

IN THE STATE COURT OF FULTON COUNTY  
STATE OF GEORGIA

LEE THOMAS, As Parent and Next	)	
Friend of L.T., A Minor, And	)	
LEE THOMAS, Individually,	)	
	)	
Plaintiff,	)	
	)	
V.	)	CIVIL ACTION FILE NO.
	)	_____
JERRY E. BERLAND, M.D.,	)	
JESSICA D. MCCLUSKEY, M.D.,	)	
A/K/A JESSICA MCCLUSKEY CRANE	)	
AND THOMAS EYE GROUP, P.C.	)	JURY TRIAL DEMANDED
	)	
Defendants.	)	

**COMPLAINT FOR DAMAGES IN MEDICAL NEGLIGENCE**

Comes now the Plaintiff, Lee Thomas (“Mr. Thomas”) as parent and next friend of L.T., a minor, and Lee Thomas, Individually and for his complaint for damages against the Defendants say:

**INTRODUCTION**

1. This case involves the claim of medical negligence against the Defendants, as joint tortfeasors, for either acts that were negligently performed, or acts that should have occurred but did not, in the care and treatment of L.T., a minor.

**THE PARTIES**

2. Plaintiff Lee Thomas resides at 1645 Eagle Drive, Woodstock, Georgia 30189. He is the father of L.T. who was 12 years old at the time of the events described herein.

3. Defendant **Thomas Eye Group, P.C.** (“Defendant Thomas Eye”) is a professional corporation organized under the laws of the State of Georgia, with a principal place of doing business and registered agent located at 5901-A Peachtree Dunwoody Road, Suite 500, Atlanta, Fulton County, Georgia 30328. Defendant Thomas Eye may be served at that address through its registered agent for service, Rodney W. Roeser, and is subject to the jurisdiction of this Court. Venue is proper in this Court pursuant to O.C.G.A. §14-2-510.

4. Defendant **Jerry E. Berland, M.D.** (“Defendant Dr. Berland” or “Dr. Berland”) is a physician licensed to practice in the State of Georgia. **Defendant Dr. Berland** is a resident of Fulton County, Georgia. He may be served at 7980 Landowne Drive, Sandy Springs, Georgia 30350-1021 and is subject to the jurisdiction of this Court.

5. At all times material hereto, **Defendant Dr. Berland** was an employee and/or agent of **Defendant Thomas Eye** and acting within the scope and responsibilities of his employment, and **Defendant Thomas Eye** is liable for his actions pursuant to the doctrine of Respondeat Superior.

6. Defendant **JESSICA D. MCCLUSKEY, M.D. a/k/a JESSICA MCCLUSKEY CRANE** (“Defendant Dr. McCluskey” or “Dr. McCluskey”) is a physician licensed to practice in the State of Georgia. **Defendant Dr. McCluskey** is a resident of Fulton County, Georgia. She may be served at 3516 Woodhaven Road, Atlanta, Georgia 30305 and is subject to the jurisdiction of this Court.

7. At all times material hereto, **Defendant Dr. McCluskey** was an employee and/or agent of **Defendant Thomas Eye** and acting within the scope and responsibilities

of her employment, and **Defendant Thomas Eye** is liable for her actions pursuant to the doctrine of Respondeat Superior.

### THE FACTS

8. While raking in the yard over Easter Weekend 2013, L.T. felt the sensation of an eyelash in his eye. L.T. experienced itching thereafter, and his right eye progressively swelled with pain and redness over the next two days.

9. On April 1, 2013, after the condition persisted, L.T. went to his pediatrician's office and was seen by Debbie King, CFNP and stated that it felt like something was in his eye. Nurse King noted L.T.'s condition as "right eye swelling", redness, and pain. L.T.'s eye was noted as puffy. L.T. was prescribed Pataday eye drops and Gentamycin ointment.

10. On April 9, 2013, L.T.'s parents took L.T. to **Defendant Thomas Eye's** clinic where he saw **Dr. Berland**, who noted that L.T.'s symptoms of swelling, redness, and lid edema had persisted for at least **ten (10) consecutive days**. Following examination, **Dr. Berland's** impression was "environmental allergy vs. lymphangioma." **Dr. Berland** prescribed the steroid Pred Forte four times a day for one week, instructing that L.T. return in one week. **Dr. Berland** described L.T.'s condition as "Swelling or Mass of Eye."

