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As we approach the summer of 2004, I find myself taking note of two Wilmer-related anniversaries: July 1 marks the beginning of my third year at Wilmer, and more importantly, the beginning of the second year of Dr. Peter McDonnell’s tenure as director of the Institute.

I can not help but think of my own good fortune, to have had the opportunity to be Wilmer’s development director with both Dr. Goldberg and Dr. McDonnell. As if that were not enough, I have also had the honor of working with Dr. Arnall Patz, director emeritus. I have learned a great deal from each of these three directors, as has the entire Wilmer development staff. Indeed, we continually learn from them, and the rest of Wilmer’s dedicated faculty, about the exciting work taking place on a daily basis at Wilmer, whether it is the myriad of research programs to end blinding eye diseases, or perfecting ways to improve patient care.

They inspire us, and we, in turn, attempt to bring their message and the Institute’s mission (see below) to the attention of Wilmer’s many friends and grateful patients.

In order to effectively spread the word, however, it is most helpful to be fully staffed, and I have very good news on that front. I am delighted to introduce two new members of the Wilmer development staff: Dina Klicos, our senior associate director, joined us in late January, coming to Wilmer from the Brady Urological Institute at Johns Hopkins; Kim Morton, our new associate director, came on board in April, direct from her position at the New York Presbyterian Hospital in New York City. Along with Jean Meile, senior development program coordinator, and Doris Zendrian, development coordinator, we stand ready to help Dr. McDonnell and the entire Wilmer community raise the funds needed to maintain the standard of excellence that has become synonymous with the Wilmer Eye Institute. I hope you will accept our deepest thanks to each of you for your continued generous support.

Laurette L. Hankins
Director of Development

Wilmer’s Mission Statement

The mission of the Wilmer Eye Institute is to contribute to ophthalmic knowledge and to continue to reduce suffering from blindness and loss of vision at home and around the world, through leadership and excellence in research, education, and patient care.
“At the Wilmer Advisory Council meeting last fall,” recalls Arnall Patz, M.D., Wilmer director emeritus, “I had the great pleasure of sitting beside my old friend Virginia Ball at lunch. I had known Virginia and her late husband, Edmund Ball, for many years. They had been loyal and consistent contributors to the Institute and were dedicated members of the Advisory Council.

“I must say that Virginia was in great spirits at the meeting, greeting the other members warmly and, as I told her, looking just as I remembered her 15 years earlier. I was shocked to learn of her passing only a few weeks later, and like many Wilmer faculty members, mourned the loss of this inspiring and generous woman.”

A Connection with the Knights Templar

The close relationship between the Ball family and Wilmer dates back to the directorship of A. Edward Maumenee, M.D., who was Edmund Ball’s ophthalmologist. Edmund Ball was a leader in the Knights Templar Eye Foundation, Inc., and Dr. Maumenee served as an advisor to that Foundation. Virginia Ball later served on the Knights Templar advisory board after her husband’s death in 2000. “The Knights Templar was one of the first of the philanthropic organizations to focus on vision,” notes Dr. Patz.

“They were formed in 1956 with the motto ‘That Others May See,’ and put special emphasis on supporting ophthalmic research faculty. Wilmer received generous support from the Knights Templar during Dr. Maumenee’s time, and still does. It has been an important alliance for the Institute, and the Balls were central to it.”

A Special Regard for Wilmer

“The Balls had numerous philanthropic interests, but were quite proud of their ties to Wilmer,” notes Dr. Patz. “They helped link us to the Knights Templar, they served on the Wilmer Advisory Council, and they contributed consistently and generously to the Institute throughout my term as director.”

Then, during the directorship of Morton F. Goldberg, M.D., Mrs. Ball agreed, on the death of her husband, to contribute a professorship to the Institute, crowning their long history of dedication to Wilmer. “Mrs. Ball was one of the most versatile, charming, and intelligent people I have known,” relates Dr. Goldberg. “She was very interested in Wilmer activities, and during her numerous visits here impressed me with her knowledge of our research, clinical, and teaching efforts. She was fascinated by our programs, and stimulated us to live up to her and her husband’s appropriately high standards.”

