

The Dean A.

# McGee Eye Institute

Vision Care



Research



Education



Community

## President's Perspective

Summer, 2000

## “CHEESE” AND THE TENSION OF OPPOSITES

Many of you have read what is frequently referred to as “The Cheese Book” – enough of you so that it sat (and still sits) at the top of the New York Times bestseller list. Major corporations require their employees to read it. The book is actually entitled *Who Moved My Cheese?* and tells the story of two mice and two “littlepeople” in search of cheese. Basically, it is a parable about the difficulty of accommodating to change.

Like so many other Americans I read the book, hoping to learn something to further advance the Dean McGee Eye Institute (DMEI) in patient care, research, and teaching. Health care has been called the fastest evolving segment of American business. Molecular biology and molecular genetics have generated an absolute biomedical revolution. Advances in patient care stress our ability to train residents and medical students in a field where knowledge doubles in less than three years. I've got plenty of opportunity for change.

Yet, what the book did not address for me is the hardest process of all – how to remain committed to principles held sacred when an obvious change will produce “cheese”, but at the risk of damage to those principles. Cheese in that book is generally defined in terms of tangible things – money, job security, promotion, profit, and market share. In the for-profit business world, business objectives are generally synonymous with those things. In the not-for-profit world they are different.

What is at risk for us in always searching for the “cheese”? Our professionalism.

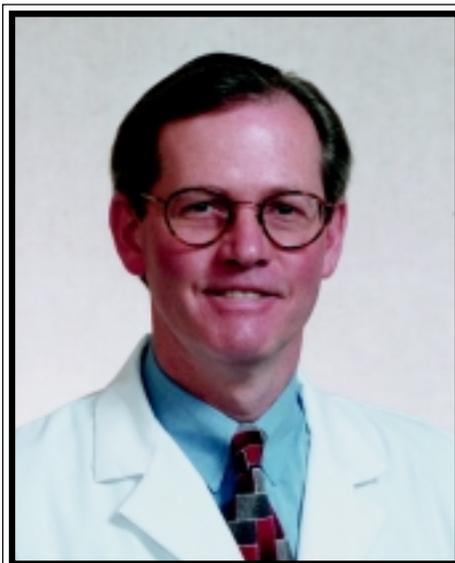
For example, if financial “cheese” was our primary motivation, DMEI could change to serve only those patients who paid us the most for our service and to provide only those services that paid best. Some might applaud us for being “smart” in an era when physician reimbursements are going down and some of this nation's most prestigious physician groups are filing bankruptcy. We could also in essence “fee split” with referral sources, thus encouraging them to send more surgery our way.

However, we chose to enter the profession of medicine, not the business of medicine. What we must strive for is to change in advance of or in response to our environment without betraying our profession, our organization's mission, or our basic principles of patient care.

What distinguishes a professional from a nonprofessional? Professions emerged from the European guilds of the Middle Ages. To define a profession and professionalism requires much more space than I have here.

However, common themes include honor and integrity, altruism, accountability and self-governance, and a responsibility to advance and transmit a socially valuable body of complex knowledge. It says nothing about advertising your services at movie theaters to attract patients. (My good friend Hal Balyeat is fond of saying, “There must be a special place in hell for physicians who advertise!”)

*David W. Parke II, M.D. is President and CEO of the McGee Eye Institute. He also is Edward L. Gaylord Professor and Chairman of the Department of Ophthalmology at the University of Oklahoma College of Medicine.*



Continued on page 6

# FROM ‘PINK EYE’ TO AIDS:

## INNOVATIVE APPROACHES TO VIRAL INFECTIONS AND THE EYE

Viruses have plagued mankind from the dawn of creation. In modern society, one only has to open the newspaper to realize the significance of virus infections and the tragedy they bring to the human population as represented by viruses as diverse as flu, herpes virus, human immunodeficiency virus (HIV) and Ebola virus. Although these viruses are primarily blood-borne microbes, viruses infect virtually any anatomical area of the body including the eyes.