11. On April 16, 2013, L.T. returned for the scheduled appointment with **Dr. Berland**. On this day, L.T.'s right eye was still red and had been red for **seventeen (17) consecutive days**.

12. On April 16, 2013, Dr. Berland noted that swelling had improved and that he would consider MRI if symptoms persisted. **Dr. Berland** directed that the steroid Pred Forte be reduced to twice a day for the next week and then once a day for the succeeding week. L.T. was sent away and told by **Dr. Berland** to return in two weeks. No further diagnostic exam was ordered. **Dr. Berland** described L.T.'s condition as "Swelling or Mass of Eye."

13. On April 22, 2013, more than a week before the next scheduled appointment, L.T.'s condition worsened, and L.T. returned to **Defendant Thomas Eye's** clinic to see **Dr. Berland**. By this date, L.T.'s right eye had been red with varying degrees of swelling and pain for **twenty-three (23) consecutive days**.

14. On April 22, 2013, **Dr. Berland** noted that eyelid tenderness and photophobia were present. Also, **Dr. Berland** noted new symptoms and findings, including diffuse bulbar conjunctival injection, diffuse stellate keratitic precipitates on the corneal endothelium, as well as 3+ cells and flare in the anterior chamber of the right eye—signs of acute inflammation of which endophthalmitis is the most serious entity in the differential diagnoses. **Dr. Berland** noted a sub-optimal view of the retina.

15. On April 22, 2013, **Dr. Berland** made the diagnosis of "unspecified acute and sub-acute iridocyclitis." **Dr. Berland** increased the Pred Forte steroid therapy to every two hours while L.T. was awake and added cyclogyl eye drops twice a day. **Dr. Berland** ordered a work-up for uveitis (internal inflammation of the eye), which did not include testing for an infectious source of the condition. L.T. was sent back to his pediatrician for labs and was instructed to return to **Dr. Berland** three days later.

16. On April 25, 2013, L.T.'s parents brought L.T. back to see **Dr. Berland** because L.T's symptoms had worsened, and L.T. had developed a headache. By this date, L.T's right eye had been red with varying degrees of swelling and pain for **twenty-six (26) consecutive days**.

17. On April 25, 2013, **Dr. Berland** noted that the right upper lid swelling had increased with an ocular discharge. Also, distance UCVA (uncorrected visual acuity) had significantly decreased to "light perception with projection." There was a "trace hypopyon" with 4+ cells in the anterior chamber. **Dr. Berland** made no change in his diagnosis of unspecified acute and sub-acute iridocyclitis.

18. On or before April 25, 2013, **Dr. Berland** stated that he, "[D]iscussed [the problem] with **Dr. Jessica McCluskey** in detail. She feels this represents uveitis, NOT endophthalmitis. She suspects rheumatic, not infectious etiology due to recent normal fundus examination. She feels hx of trauma is unrelated. Adjusting meds per recommendation."

19. On or about April 25, 2013, further steroid therapy was ordered by **Dr. McCluskey**.

20. On April 26, 2013, L.T. returned to **Defendant Thomas Eye's** clinic to see **Dr. McCluskey**. By this date, L.T's right eye had been red with varying degrees of swelling and pain **for twenty-seven (27) consecutive days**.

21. When Dr. McCluskey entered the exam room on April 26, 2013, L.T. was lying on the floor crying with severe headaches and photophobia. His right eye was

swollen closed. Upon examination, **Dr. McCluskey** noted dense fibrinous material in the anterior chamber with dense vitreous debris.

22. On April 26, 2013, **Dr. McCluskey** diagnosed L.T.'s condition as panuveitis and ordered a B-scan ultrasound study. **Dr. McCluskey** ordered Valtrex, an antiviral drug, for L.T. and made a referral to retinal specialist, Dr. Steven Yeh, M.D., at Emory Hospital. **Dr. McCluskey** noted that her referral is to "Dr. Yeh for possible anterior chamber paracentesis PCR and possible foscarnet injection," for what **Dr. McCluskey** was diagnosing as a virus.