Peter J. McDonnell, M.D., William Holland Wilmer Professor of Ophthalmology and Director of the Wilmer Eye Institute, had the pleasure of spending time with Mrs. Ball at the Wilmer Advisory Council meeting last fall. “Mrs. Ball told me I was the fourth Director of Wilmer that she had known and would consider a friend,” Dr. McDonnell recalls. “She proved to be a remarkably vibrant, gracious, and charismatic person, and her keen interest in Wilmer’s future and our young faculty was appreciated by all of us. Her memorial service in Muncie, just a few weeks later, was truly a celebration of a woman who had been determined to make the most of life, and to make a positive difference in the lives of others. We at Wilmer continue to be grateful for her support, and will always be inspired by her example.”

The Balls are survived by five children. *
Because of a significant shortage of space for its crucial care and research programs, the Wilmer Eye Institute plans to construct a new building on the Johns Hopkins Hospital campus, in close proximity to existing Wilmer facilities. The following is excerpted from an interview with Richard (Rick) A. Forsythe, Chairman of the Board and President of Forsythe Technology, who, with his wife Sandra (Sandy), has made substantial earlier gifts to Wilmer. Forsythe Technology, Inc. has recently committed $4 million for the new building.

*Sightline*

Your association with the Wilmer Eye Institute has been relatively brief. How did you form such a strong attachment to the Institute in so little time?

**Mr. Forsythe**

“Wilmer is a very special place. The people there have a certain esprit de corps and an enthusiasm for caring for people that’s hard to find anywhere else. It’s also very friendly. The first time I walked into the Institute, as a stranger—before I made any contributions—they treated me extremely well, as if anyone with a vision concern deserved the greatest kindness and care. I think they must treat everyone that way. You can’t help responding to that.”

*Sightline*

In what ways have you gotten to know the Institute since that introduction?

**Mr. Forsythe**

“I’ve been a patient, and had remarkable success in that regard. I’ve contributed to the Michael B. Panitch Fund to Stop Age-Related Macular Degeneration, and helped the Panitch Research Laboratory purchase some equipment. And I participate on the Wilmer Advisory Council, helping the Institute gain support for the new building. So I’ve gotten to know the Institute and its people rather well. I can tell you that there’s a culture there, a way of doing things that endures. When Mort Goldberg stepped down and Peter McDonnell became director, everything flowed smoothly, which speaks volumes for how well the place is organized and run.”

*Sightline*

Professionally, you are involved in advanced digital technologies. From what you’ve seen, how does the Institute measure up?

**Mr. Forsythe**

“It’s interesting. You might expect that a medical organization would be a little conservative, a little behind the times, when it comes to computer technologies. But Wilmer is state-of-the-art. They’re not afraid to go in new directions and find ways to do their jobs more effectively. A case in point is the system they use to move eye photographs around the department. It’s a critical function, but they’re using the latest technology to do it, and realizing efficiencies because of it.”

*Sightline*

Do you expect the same approach in the new Wilmer building you are helping to support?

**Mr. Forsythe**

“There are two parts to that answer. “First, I expect that the Wilmer culture I mentioned will extend to the new building. That’s got to be there or the technology means nothing. When you get an eye photograph taken or some other work done, you want that same sense you get now at Wilmer—that the person doing the job wrote the procedure on how to do it, and has been doing it here for 15 years with the
same enthusiasm and care as when he or she started. Not just the famous doctors, residents and fellows, but the technicians, nurses, photographers and receptionists, everyone must have the Wilmer spirit.

“Second, I expect that Wilmer will not just use the most advanced technologies available, but will get involved in developing those technologies. That’s what should happen in the new building.”

Sightline

Can you be more specific?

Mr. Forsythe

“Yes. Take Walter Stark, the person you’d most want on your side in a difficult cataract surgery. It’s wonderful that he and his associates travel to parts of India where cataracts still blind people, and do that work for free. But how many more surgeries could a Dr. Stark do if he didn’t have to spend his time in a plane? That’s how Wilmer needs to think in its new building. With telecommunications and robotics developed and refined here, Wilmer doctors could direct and even perform surgeries in India or Australia, without leaving the new building. Supporting the new building is in part a bid to make this sort of thing happen—to get these wonderful Wilmer experts in front of more people with eye problems.”

Sightline

So, in the end, helping people is what motivates you to contribute?

Mr. Forsythe

“Are you sighted? You face a harsh reality when you have a serious vision problem. You learn that everything you do in life needs vision. So what do you do if you can’t see? I’m fortunate to be able to get to Wilmer. But since I know what an eye disease can do, I don’t want to see anyone else suffer from it. So I try to help those fighting eye diseases—the good people at Wilmer—reach those who have the diseases. The new Wilmer building will do that.”