Some of the more common viral pathogens (viruses causing disease) to infect the eye include adenoviruses and herpes viruses. Ocular adenovirus infections result in conjunctivitis that can lead to chronic damage to the normally clear cornea (covering the front of the eye like a watch crystal).

Likewise, herpes virus infections can lead to chronic corneal damage or to retinal inflammation. In the cornea this may lead to corneal transplantation. In the retina this can lead to retinal detachment and blindness. The damage may be caused by the initial, acute infection or by the reactivation of virus lying dormant within tissue (so-called recrudescence of latent virus).

The economic and human impact of these diseases is staggering. Similar to other infectious pathogens, new treatment regimens applying innovative techniques and drug design are needed to adequately address the continually evolving viral microbes.

Researchers at the Dean McGee Eye Institute are addressing this very important issue of infectious eye disease using a variety of novel approaches. One recent addition to the Institute is Daniel J.J. Carr, Ph.D., who was recruited to Oklahoma from the LSU Health Sciences Center in New Orleans. Dr. Carr’s work focuses on herpes simplex virus type 1 (HSV-1), the leading cause of infectious corneal blindness in

the industrialized world. “HSV-1 is one of the most successful human pathogens to date infecting 60-90% of the worldwide adult population with nearly 300,000 new cases of ocular HSV-1 diagnosed each year,” notes Carr. Although anti-viral drugs have been used

in controlling the progression of the disease, they neither inhibit the establishment of viral latency nor interfere with recrudescence of the virus. Likewise, drug-resistant HSV-1 mutants have developed increasing the necessity for finding new treatment protocols for this group of viruses.

The medical science community has recently begun to study gene therapy to treat diseases including cancer, malaria, HIV, and cystic fibrosis. A

form of gene therapy has been developed by Carr’s group using genes encoded by the body which stimulate the immune system to ward off virus infections through the production of chemical mediators known as “cytokines”. “The use of cytokine gene therapy to attack the virus has its advantage in that you are using a natural anti-viral product to facilitate viral clearance in the microenvironment of the eye,” suggests Dr. Carr. “The approach is quite simple,” explains Carr. “Essentially, you drop a solution containing DNA encoding the cytokine of interest into the infected eye. The DNA is taken up by replicating or activated cells and the gene is expressed,” Dr. Carr adds. Upon expression of the gene, the product is secreted and acts on virally-infected cells blocking the multiplication and spread of the virus. This approach is likely to have widespread application in the US and other industrialized nations as well as third world countries due to the ease of application and the low cost of generating the DNA.

In addition to cytokine gene therapy, Dr. Carr’s



*Researchers at the Dean McGee Eye Institute focus on novel treatment regimens for infectious eye disease. Dr. Dan Carr is assessing a unique “gene therapy” approach to control viral infections in the eye.*



*Viral Infections, continued from page 2*

group is characterizing the immune response to reactivation of HSV-1. Upon primary infection in the eye, the virus quickly replicates and is transported back to a nerve ganglion where the virus escapes detection by the immune system and goes into a state referred to as "latency." Through environmental cues not fully understood, the latent virus can reactivate and travel back to the eye resulting in severe inflammation that upon repeated episodes can lead to blindness.

Carr's laboratory is characterizing the immune response to the infection and the role specific white blood cell subpopulations play in controlling the reactivation of the virus. "By characterizing the processes associated with virus reactivation at the cellular and molecular level it will be possible to develop strategies to prevent such events from occurring," states Carr. As a start, his lab has identified one key component, interleukin-6, as a cytokine that can control acute infection but may be used paradoxically by the virus to promote reactivation.

Dr. Carr credits much of his success to his hardworking, innovative team. "I have a very creative group of folks who adhere to the philosophy best forwarded by Eleanor Roosevelt – The future belongs to those who believe in the beauty of their dreams," says Carr. Likewise, Dean McGee colleagues including Jim Chodosh, M.D. and David Parke, M.D. provide additional insight from a clinical perspective that adds to the flavor of the approach.