23. On April 26, 2013, L.T. was examined by Steven Yeh, M.D., a vitreo-retinal surgeon. Dr. Yeh determined that bacteria rather than a virus was likely the etiological agent and recommended hospitalization at Children's Hospital at Egelston.

24. L.T. was admitted to the hospital and underwent an anterior chamber paracentesis for culture with intravitreal injections of vancomycin, ceftrazidone and voriconazole.

25. Ultimately it was determined that Endophthalmitis had developed in L.T.'s right eye and the retina had detached as a result. Doctors determined that damage caused by the infection was so great that the retina had become detached and could not be reattached.

26. As a result of the permanently detached retina, L.T.'s eye was dying and would steadily deteriorate over time.

27. Over the months following, L.T.'s right eye wasted away in his eye socket and the lid of his right eye closed.

28. L.T. has been permanently injured and has lost all use and function of his right eye.

## COUNT I

### MEDICAL NEGLIGENCE OF JERRY E. BERLAND, M.D.

29. Plaintiff incorporates by reference paragraphs 1 through 28 as if the same was restated here.

30. **Defendant Dr. Berland** evaluated L.T. on April 9, 16, 22, and 25, 2013.

31. On April 9, 2013, **Dr. Berland** should have followed L.T. more closely considering his eye had been red and his eye lid swollen for ten consecutive days. **Dr. Berland** should have required a three-day return to clinic and should have utilized available diagnostic tests to determine the etiology of L.T.'s condition.

32. On April 16, 2013, **Dr. Berland** should have recognized the severity of the intra-ocular inflammatory reaction and diagnosed what was the most serious and obvious condition causing the signs and symptoms, namely infectious Endophthalmitis. Among the tests that should have been performed, **Dr. Berland** should have ordered a PCR test via an anterior chamber tap and received the answer to the cause of the inflammation and infection within hours as that is the recognized speed of analyzing the PCR test by a laboratory.

33. On April 22, 2013, **Dr. Berland** should have recognized the signs of acute inflammation of which Endophthalmitis is the most dangerous condition. **Dr. Berland** failed to take steps to rule out Endophthalmitis which, if found, is a medical emergency.

34. On April 25, 2013, **Dr. Berland** noted that L.T.'s condition was worsening.

**Dr. Berland** consulted with **Dr. McCluskey**.

35. On April 25, 2013, **Dr. McCluskey** did not examine L.T. Nevertheless, **Dr. McCluskey** offered her assessment that L.T.'s medical condition could not be Endophthalmitis. Yet, no testing had been conducted to rule out Endophthalmitis.

36. On April 25, 2013, neither **Dr. Berland** nor **Dr. McCluskey** directed L.T.'s parents to take L.T. to the emergency room for urgent care and assessment. Rather, L.T.'s parents were instructed to bring him back to see **Dr. McCluskey** the following day.

37. **Defendant Dr. Berland** failed to closely follow L.T. with his unresolved redness, pain and swelling of his right eye.

38. **Defendant Dr. Berland** failed to properly diagnose the condition of infectious Endophthalmitis.

39. **Defendant Dr. Berland** failed to order a PCR test via an anterior chamber at an earlier stage.

40. **Defendant Dr. Berland** failed to realize that conventional treatment for anterior uveitis was not working.

41. Pursuant to the attached affidavit of Harold P. Koller, M.D., the actions and inactions of **Defendant Dr. Berland** and those working under his supervision failed to meet the standard of care imposed upon physicians practicing in the United States under the same or similar conditions and like surrounding circumstances including training and



experience, and fell below that degree of skill and care employed by a pediatric ophthalmologist generally under like and similar surrounding conditions.

42. The above-listed deviations from the accepted standard of care, within a reasonable degree of medical certainty, proximately resulted in LT's permanent injury which includes, but is not limited to, the total loss of sight in his right eye.

## COUNT II

### MEDICAL NEGLIGENCE OF JESSICA D. MCCLUSKEY, M.D.

43. Plaintiff incorporates by reference paragraphs 1 through 42 as if the same was restated here.

44. On April 25, 2013, **Defendant Dr. McCluskey** failed to accurately assess the severity of L.T.'s condition as a medical emergency on April 25, 2013.