Wilmer Doctors Comment on the Forsythe Commitment

Morton F. Goldberg, M.D
Joseph E. Green Professor of Ophthalmology
Former Director, Wilmer Eye Institute

“In the relatively short time that I’ve had the pleasure of knowing him, Rick Forsythe has become a good friend and advisor to me and the Institute, in addition to being a patient who has had, in the words of a West Coast expert in macular degeneration, ‘a miraculous response’ to multiple treatments at Wilmer.

“The Forsythe commitment will permit, together with similar gifts, groundbreaking for a new Wilmer building, with new space for macular degeneration research as well as clinical and research space for other eye diseases. We are counting on generous friends like Rick Forsythe to help us make the new building a reality and enable us to accelerate our battle against macular degeneration and other blinding diseases.”

James T. Handa, M.D.
Associate Professor of Ophthalmology
Wilmer Eye Institute

“The results of Mr. Forsythe’s earlier gifts to the Panitch Lab may tell us what to expect from the new building. The polymerase chain reaction system he enabled us to purchase has rapidly led to three publications by the Panitch lab and expedited our work by an entire year. Philanthropy accelerates your programs, lets you get more out of them sooner. Now, apply that power through an entire building.”

Peter J. McDonnell, M.D.
William Holland Wilmer Professor of Ophthalmology
Director, Wilmer Eye Institute

“Rick and Sandy Forsythe’s insight is that, for us ultimately to prevent and control diseases like macular degeneration, we need our clinicians, laboratory scientists, geneticists, epidemiologists, clinical trials specialists, and surgeons working shoulder-to-shoulder, each contributing ideas and abilities. By helping to make sure our Wilmer faculty are free to use their own energy and creativity, and interact easily and effectively—not separated across the Hopkins campus or limited by space and other resources—the Forsythe leadership commitment will accelerate our progress and serve as a catalyst to help make the most of our faculty’s talents. On a personal level, it will inspire all of us who work at Wilmer.”
The prestigious Jonas S. Friedenwald Award for 2004 was presented by the Association for Research in Vision and Ophthalmology to Harry A. Quigley, M.D., the A. Edward Maumenee Professor of Ophthalmology and the Director of the Wilmer Glaucoma Service and the Dana Center for Preventive Ophthalmology. When he presented his Friedenwald Lecture, entitled “Glaucoma: Macrocosm to Microcosm,” at the Association’s annual convention in April, Dr. Quigley was acutely aware of the significance of the event, for the Wilmer Eye Institute and for himself.

Honoring a Wilmer Legend

“The connections between the Wilmer Eye Institute and Dr. Friedenwald are many and strong,” Dr. Quigley explains. “Dr. Friedenwald practiced at Wilmer from 1925 until his death in 1955, and was legendary for doing research in an incredibly wide variety of areas. He was clearly a much broader human being than any of us could imagine being today—mathematician, physicist, chemist—true polymath.

“Dr. Edward Maumenee once said that one of the main reasons he accepted the Wilmer directorship was that Jonas Friedenwald would be the jewel around which he would create a research capability for the Institute. Sadly, Dr. Friedenwald died within a year of Ed’s coming. The Association created the Friedenwald Award in 1986 to, in the Association’s words, ‘honor the outstanding research of senior scientists in the basic or clinical sciences as applied to ophthalmology.’ We were all pleased that Dr. Friedenwald would be memorialized in this way.”

The Leonard Wagner Trust, through its trustee, Paul Eichler, has become an important source of support for leading edge glaucoma research performed by Harry A. Quigley, M.D. and his laboratory. The Trust provides funds for innovative studies in optic nerve restoration so that data may be developed to secure National Institutes of Health grants for further work.

“Leonard Wagner, who died in 1991 at the age of 99, was a highly successful Wall Street financier who left his trustees substantial discretion in executing his trust,” states Mr. Eichler. “Mr. Wagner had a strong interest in medicine, and a great friend of his lost her sight because of glaucoma and other vision problems. Those facts, combined with my own interest in finding help for a family member, and the recommendation of knowledgeable advisors, connected me with Dr. Quigley and his work. I was immediately fascinated with him as an individual, with his devotion to research, and with the fact that millions of people could be helped starting with a relatively small amount of money.”