The lab is currently funded by grants from the National Eye Institute (NEI), part of the National Institutes of Health and DMEI. Recently, Dr. Carr was awarded a Jules and Doris Stein Professorship and equipment grant by Research to Prevent Blindness (RPB). His research interfaces several disciplines including Immunology, Virology, and Neuroscience at the cellular and molecular levels using tools and approaches that are quite expensive. "It's important to have this financial backing such that our approach can be properly applied to rodent and non-human primates prior to human clinical trials," adds Dr. Carr. The rapid pace of scientific exploration in infectious ocular diseases continues exponentially and Carr's laboratory is positioned at the cutting edge of discovery thanks to the support of the NEI, RPB, and DMEI.



## LEGACY OF SIGHT A "GIFT-OF-HONOR"

*In 1937 Helen Keller stated, "If one-tenth of the money we spend to support unnecessary blindness were spent to prevent it, society would be the gainer in terms of cold economy, not to mention considerations of the happiness of humanity."*

Honoring a loved one through a charitable gift to the Dean McGee Eye Institute Foundation has long been an important tradition for many people. Making a gift in honor of family and friends on occasions such as Mother's Day or Father's Day; the birth of a child or grandchild; or on a birthday, wedding anniversary, or other notable occasion can be gifts of love that show how much you care. Memorial and tribute gifts allow you to thoughtfully remember family members and friends who have been such a vital part of your life.

The attached self-addressed stamped envelope has been included to provide you with an easy way to make a gift to the Dean McGee Eye Institute Foundation in honor or memory of a family member or friend. Just fill in the information on the envelope instructing us regarding the use of your gift and whom we should notify of your Gift-of-Honor.

If you would like for us to send you a packet of additional envelopes, please call:

Richard R. Linn, Jr.  
Vice President for Development  
Dean McGee Eye Institute Foundation  
608 Stanton L. Young Blvd.  
Oklahoma City, OK 73104  
(405) 271-7801



*The Dean McGee Eye Institute*

## DMEI FACULTY PROFILE:

### SCOTT C. SIGLER, M.D.

Committed to excellence in patient care and education, Dr. Scott Sigler has been here only 4 years but has become a vital part of the Institute. He specializes in Ophthalmic Plastics and Reconstructive Surgery as well as Ophthalmic Pathology. In other words, he takes care of patients with droopy eyelids, eyelids in the wrong position, broken bones around the eyes, tumors around or in the eye, tear ducts that are blocked, and various other problems. He also is a trained cosmetic facial plastic surgeon, specializing in the eyelids and midface. Dr. Sigler's reputation for handling even the most challenging cases quickly and through very small incisions has grown his practice to the point he is now searching for an associate.



*Scott C. Sigler, M.D.*

As an ophthalmic pathologist, Dr. Sigler also analyzes and interprets microscopic slides of specimens from the eye, orbit and face removed at surgery. In the state of Oklahoma, there are only 2 fellowship-trained ophthalmic pathologists and both are here at Dean McGee: Dr. Sigler and Dr. Robert Shaver. As such, they are sent slides to interpret of unusual cases from all over Oklahoma and surrounding regions. As one of the few ophthalmic plastic surgeons throughout the nation who is a pathologist, he can bring the skills of a pathologist to his tumor and orbital surgery. "When tissue is removed at surgery, I read my own slides and can determine for myself whether all the tumor is removed," states Dr. Sigler.

However, Dr. Sigler's passion for the education of residents and medical students equals his passion for clinical work. "Teaching residents and medical students brings me the most joy in my job. Helping them become the best physicians they can be is important to me. I feel they need to be well rounded and balanced in every aspect of their life to be successful. It is my job to teach by example. The faculty here is devoted to helping them become highly skilled, compassionate ophthalmologists who are devoted to the highest ethical care."