45. **Dr. McCluskey's** decision on April 25, 2013 that the ocular inflammation was due to pure uveitis failed to consider the full differential diagnoses and the worse possible condition causing the inflammation, namely Endophthalmitis.

46. **Defendant Dr. McCluskey's** recommendation to continue steroid therapy resulted in worsening of the inflammation due to the infectious agent.

47. As a direct result of the failure of Dr. McCluskey to accurately assess the severity of L.T.'s condition as a medical emergency on April 25, 2013, L.T. permanently lost all sight in his right eye and the functional anatomy of his right eye.

48. Pursuant to the attached affidavit of Harold P. Koller, M.D., the actions and inactions of **Defendant Dr. McCluskey** and those working under her supervision failed

to meet the standard of care imposed upon physicians practicing in the United States under the same or similar conditions and like surrounding circumstances including training and experience, and fell below that degree of skill and care employed by a board certified ophthalmologist generally under like and similar surrounding conditions.

49. The above-listed deviations from the accepted standard of care, within a reasonable degree of medical certainty, proximately resulted in LT's permanent injuries which includes, but is not limited to, the total loss of sight in his right eye.

### COUNT III

#### VICARIOUS LIABILITY OF THOMAS EYE GROUP, P.C.

50. Plaintiffs incorporate by reference paragraphs 1 through 49 as if the same was restated here.

51. At the time of their negligent acts or omissions described above and at all times material hereto, **Defendant Dr. Berland** and **Defendant Dr. McCluskey** were employees and/or agents of **Defendant Thomas Eye** and acting within the scope and responsibilities of their employment.

52. **Defendant Thomas Eye** is therefore vicariously liable for the negligent acts and omissions of **Defendant Dr. Berland** and **Defendant Dr. McCluskey**, and the resultant injuries and damages sustained by Plaintiff. Plaintiff is therefore entitled to recover damages from Defendants as set out below.

COUNT IV

DAMAGES FOR MEDICAL NEGLIGENCE

53. Plaintiffs incorporate by reference paragraphs 1 through 52 as if the same was restated here.

54. As a direct and proximate result of failure of the Defendants, and each of them, to exercise the care and skill ordinarily exercised by others in the profession in the United States, Plaintiff has suffered grievous and permanent injury.

55. Plaintiff Lee Thomas, individually, is entitled to recover all medical expenses incurred as a result of the medical negligence of the defendants.

56. Plaintiff Lee Thomas, as Parent and Next Friend of L.T., is entitled to recover from Defendants all general and special damages for the permanent injuries to L.T. caused by their medical negligence.

57. As a direct and proximate result of the negligence of the Defendants, L.T. incurred medical expenses and endured profound pain and suffering and permanent injury for which Plaintiff Lee Thomas, as Parent and Next Friend of L.T. is entitled to recover from the Defendants.

WHEREFORE, Plaintiff prays that he has judgment against the Defendants,  
and each of them, in such amount as a jury determines from the evidence will fully and  
adequately compensate Plaintiff for all injuries and damages, in an amount in excess of  
Ten Thousand Dollars, with all costs of this action being taxed against the Defendants.

This 31st day of March 2015.

Attorneys for Plaintiff

/s/ Curtis J. Dickinson  
Curtis J. Dickinson  
Georgia Bar No. 221127  
Laura M. Barron  
Georgia Bar No. 159015

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AFFIDAVIT OF HAROLD P. KOLLER, M.D.

State of Pennsylvania

County of Montgomery

COMES NOW, the Affiant, Harold P. Koller, M.D., and executes this Affidavit under oath, and states:

1. My name is Harold Paul Koller, MD, FACS, FAAP, FAAO. I am over the age of eighteen (18) years and I am competent to testify as to all matters referenced herein.

2. This Affidavit is presented pursuant to O.C.G.A. § 9-11-9.1 in support of the Complaint of Lee Thomas, As Parent and Next Friend of L.T. I have been retained as an expert witness for the purposes of this civil action.