Mr. Eichler concludes, “Dr. Quigley is brilliant, but he finds time to talk and can explain complicated topics in layman’s terms. When you meet someone so devoted, you want to help. I can tell you this: the reports I get from him each year on his work, those are days that have real highlights for me. To help him through the Wagner Trust, that’s a marvelous feeling. I immediately share his reports with friends. I say ’Look! Look!’ I feel that I have made a wise choice.”
A Personal Perspective

Since 1986, four Wilmer faculty members have received the Friedenwald Award: Arnall Patz, M.D., Wilmer director emeritus; Arthur M. Silverstein, M.D. (a renowned specialist in ocular immunology, now retired); Mark O. M. Tso, M.D., Sc.D. (an expert on the apoptosis of photoreceptor cells); and this year Dr. Quigley. “Delivering the Friedenwald Lecture,” he notes, “one can only feel a strong sense of heritage, of belonging to a great tradition. In my case there was also a strong personal connection. Jonas Friedenwald was a glaucoma specialist and pathologist, and I identify with him very strongly. He has been my personal hero for many years—the person I’d most like to be when I grow up.”

Dr. Quigley specifically cites Dr. Friedenwald’s championing of “clinical-pathological correlation” as an approach that has yielded important results in Dr. Quigley’s own work.

“Today we understand glaucoma as a set of diseases of the optic nerve,” Dr. Quigley states, “and that understanding comes from going back and forth between viewing the diseased optic nerve as a tissue sample under the microscope and looking at it in the living eye. This lab-to-clinic connection was a strong point of Jonas Friedenwald’s work, what he called ‘clinical-pathological correlation.’ It became Ed Maumenee’s favorite way to approach things, and Dick Green (W. Richard Green, M.D., the Odd Fellows and Rebekahs Professor of Ophthalmology), our excellent and distinguished pathologist, has followed through with that approach. I learned it from those two, and it remains crucial to my work. But it all came from Jonas Friedenwald. We all owe so much to that man.”

Major Aspects of Dr. Quigley’s Glaucoma Research

Asked to cite his principal contributions to glaucoma research, Dr. Quigley offers the following (greatly simplified) summaries:

1) Defining glaucoma as a disease of the optic nerve, not as a disease of high eye pressure.

2) Defining the prevalence of glaucoma as the second leading cause of blindness worldwide, and defining the shocking under-diagnosis of the disease—with 50% of cases undetected in the U.S. and 95% undetected worldwide.

3) Defining the risk factors for glaucoma, including genetics, high blood pressure (though in complex ways), and ethnicity—and excluding diabetes.

4) Defining the molecular dynamics of the disease as involving the disruption of the healthy transport of neurotrophins from the brain back to the cells of the optic nerve, and the resulting apoptosis (or “suicide”) of those cells over time. *
The Lions Low Vision Center at Wilmer: A Powerful Partnership

There are presently some 120 people in the Maryland-Delaware-Washington, D.C. area who identify themselves as Arnall Patz Fellows. They are not young Wilmer researchers or clinicians, and most have never met Dr. Patz or been Wilmer patients. Yet they have each contributed in his name to Lions Vision 2000, the Lions’ capital campaign to endow the Lions Low Vision Center in perpetuity at Wilmer. The endowment now totals nearly $3.3 million toward its $4 million goal.

Why have they become Arnall Patz Fellows? In the mid-1980s, Dr. Patz, then Wilmer director, forged a link between Wilmer and the Lions, harnessing and focusing the Lions’ commitment to the preservation of sight. With the consent of the Lions International headquarters in Illinois, and working with the Council of Governors for Lions Multiple District 22 (which represents the areas defined above), Dr. Patz helped to establish the Lions Vision Research Foundation, Inc., and to create the Lions Low Vision Center at Wilmer.

A Model for Low Vision Rehabilitation

Recounts John Shwed, general chairman of the Lions capital campaign (and mayor of Laurel, Delaware), “Before Dr. Patz brought the Lions and Wilmer together, there was no organization in the U.S. that was dedicated to low vision, meaning uncorrectable vision loss. Low vision has no cure and affects some five million Americans and 25 million people around the world. A leading cause of low vision is age-related macular degeneration.”