Dr. Sigler is Director of the Residency Training Program and has overall responsibility for the training

curriculum, selection of residents, and resident evaluation. "Departments of Ophthalmology around the country would kill for a teacher like Scott Sigler," said Dr. Parke. "He is a committed advocate for his residents but he demands excellence from them – and he gets it. Every year since Scott took over the training program, resident performance on national exams has increased."

Dr. Sigler lectures in plastics and teaches at the VA hospital on a weekly basis. He also has weekly pathology conferences with the residents in his office with a 5 head-teaching microscope provided by Oklahoma Natural Gas in 1997. His door is always open for the residents to stop by and discuss issues regarding ophthalmology and life.

A graduate of the University of Texas at Austin where he served as the President of the Longhorn Marching Band, Sigler was named one of 18 Outstanding Students by the Texas yearbook, The Cactus. He attended The University of Texas Medical School in San Antonio where he met his wife Kala. "She was the first person I met the first day of medical school. I am surprised I got any studying done," stated Sigler. Sigler graduated in 1990, receiving the Dean's Award for Clinical Excellence and selected for the medical school honor society, Alpha Omega Alpha. He then completed his residency in ophthalmology at Washington University in St. Louis. After residency, Sigler then completed 2 fellowships; one in ophthalmic pathology at Washington University and one in Ophthalmic Plastics and Reconstructive Surgery at the University of Oregon. He joined the staff of Dean McGee and The University of Oklahoma in July of 1996.

As Director of Residency Training, Dr. Sigler reinstated Journal Club meetings for residents, faculty, and community ophthalmologists to discuss current literature. He also started a Visiting Professor program where nationally acclaimed ophthalmologists are invited to lecture and visit the Eye Institute. Sigler was awarded the Edward and Thelma Gaylord Faculty Honor Award in 1999. He is the secretary-treasurer for the University of Oklahoma chapter of the medical school honor society, Alpha Omega Alpha and serves on the Graduate Medical Education Committee as well as the Clinical Sciences Curriculum Committee for the University. He

*Continued on page 7*

# NEW BEGINNINGS

Each year the first week of July brings with it a celebration of our nation's independence. Who among us does not enjoy partaking of the festivities that recognize a time in our history of new beginnings.

It's also around this time that we at Dean McGee Eye Institute and the University of Oklahoma's Department of Ophthalmology celebrate the graduation of our Senior Class. While we are wishing them the very best in their careers we also turn to welcome our three new first year residents. It is a time of new beginnings for all.

Help us congratulate our graduating Class of 2000 as they enter the next phase of their Ophthalmic careers. Let's take a look at where they're going: **Alan A. Norman, M.D.** has accepted a Pediatric Ophthalmology fellowship at Washington University in St. Louis, MO. **W. Jay Peters II, M.D.** will be joining Ann A. Warn, M.D. at DMEI's Lawton, OK office in comprehensive ophthalmology. **Gemini J. Bogie, M.D.** will offer comprehensive ophthalmology at DMEI's Northwest office. We wish all of you the very best!

Here are the newest members of our team: **Aaron C. Fortney, M.D.** graduated with honors from the University of North Dakota, School of Medicine. Dr. Fortney has served as Class President, was elected to Alpha Omega Alpha Medical Honor Society, and participated in clinical research projects. **Scott A. Murphy, M.D.** graduated *summa cum laude* from the University of Notre Dame and earned his M.D. from the University of Missouri-Columbia, School of Medicine. Upon obtaining the Flo Dickey Funk Research Fellowship he worked under Dr. Krishna Sharma in the study of lens crystallins. **Christina M. Tran, M.D.** comes to us from The University of Kansas, School of Medicine-Wichita. She graduated with numerous honors and awards and was elected to Alpha Omega Alpha Medical Honor Society. She also participated in research investigating photoactivation leading to cross-linked collagen,



*1999-2000 DMEI Residents: Front Row (L to R) Drs. A. Norman, G. Bogie, and J. Peters. Back Row (L to R) Drs. L. Trigler, D. Haivala, D. Parke II, CEO of DMEI and Chairman of the Department, S. Sigler, Director of Residency Training Program and Assistant Professor, A. Nasrullah, and F. Drowota.*

enabling sutureless wound closure.