3. I am a medical doctor. My primary practice is in the field of Pediatric Ophthalmology. I have been licensed as a medical doctor in the State of Louisiana since June 13, 1964, the Commonwealth of Pennsylvania since January 19, 1968, and the State of New Jersey since July 8, 1970. I am duly licensed and Board-Certified Lifetime in Ophthalmology by the American Board of Ophthalmology initially on May 12, 1971 and again voluntarily on January 1, 2014. I have practiced this specialty and sub-specialty for 43 years. I was engaged in the active practice of Pediatric Ophthalmology and the treatment of eye inflammatory disease [iritis/uveitis] for at least three (3) of the last five years before May 1, 2013.

4. I have previously been certified as an expert and have testified at trial in the field of Ophthalmology and Pediatric Ophthalmology.

5. My CV is attached hereto as Exhibit A, and incorporated herein by reference.

6. During my professional career, I have examined, cared for, and treated hundreds of patients with the history and symptoms of L.T. who was 12 years of age at the time of the events addressed in this Affidavit.

7. I have reviewed the following records, flash drive, and disks:

- A. Records from Pediatrics and Adolescent Medicine, P.A.;
- B. Records from the Thomas Eye Group and Dr. Jerry Berland;
- C. Records from Children's Healthcare of Atlanta;
- D. Records from Steven Yeh, M.D. of the Emory Clinic, Inc. – Vitreo-Retinal Examination with recommendation for hospital admission;
- E. Discharge Summary of Hospitalization and Hospital Records at the Children's Hospital at Egleston;
- F. One flash drive with multiple medical records; and,
- G. Two CD disks of Radiological Images from Children's Healthcare of Atlanta.

8. Below is a summary of the events in this case:

- On Easter weekend 2013, L.T. was raking in the yard at his home when he felt the sensation of something in his eye, which he described as "an eyelash" in his eye. He experienced itching afterwards. His right eye progressively

swelled. He developed increased swelling, pain and redness over the next two days.

- On April 1, 2013, L.T. went to his pediatrician's office and saw Debbie King, CFNP. Nurse King noted L.T.'s current condition as "right eye swelling" redness and pain. L.T.'s eye was noted as puffy. Nurse King prescribed Pataday and Gentamycin ointment.
- On April 9, 2013, after L.T.'s symptoms persisted, L.T. was seen by his Ophthalmologist Jerry E. Berland, M.D. at the Thomas Eye Group. Dr. Berland noted that L.T.'s symptoms of swelling, redness, lid edema had persisted for at least 10 days. L.T. had uncorrected visual acuity (UCVA) was 20/30-2 OD; Pinhole 20/20. Mild lid skin erythema and temporal lid edema was observed OD. Temporal injection and chemosis with vessel dilation & tortuosity was noted in the bulbar conjunctiva of the right eye. The impression by Dr. Berland was "environmental allergy vs. lymphangioma." Treatment recommended was a trial of Pred Forte 4x/day x one week. Dr. Berland noted: "Consider MRI of orbit if persists. RTC 1 week for comprehensive exam." The description of the condition was Swelling or Mass of Eye.
- On April 16, 2013, Dr. Berland again saw L.T. again. UCVA remained unchanged at 20/30-2. No lid edema was observed. The bulbar conjunctival dilated tortuous vessels remained. Rx=PF 1% BID x 1 week, then once/day x 1 week. The eye was still red on this day and had been red for 17 consecutive days. Dr. Berland noted that swelling had improved and that he would

continue to consider MRI if symptoms persisted. L.T.'s parents were told to bring him back in two weeks. No further diagnostic exam was ordered. The description of the condition was described as Swelling or Mass of Eye.

- The next visit was on April 22, 2013. Lid tenderness and photophobia were present. UCVA had worsened and was only 20/40. New signs included diffusebulbar conjunctival injection, diffuse stellate keratitic precipitates on the corneal endothelium as well as 3+ cells and flare in the anterior chamber of the right eye. These are signs of acute inflammation of which endophthalmitis is the most serious entity in the differential diagnoses. There was sub-optimal view of the fundus [retina]. Dr. Berland diagnosed, "Unspecified acute and sub-acute iridocyclitis." PF 1% was increased to q2hrs while awake + cyclogyl 1% OD BID. Uveitis work-up initiated. At this time, the eye had been red with varying degrees of swelling and pain for 23 days. L.T. was sent back to his pediatrician for labs and was instructed to return to Dr. Berland three days later.
- On April 25, 2013, L.T. again saw Dr. Berland. L.T.'s symptoms had not improved and he now developed a headache. The right upper lid swelling also increased with an ocular discharge. Distance UCVA had significantly decreased to "light perception with projection." There was a "trace hypopyon" with 4+ cells in the anterior chamber. No change in the diagnosis was made. Of significance is the fact that Dr. Berland "discussed [the problem] with Dr. Jessica McCluskey in detail. She feels this represents uveitis, NOT



