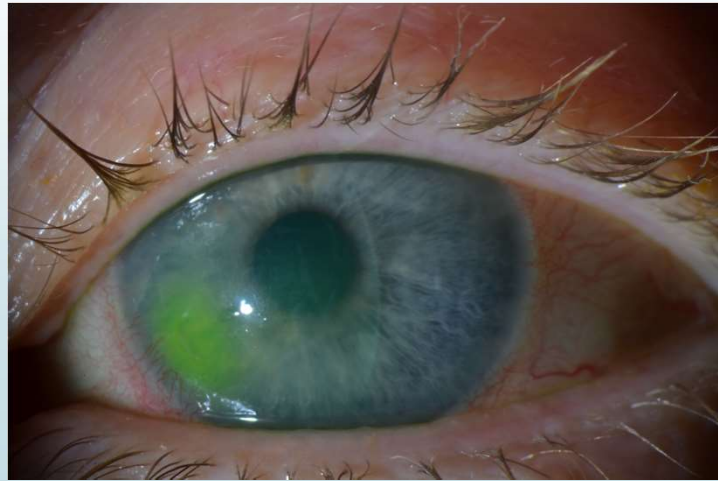


Case 3

- ▶ CC: referred for cataract evaluation OU
- ▶ HPI: 72 yo F, c/o blurred VA OU even with new glasses and increasing glare from headlights. She no longer drives at night.
- ▶ BCVA: OD 20/25, OS 20/25
- ▶ BAT: OD 20/50, OS 20/50

Case 3

POH: Sicca Syndrome, HSV keratitis + endothelitis, chronically on Famvir 500mg daily and lotemax daily



Case 3

- MRx:
 - OD: +1.50 +1.25 x 177
 - OS: +2.00 +1.00 x 175

OD				OS			
right				left			
Phakic				Phakic			
Comp. AL: 23.40 mm (SNR = 314.6)				Comp. AL: 23.31 mm (SNR = 182.9)			
AL	SNR	AL	SNR	AL	SNR	AL	SNR
23.41 mm	6.1			23.33 mm	2.9	23.32 mm	10.0
23.41 mm	6.5			23.26 mm	2.4	23.33 mm	3.7
23.39 mm	3.4			25.73 mm	3.6	23.33 mm	5.5
23.35 mm	3.9			23.32 mm	6.9	23.32 mm	7.7
23.39 mm	4.6			23.34 mm	6.7	23.32 mm	3.4
23.41 mm	11.5			23.32 mm	4.4		
23.40 mm	6.9						
23.42 mm	5.9			23.32 mm	3.8		
23.39 mm	12.0			23.32 mm	4.6		
23.41 mm	16.8			23.32 mm	15.5		
Keratometer values				Keratometer values			
MV: 42.61/42.78 D	SD: 0.01 mm	MV: 42.35/42.61 D	SD: 0.00 mm				
K1: 42.56 D x 37°	7.93 mm	K1: 42.29 D x 23°	7.98 mm				
K2: 42.72 D x 127°	7.90 mm	K2: 42.61 D x 113°	7.92 mm				
AKI: +0.16 D x 127°		AKI: +0.32 D x 113°					
K1: 42.67 D x 24°	7.91 mm	K1: 42.35 D x 28°	7.97 mm				
K2: 42.83 D x 114°	7.88 mm	K2: 42.61 D x 118°	7.92 mm				
AKI: +0.16 D x 114°		AKI: +0.26 D x 118°					
K1: 42.56 D x 76°	7.93 mm	K1: 42.35 D x 23°	7.97 mm				
K2: 42.83 D x 166°	7.88 mm	K2: 42.61 D x 117°	7.92 mm				
AKI: +0.27 D x 166°		AKI: +0.26 D x 117°					
Anterior chamber depth values				Anterior chamber depth values			
ACD: 3.56 mm		ACD: 3.51 mm					
3.57 mm 3.57 mm 3.55 mm 3.57 mm		3.51 mm 3.51 mm 3.51 mm 3.53 mm 3.53 mm 3.51 mm					
White-to-white values				White-to-white values			
WTW : 13.0 mm	Pup: 6.7 mm	WTW : 12.8 mm	Pup: 9.0 mm				
Ix:+0.4mm Iy:-0.1mm	Pxi:+0.4mm Pz:+0.0mm	Ix:-0.5mm Iy:+0.3mm	Pxi:-0.3mm Pz:+0.2mm				

(* = value has been edited, † = borderline value)

Case 3:

- ▶ Slit Lamp Exam:
 - ▶ Cornea- subepithelial scar and stromal scar inferior
 - ▶ Iris dilates well
 - ▶ 1+ NSC OU, 1+ central PSC OS, 1+ posterior cortical OD
- ▶ DFE- wnl

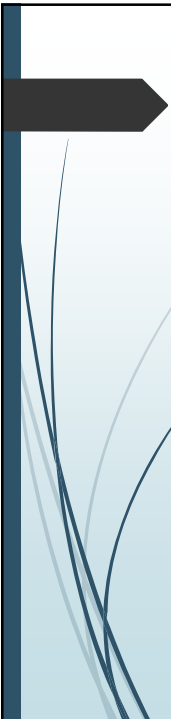
Case 3:

- ▶ Peri-operative management:
 - ▶ Increase famcyclovir to TID starting 2 days before surgery, continue 2 weeks, then back to baseline dose
 - ▶ Add PredForte 1% QID starting 2 days before surgery
 - ▶ Aggressive steroid use after surgery 8x/day x 1 week, then QID, follow regular taper, return to baseline dose at 6 weeks
- ▶ Intra-operative:
 - ▶ IV acyclovir (if available)
 - ▶ Minimize phaco energy (Femto if available)



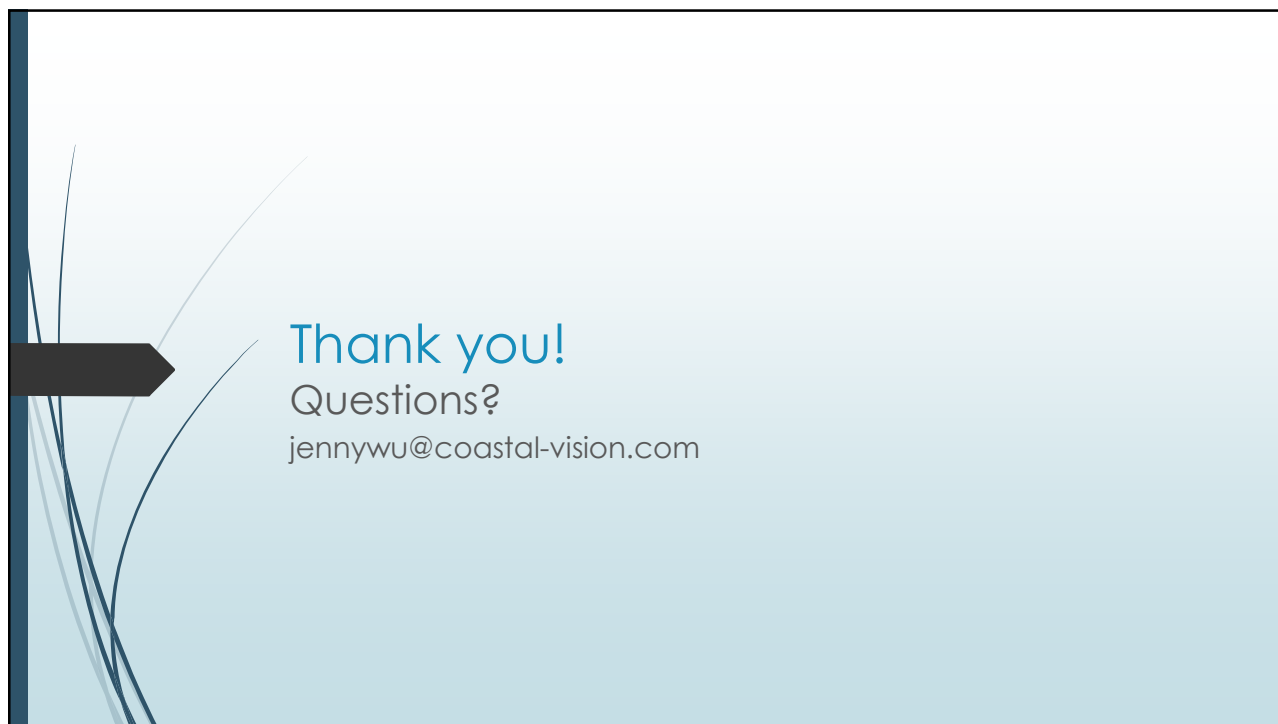
Corneal scars (eg HSV)

- Is the scar abutting the visual axis?
- Check topography
- Check endothelial cell count



Femto-laser assisted cataract surgery (FLACS) for compromised endothelium and cornea scars

- Lens fragmentation reduced phaco energy required
- Laser capsulorhexis aids in areas of poor corneal visibility due to scarring



Thank you!

Questions?

jennywu@coastal-vision.com

Jennifer Lee Wu, M.D.

Cornea, Cataract, and Refractive Specialist

Coastal Vision Orange
293 South Main Street, Suite 100
Orange, CA 92868

Telephone: (714)771-1213
Fax: (714) 771-7126
Email: jennywu@coastal-vision.com

Education:

- 2005 B.S. in Molecular, Cellular, Developmental Biology
 Yale College, New Haven, Connecticut
- 2009 M.D.
 Yale University School of Medicine, New Haven, Connecticut

Postdoctoral Training:

- 2009-10 Internship in Internal Medicine
 Yale New Haven Hospital, New Haven, Connecticut
- 2010-13 Residency in Ophthalmology
 Doheny Eye Institute/LAC-USC Medical Center, Los Angeles, California
- 2013-14 Clinical Fellowship in Cornea and External Disease
 Doheny Eye Institute/University of Southern California, Los Angeles, California

Board Certification:

- 2014 Diplomat, American Board of Ophthalmology

Medical Licensure:

- 2011 California
- 2014 Oklahoma

Academic Appointments:

- 2014- 16 Clinical Assistant Professor in Cornea and External Disease and Refractive
 Dean McGee Eye Institute, University of Oklahoma Health Sciences Center,
 Oklahoma City, Oklahoma
- 2013-14 Clinical Instructor in Ophthalmology
 Keck Medical Center at University of Southern California, Los Angeles,
 California

Private Practice:

- 2016-Present Coastal Vision Medical

Teaching Experience:

- Teaching medical students, residents, and fellows in the eye clinic and operating room
- Presenting lectures on cornea and external disease to ophthalmology residents

Mentoring Experience:

- Mentoring multiple medical students and residents in clinical research project design and manuscript preparation resulting in publications and conference presentations
- Participating faculty mentor for American Medical Women's Association at University of Oklahoma– role model for female medical students and undergraduate pre-medical students

Honors and Awards:

- 2005 Edgar Boell Prize, Yale College
Awarded best senior thesis in the Health Sciences
- 2009 Farr Research Scholar, Yale University School of Medicine
Awarded honors medical thesis
- 2012 ARVO National Eye Institute Travel Grant, National Eye Institute
Awarded grant for outstanding research abstract
- 2012 Henry & Lilian Nesburn Award, Henry & Lilian Nesburn Foundation
Awarded best resident research manuscript
- 2013 Doheny Resident Research Award, Doheny Eye Institute
Awarded exceptional ARVO presentation

Peer Reviewed Publications:

Articles

1. Mckay T, Hjortdal J, Sejersen J, Asara J, **Wu JL** and Karamichos D. Endocrine and Inflammatory Factors in Keratoconus: Role of Hormones in the Stromal Microenvironment. *EMBO reports*. Accepted for publication April 2016.
2. Royer D, Gurung H, Jinkins J, Geltz J, **Wu JL**, Halford W, and Carr DJ. A Highly Efficacious HSV-1 Vaccine Blocks Viral Pathogenesis and Prevents Corneal Immunopathology Via Humoral. *Journal of Virology*. Accepted for publication March 2016.
3. **Lee JC**, Wang MY, Damodar D, Sadun AA, Sadda SR. Headache and whiteout vision as the presenting symptoms in a case of Takayasu Retinopathy. *Retinal Cases & Brief Reports*. 2014; 8(4):273-275.
4. **Lee JC**, Chiu G, Bach D, Irvine J, Heur JM. Functional and visual improvement of the Prosthetic Replacement of the Ocular Surface Ecosystem (PROSE) for irregular astigmatism. *Cornea*. 2013; 32(12):1540-1543.
5. **Lee JC**, Wong B, Srinivas S, Sadda SR, Huang D, Fawzi, AA. Doppler Fourier-domain optical coherence tomography measurement of the effect of panretinal photocoagulation on retinal blood flow in poorly controlled diabetic proliferative diabetic retinopathy. *Invest Ophthalmol Vis Sci*. 2013; 54(9):6104-6111.

6. Khine, K, **Lee, JC**, Hwang, J, Francis, BA, Boyer, DS. Methyl-Sulfonyl-Methane (MSM)-Induced Acute Angle Closure. *Journal of Glaucoma*. 2013; November 14. (Epub ahead of print)
7. **Lee JC** and Shields MB. Horizontal Deviation of Retinal Nerve Fiber Layer Peak Thickness with Stratus Optical Coherence Tomography in Glaucoma Patients and Glaucoma Suspects. *Journal of Glaucoma*. 2010; 19:299-303.
8. **Lee JC**, Prado HS, Diniz JB, Miguel EC, Leckman JF, Rosario MC. Perfectionism and Sensory Phenomena: Possible Phenotypic Components of Obsessive-Compulsive Disorder. *Comprehensive Psychiatry*. 2009; 50:431-436.
9. **Lee JC** and Salchow DJ. Myelinated retinal nerve fibers associated with hyperopia and amblyopia. *Journal of AAPOS*. 2008; 12: 418-419.
10. Prado HS, Rosario MC, **Lee JC**, Hounie AG, Shavitt RG, Miguel EC. Sensory Phenomena in Obsessive-Compulsive Disorder and Tic Disorders: a review of the literature. *CNS Spectrums*. 2008; 13: 425-432.

Presentations:

1. ARVO 2016, Seattle, Washington
2. ARVO 2013, Fort Lauderdale, Florida
3. ARVO 2012, Fort Lauderdale, Florida
4. Yale Medical School Student Research Day 2009, New Haven, Connecticut

Professional Memberships:

American Academy of Ophthalmology (AAO)
 Association for Research in Vision and Ophthalmology (ARVO)
 Cornea Society
 American Society of Cataract and Refractive Surgery (ASCRS)
 Oklahoma Academy of Ophthalmology (OAO)

Languages:

- Fluent in Spanish (Spoken)
- Fluent in Chinese (Mandarin) (Spoken)

Community Service:

Volunteer Alumni Interviewer for Yale College Admissions