*Clinical Fellows:* The Dean McGee Eye Institute accepts up to four clinical fellows annually following completion of their residencies. These young ophthalmologists pursue one to two years of additional subspecialty training. **Dr. Ranjan Malhotra** has completed a one year fellowship in Cornea and Refractive Surgery with Drs. James Chodosh, Rhea Siatkowski, and Tom Wolf. Dr. Malhotra will be returning home to the St. Louis area. Next year's fellow will be **Dr. Rainna Bahadur** from the University of Mississippi. Dr. Gregory Skuta was pleased to announce that **Dr. Adam Reynolds** will remain at DMEI as a member of the Glaucoma Service after completion of his fellowship. Next year's fellow comes to us *summa cum laude* from Upsala College and the New Jersey Medical School. While serving as Chief Resident, **William Walton II, M.D.** received the Alphonse A. Cinotti Award for academic and professional excellence. **Katherine Cuite, M.D.** completed an oculoplastic and reconstructive surgery fellowship with Drs. Lloyd Hildebrand, Scott Sigler, and Robert Small. She will be entering practice in Illinois.

## OPHTHALMOLOGISTS RECRUITED TO JOIN DMEI STAFF

Four new ophthalmologists join the Dean McGee Eye Institute this summer, each bringing specific new talents and capabilities. “Given the Institute’s reputation, we had multiple qualified candidates for each position,” said Dr. David W. Parke II, President and CEO. “We were able to match physician talents and interests with our specific needs in patient care, clinical research, and resident education.”

New medical staff members include:

**Glaucoma specialist Adam Reynolds, M.D.** will be joining the faculty at the Institute's main clinic location on the campus of the Oklahoma Health Center. An honors graduate of the University of Washington School of Medicine, Reynolds completed his residency in ophthalmology at UW and his glaucoma fellowship at the Dean McGee Eye Institute. “Not only is Adam an outstanding surgeon, but he has a very warm and caring way about him,” noted Dr. Greg Skuta, DMEI glaucoma subspecialist. “He also has a strong interest in clinical research, having already published numerous scientific papers in this area”.

**Walter J. (Jay) Peters, M.D.** will be joining DMEI’s Lawton clinic, working with Dr. Ann A. Warn in a soon-to-be-completed expanded office. A graduate of the University of Oklahoma College of Medicine at Tulsa and a recent graduate of the residency training program at DMEI, Dr. Peters has an outstanding academic record, plus a history of extensive community service. Formerly a nurse technician and nursing assistant in pediatrics at St. Francis Hospital in Tulsa, he has served as a medical counselor for children's camps specializing in diabetic and oncology patients and their siblings. He will be offering comprehensive medical and surgical ophthalmology in Lawton.

**Gemini J. Bogie, M.D.**, who also recently completed her residency in ophthalmology at DMEI, was recruited to join the staff of the Institute’s Northwest Oklahoma City clinic on N.W. 56th Street between Baptist and Deaconess hospitals. Dr. Bogie completed her medical degree at the OU College of Medicine, plus an internship in internal medicine, after earning her bachelor’s degree in chemical engineering at Oklahoma State University. She is a member of the Alpha Omega Alpha Medical

Honor Society, received the I.J. Moorman Award for ranking first academically in the OU Medical School Class of 1996, and earned several additional awards for academic excellence. Dr. Bogie will practice comprehensive medical and surgical ophthalmology.

**Deana Shackelford Watts, M.D.** will focus her practice on comprehensive ophthalmology as she joins the Oklahoma Health Center DMEI clinic. An Honors graduate of the OU College of Medicine, Watts completed her residency at the University of Texas Southwestern Medical School where she earned accolades not only as a clinician, but as a teacher. Prior to her DMEI appointment, she maintained a practice at the Brook Avenue Eye Center in Wichita Falls, Texas. A major portion of Dr. Watts’ time will be devoted to supervising resident outpatient clinic activities.