endophthalmitis. She suspects rheumatic, not infectious etiology due to recent normal fundus examination [note previous poor view of retina due to photophobia and poor pupil dilation]. She feels hx of trauma is unrelated.” Further steroid therapy was then recommended. Dr. McCluskey’s decision that the ocular inflammation was due to pure uveitis failed to consider the full differential diagnoses and the worse possible condition causing the inflammation, namely endophthalmitis. Also, her recommendation to continue steroid therapy resulted in worsening of the inflammation due to the infectious agent.

- In summary, Dr. Berland, himself, evaluated L.T. on April 9, 16, 22, and 25, 2013. Through April 25, 2013, nothing in the medical records indicates that L.T. was refusing to follow the instructions of Dr. Berland or failing to take the medications prescribed by him.
- The next visit was to Dr. Jessica McCluskey on April 26, 2013. L.T. was lying on the floor that morning crying with severe headaches and photophobia. His right eye was still swollen closed. Distance UCVA was Counting Fingers at face OD. Dense fibrinous material was noted in the anterior chamber with dense vitreous debris. Panuveitis was diagnosed and a B-scan ultrasound study ordered. Valtrex was ordered and referral made to “Dr. Yeh for possible anterior chamber paracentesis PCR and possible foscarnet injection.” [A Polymerase Chain Reaction (PCR) test of either the vitreous humor or anterior chamber was never done].

- Also, on April 26, 2013, L.T. was examined by Steven Yeh, M.D., a vitreo-retinal surgeon. He noted that all the lab tests were within normal limits but with a white count of 9.7 with a slight left shift with 5.9 neutrophils. UCVA was “Counting fingers @ 6 inches in the right eye and 20/20 in the left eye. There was a 2-3+ Relative afferent pupillary defect in the right eye. Slit-lamp examination showed 3+ conjunctival injection. The cornea showed a few endothelial folds. There was a fibrinous clot in the anterior chamber with some debris. There was an approximately 2mm hypopyon. The iris showed dilation of the stromal vessels, but no rubeosis. Lens showed moderate opacity. There was minimal view of the anterior vitreous secondary to the fibrinous opacity. IOP was 9 OD and 14 OS. There was no view of the fundus in the right eye [as noted previously in this report]. In the left eye, funduscopy examination was unremarkable. A B-scan ultrasound was performed and showed dense vitreous opacity. There was also the area suspicious for retinal versus choroidal detachment temporally.” Dr. Yeh felt that bacteria rather than a virus was likely the etiological agent and recommended hospitalization at Children’s Hospital at Egelston. A fungus cause was also considered. He was then seen in the Emergency Room at Children’s Hospital.
- L.T. was admitted to the hospital and underwent an anterior chamber paracentesis for culture with intravitreal injections of vancomycin, ceftazidime, and voriconazole. The vitreous specimen showed no organisms.

- On April 28, 2013, Savitha Sunkara, M.D. noted “minimal interval improvement of vision in the right eye.”
- On April 29, 2013, Justin H. Townsend, M.D. noted a resolved hypopyon with engorged iris vessels and a contracted and mildly retracted endothelial plaque. He increased the PF 1% to q3 hours and to transition to oral broad spectrum antibiotics. A CAT scan of the orbits performed on April 29, 2013 showed only “right periorbital preseptal mild soft tissue swelling without definite post septal involvement. L.T. was able to open his right eye to 4 mm with less pain but the cornea was still cloudy and swollen. He reported seeing shapes in the periphery with the right eye. Rx= moxifloxacin and linezolid x 2 weeks + voriconazole x 6 weeks re fungus possibility.
- On May 3, 2013, L.T.saw George Hubbard III, M.D. at the Emory Eye Clinic. There were no treatment changes.
- On May 6, 2013, Blain E. Cribbs, M.D. saw L.T.. The B-Scan revealed “Vitreous opacity and a total retinal detachment, right eye with underlying opacity”.
- An exam by Dr. Hubbard on May 8, 2013 revealed no change.
- A letter from Joseph Hilinski, M.D. to Dr. Fearing dated May 13, 2013 ordered a complete metabolic panel and liver function tests.
- On May 21, 2013, in a phone conversation with Dr. Fearing, Dr. Berland voiced the theory that the etiology was “fungal endophthalmitis”.