The Lions Low Vision Center at Wilmer pursues research, education, and patient care. Perhaps most widely known for its development of the innovative Low Vision Enhancement System (designed by Wilmer’s Robert Massof, Ph.D.), the Center evaluates patients’ low vision status, rehabilitates patients in daily living skills and the use of low vision aids, and coordinates with care providers in the community, schools, and the workplace to foster programs and conditions favorable to those with low vision. While most patients come from Maryland, Delaware, and the District of Columbia, many others come from other states and foreign countries. More than 10,000 people have been evaluated at the Center, which is considered a model for the more than 50 low vision centers now found throughout the world.

A Rallying Point for Low Vision

Each year, Lions Multiple District 22 holds a rally at Johns Hopkins to celebrate the work of the Lions Low Vision Center and spur guests to contribute to the Center’s activities. Noted author Tom Clancy has served as Honorary Chairman at the rallies for several years, and the Institute greatly appreciates his help in making these events a success. (The Institute also congratulates Mr. Clancy and his wife Alexandra Llewellyn on the recent birth of their baby.) This year’s rally raised more than $35,000, and former Wilmer Director Morton F. Goldberg, M.D. received the Arnall Patz Fellow award.

“All Lions,” states Mr. Shwed, “take pride in their association with the Wilmer Eye Institute. Our current capital campaign will ensure that the wonderful relationship between Wilmer and the Lions lasts forever, and that low vision patients will always have a place where they can receive the very best in care.”

Walter J. Stark, M.D. Honored for Life Achievement

The American Academy of Ophthalmology presented its Life Achievement Award for 2003 to Walter J. Stark, M.D., the Walter J. Stark Distinguished Professor of Ophthalmology and the Director of Wilmer’s Corneal and Cataract Service. The award recognizes Dr. Stark’s contributions to the Academy, to its scientific and educational programs, and to ophthalmology. Dr. Stark has for many years served the Academy by making important presentations, presiding over symposia, and directing courses. Among the nine others so honored in 2003 was Ronald E. Smith, M.D., Wilmer alumnus and chairman of ophthalmology at the University of Southern California.
The stereotype of the oblivious and potentially dangerous older driver is quite familiar to Sheila West, Ph.D., the El-Maghraby Professor of Preventive Ophthalmology at Wilmer. Dr. West and her laboratory associates have worked in the Salisbury, Maryland area for many years, studying the vision and eye diseases of older people on the state’s Eastern Shore. One of her current projects is a new technology that may help to improve older drivers’ abilities—and lay that stereotype to rest.

**Introducing the Driving Monitor System**

“Many people think of the older driver as someone who inches along for miles with a turn signal on, someone who ought to be taken off the road,” explains Dr. West. “And the fact is, the older people we study become more fearful of driving, less independent, and less willing to participate in many aspects of everyday living. So we’re looking for ways to improve their ability to drive safely and maintain their independence and quality of life.”

Dr. West approached colleagues in the Johns Hopkins Department of Neuropsychiatry and the Johns Hopkins Applied Physics Laboratory for collaboration. “We had found that there’s no solid data on how older people drive. There’s good data on crash risk, accidents, and violations from the Motor Vehicle Administration. But we wanted objective data on actual driving, so we put together a team to build a new technology and provide the information.”

Their prototype device, about the size of a softball and mounted in a corner of the older person’s car windshield, is called the Driving Monitor System. It is totally automatic, and captures data from the global positioning satellite (GPS), the vehicle’s accelerometer, and small video cameras tracking the road and the driver. “We install the system in the participant’s car, and after a while the person pays no attention to it,” states Dr. West. “The system collects data over a period of time, and we feed it into a computer for processing—how much the person drives, when, under what conditions, and how well. We link that with existing data about the roads in the Salisbury area to get a very complete picture of how people drive.”

**Objective: Greater Independence**

This picture is supported by a battery of tests to chart how participants’ cognitive status and visual abilities change over time, and what bearing these changes have on decisions about driving. Dr. West concludes, “We hope to understand older persons’ driving habits and abilities, and ultimately suggest ways to improve driving performance so that older persons are safer, more confident, and better able to enjoy the independence driving permits. This work is in the pilot stage, and funding is being sought to complete the project.”

*Sheila West, Ph.D.*
QLT’s Levy Professorship Honors Two Women Leading Battle Against Age-Related Macular Degeneration

QLT Inc., the Vancouver-based biopharmaceutical company which developed Visudyne® (verteporfin), the light-activated drug used in the treatment of new blood vessel formation (choroidal neovascularization) in age-related macular degeneration (AMD), has established the Julia G. Levy, Ph.D. Professorship in Ophthalmology at the Wilmer Eye Institute. The inaugural recipient of the Levy Professorship is AMD expert Susan B. Bressler, M.D., Wilmer professor of ophthalmology since 2000.