A warm welcome to all our new faculty!

---

*Perspective, continued from page 1*

How do we resolve this basic dilemma? As a profession we must be collegial but as a business we must compete. As a profession we must be altruistic, always mindful of our social contract with our community. As a business we must manage ourselves in such a way that we survive to do good work.

In Mitch Albom’s book *Tuesdays with Morrie* about his dying professor, his mentor speaks of “a tension of opposites”. We feel this tension.

The dilemma, the tension, is resolvable. We can remain true to our profession and still claim a piece of “cheese”. At the Dean McGee Eye Institute every decision must be scrutinized from one preeminent vantage – “Is it in the best interests of the individual patient?” If a patient needs an operation that they clearly cannot afford, we will provide it. If we can provide outstanding quality cosmetic eyelid surgery to those who want it, we will do so. If marketing that service makes it more successful and helps to fund care for our patients in need, we will do so – tastefully, honestly, and ethically. In so doing we can be open to change, follow the “cheese”, and retain our professionalism.

If we lose our professionalism, our patients lose their basis for trust. And that trust is at the core of our mission.

# A TEAM APPROACH TO PROVIDE CUTTING EDGE MEDICINE IN OKLAHOMA:

## FACIAL TRAUMA RECONSTRUCTION AND ORBITAL/INTRACRANIAL TUMOR REMOVAL

In March of this year, a complex, innovative surgery was performed in Oklahoma attempting to remove a large tumor from behind the eye that extended into the brain, yet preserve the eye, preserve vision, and prevent disfigurement. Usually when there is a large, malignant tumor behind the eye that is approaching the brain, the eye as well as the tissue around the eye are removed. This leaves the patient with just skin and scar tissue on that side and requires the use of a prosthetic eye and eyelids.

The patient was first seen at Dean McGee Eye Institute in 1990 with temporary loss of vision sometimes when she stood up. She was found to have a tumor behind the eye that wrapped around the optic nerve. It was felt that removing the tumor would result in loss of all vision. Treatments were performed to help control tumor growth but preserve vision. Finally the tumor grew enough to cause loss of vision, and doctors were concerned that it might grow back into the brain. The decision was made to remove the entire tumor. However, since the patient was young and did not want a disfiguring surgery, less traditional surgical approaches were considered and discussed with the patient. Could the tumor be removed safely and still allow the patient to keep her eye and therefore have a more cosmetically pleasing result?

A team of surgeons was put together to manage the various complex aspects of a surgical procedure which has been performed to a limited degree in a small number of medical centers. Dr. Stan Pelofsky, a neurosurgeon, provided the expertise to open the skull, displace part of the brain and expose the roof of the bony

orbit surrounding the eye. Dr. David Hunter, ENT/Facial Plastics, and DMEI's Dr. Scott Sigler, Ophthalmic Plastics and Reconstructive Surgery, exposed the tumor and removed it from behind the eye. Dr. Pelofsky removed the portion of the tumor extending toward the brain while Dr. Hunter and Dr. Sigler reconstructed the bones around the intact eye and eye muscles. All tumor was removed from behind the eye, and the eye moves and appears normal.



*Dr. Scott Sigler (DMEI) and Dr. David Hunter (ENT/Facial Plastics) are using titanium plates and screws to reconstruct bones around the eye after the tumor has been removed.*

Since this procedure, the team has performed three more surgeries

similar to this one. Doctors Sigler, Hunter and Pelofsky have now established a joint skull base surgical team to tackle similar complicated problems, resulting either from tumor or severe trauma to the orbit and brain. "It is really gratifying to be able to offer these people, many of whom are young, the possibility of removing the tumor tissue while leaving them with a good cosmetic appearance and perhaps even some vision," said Dr. Sigler.

*Dr. Sigler, continued from page 4*

recently designed a web site devoted to teaching ocular pathology to medical students and residents.

Dr. Sigler has been married 12 years to Kala Haiduk Sigler, M.D. who is a community pediatrician. They have been blessed with three children: 6-year-old Claire, 5-year-old Christian, and 18-month-old Catherine Grace. They are active members of Henderson Hills Baptist Church and Sigler is involved in the choir and prayer ministry.



## DMEI TELEPHONE DIRECTORY

### OKLAHOMA CITY

608 Stanton L. Young Boulevard

#### Cornea and Refractive Surgery

(405) 271-1095  
James Chodosh, M.D.  
Rhea L. Siatkowski, M.D.  
Thomas C. Wolf, M.D.

#### General Ophthalmology

(405) 271-1090  
Hal D. Balyeat, M.D.  
Cynthia A. Bradford, M.D.  
Robert P. Shaver, M.D.  
Deana S. Watts, M.D.

#### Glaucoma

(405) 271-1093  
Adam C. Reynolds, M.D.  
Gregory L. Skuta, M.D.

#### Low Vision

(405) 271-7834  
Rebecca K. Morgan, M.D.

#### Neuro-Ophthalmology

(405) 271-1091  
Bradley K. Farris, M.D.  
R. Michael Siatkowski, M.D.

#### Ocular Prosthetics

(405) 271-3391  
Nancy A. Townsend, B.C.O.

#### Oculoplastic Surgery

(405) 271-1096  
P. Lloyd Hildebrand, M.D.  
Scott C. Sigler, M.D.  
Robert G. Small, M.D.

#### Optical Services

**Spectacles, Low Vision Aids  
Contact Lenses**  
(405) 271-6174  
Sheree Lyons, A.B.O.C.  
Jean Ann Vickery, F.C.L.S.A.

#### Optometric Services

(405) 271-1090  
Dana M. Jones, O.D.

#### Pediatric Ophthalmology/ Strabismus

(405) 271-1094  
R. Michael Siatkowski, M.D.

#### Retina/Vitreous

(405) 271-1092  
Reagan H. Bradford, Jr., M.D.  
Stephen R. Fransen, M.D.  
Ronald M. Kingsley, M.D.  
Sumit K. Nanda, M.D.  
David W. Parke II, M.D.

#### Trauma/Emergency

(405) 271-6060

### EDMOND

301 S. Boulevard, Suite 119

#### General Ophthalmology Ophthalmic Surgery Contact Lens Services

(405) 348-0913

Diana H. Locher, M.D.  
Jeffrey T. Shaver, M.D.  
Jean Ann Vickery, F.C.L.S.A.

### LAWTON

3201 W. Gore Blvd., Ste. 105

#### General Ophthalmology Ophthalmic Surgery

(405) 250-5855

Walter J. Peters, Jr., M.D.  
Ann A. Warn, M.D.

### NORTHWEST OKC

3500 N.W. 56th, #101

#### General Ophthalmology Ophthalmic Surgery Contact Lens Services

(405) 271-9500

Gemini J. Bogie, M.D.  
Layne E. Goetzinger, M.D.  
Ralph B. Hester III, M.D.  
Mika M. Hague, N.C.L.C.

### MIDWEST CITY

8121 National Ave., #407

#### General Ophthalmology Ophthalmic Surgery Contact Lens Services

(405) 733-4545

Darrell J. Pickard, M.D.  
R. Randall Robinson, M.D.  
Wanda A. Fisher, N.C.L.C.

Visit our website at [www.dmei.org](http://www.dmei.org).

Dean A. McGee Eye Institute  
608 Stanton L. Young Boulevard  
Oklahoma City, Oklahoma 73104

**ADDRESS CORRECTION REQUESTED.**

NON-PROFIT ORG.  
U.S. POSTAGE  
**PAID**  
Oklahoma City, OK  
Permit No. 853