Julia G. Levy, Ph.D., Corporate Leader and Researcher

Dr. Julia G. Levy is the discoverer of Visudyne®, the founder and former president and CEO of QLT Inc., and now the chair of the company’s scientific advisory board. Not only is Dr. Levy an expert in the field of photodynamic therapy, but she also has a strong personal commitment to the battle against AMD because her late mother suffered from the disease.

Dr. Levy is highly honored for her work, receiving an appointment as an Officer of the Order of Canada, and winning the Future of Vision Award from the Foundation Fighting Blindness, the Pacific Canada Entrepreneur of the Year award, the Friesen-Rygiel prize for medical research, the Prix Galien Canada research award, and the Helen Keller Lifetime Achievement Award.

Paul Hastings, QLT President and CEO, states that, “Wilmer to us is the number one retinal center in the world. We sought out Wilmer to lead the clinical trials of Visudyne® because we knew the Institute’s doctors would ensure the highest scientific integrity in their investigations. Dr. Bressler, as head of the reading center that evaluated the results of Visudyne® therapy, was crucial to the quality of the study. We are pleased to create the Levy Professorship in Ophthalmology at Wilmer to honor Dr. Bressler’s work and Dr. Levy’s leadership of QLT.”

Susan B. Bressler, M.D., Clinical Trials Expert and Teacher

Susan B. Bressler, M.D. graduated from Smith College summa cum laude, received her medical degree from the Johns Hopkins University School of Medicine (where she was elected to Alpha Omega Alpha Honor Society), and completed an ophthalmology residency at Harvard Medical School’s Massachusetts Eye and Ear Infirmary. After medical and surgical retina fellowships she joined the faculty of the Wilmer Eye Institute.

Dr. Bressler is widely published and serves in editorial capacities for numerous journals. Her research interests include collaborative efforts in clinical trials of treatments for choroidal neovascularization in age-related macular degeneration; serving as Principal Investigator in the Wilmer Photograph Reading Center, where she has participated in leading studies of retinal diseases, including the photodynamic therapy trials employing verteporfin (Visudyne®); and serving as Principal Investigator at the Johns Hopkins site for the Age-Related Eye Disease Study. Her research accomplishments have been recognized by the Macula Society with the Rosenthal Award, and by Research to Prevent Blindness with the Special Scholars Award. She is highly regarded as a teacher, receiving the inaugural Neil R. Miller, M.D. Medical Student Teaching Award and directing all medical student education programs at Wilmer.

“The Julia G. Levy Professorship,” notes Dr. Bressler, “will provide support for that most valuable of assets—time to develop my own new ideas, and to cultivate new ideas in others. The professorship is noteworthy also because it underscores the fact that women can achieve positions of leadership in both corporate science and academic medicine.”
Provide for your family.

Protect your heirs from unnecessary estate taxes.

Provide for the institutions close to your heart.

You’ve achieved a great deal. Your financial picture looks strong and enduring. Perhaps you’re planning for retirement. Now you’re ready to use your Will Power.

Gift Planning experts at Johns Hopkins can furnish information about tax-wise giving, which you can share with your estate advisor, and provide sample language for a bequest to The Wilmer Eye Institute. When you are ready, please contact us.

Johns Hopkins Office of Gift Planning
Kathleen McNally, Kathryn A. Shelton
410-516-7954 or 800-548-1268
FAX: 410-516-7208
E-MAIL: plangifts@jhu.edu
WWW.PLANNEDGIFTS.ORG/JHU/

If you have already included The Wilmer Eye Institute in your Will but have not notified us, we would greatly appreciate hearing from you.
About the Wilmer Eye Institute at Johns Hopkins

Wilmer provides diagnostic, medical, and surgical care for adults and children and is a referral center for all eye problems. Wilmer provides routine preventive care, and evaluates and treats patients with specific complaints or those with a family history of eye disease. Treatment for eye emergencies is available 24 hours a day through Wilmer’s Eye Emergency Service, a designated Maryland eye trauma center.

How to Reach Wilmer Comprehensive Eye Care Services

General information and referrals 410-955-5080

Emergency services 410-955-5347

Area Locations:

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Readers who use the Internet are welcome to visit the Wilmer home page at: www.wilmereyeinstitute.net.

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