- On May 22, 2013, Dr. Hubbard measured light perception vision in L.T.'s right eye. The intraocular pressure was only 3 mmHg. He then recommended no retinal surgery due to the poor prognosis.
- On June, 18, 2013, Dr. Berland told Dr. Fearing by phone the outcome of treatment [The "etiology still unclear"].
- On August, 21, 2013, Dr. Hubbard found vision was light perception OD and 20/20 OS with no eye discomfort. He recommended monocular precautions.

9. On April 9, 2013, Dr. Berland should have followed L.T. more closely considering his eye had been red and his eye lid swollen for 10 consecutive days. Dr. Berland should have required a 3 day return to clinic and should have utilized available diagnostic tests to determine the etiology of L.T.'s condition.

10. On April 16, 2013, Dr. Berland should have recognized the severity of the intra-ocular inflammatory reaction and diagnosed what was the most serious and obvious condition causing the signs and symptoms, namely infectious Endophthalmitis. Among the tests that should have been performed, Dr. Berland should have ordered a PCR test via an anterior chamber tap and received the answer to the cause of the inflammation and infection within hours as that is the recognized speed of analyzing the PCR test by a laboratory.

11. On April 22, 2013, Dr. Berland should have recognized the signs of acute inflammation of which Endophthalmitis is the most dangerous condition. Dr. Berland failed to take steps to rule out Endophthalmitis which, if found, is a medical emergency.

12. On April 25, 2013, Dr. Berland noted that L.T.'s condition was worsening.

Dr. Berland consulted with Dr. McCluskey. Dr. McCluskey did not examine L.T.

Without an examination, Dr. McCluskey offered her assessment that L.T.'s condition was not Endophthalmitis. Yet, no testing had been conducted to rule out Endophthalmitis.

On April 25, 2013, neither Dr. Berland nor Dr. McCluskey directed L.T.'s parents to take L.T. to the emergency room for urgent care and assessment. Rather, L.T.'s parents were instructed to bring him back to see Dr. McCluskey the following day.

13. As a direct result of the failure of Dr. Berland to closely follow L.T. with his unresolved redness, pain and swelling of his right eye, and the failure to diagnose Endophthalmitis and to discover the cause of the Endophthalmitis via a PCR test at an earlier stage and failure to realize that conventional treatment for anterior uveitis was not working, L.T. permanently lost all sight in his right eye.

14. As a direct result of the failure of Dr. McCluskey to accurately assess the severity of L.T.'s condition as a medical emergency on April 25, 2013, L.T. permanently lost all sight in his right eye.

15. It is my expert opinion, and with a reasonable degree of medical certainty, that the injuries sustained by L.T. due to the actions and inactions of Dr. Berland arose from the failure of Dr. Berland and those working under his supervision, to meet the standard of care imposed upon physicians practicing in the United States under the same or similar conditions and like surrounding circumstances including training and experience, and fell below that degree of skill and care employed by a pediatric ophthalmologist generally under like and similar surrounding conditions.

16. It is my expert opinion, and with a reasonable degree of medical knowledge, that the injuries sustained by L.T. due to the actions and inactions of Dr. McCluskey arose from the failure of Dr. McCluskey and those working under her supervision, to meet the standard of care imposed upon physicians practicing in the United States under the same or similar conditions and like surrounding circumstances including training and experience, and fell below that degree of skill and care employed by a board-certified ophthalmologist generally under like and similar surrounding conditions.

17. This affidavit is given pursuant to the O.C.G.A. § 9-11-9.1, as enacted and applicable, and is intended to set forth at least one negligent act or omission concerning the care and treatment provided to L.T. by Dr. Berland and Dr. McCluskey. It is not intended to set forth all acts and omissions amounting to deviations from the acceptable standards of medical care and the opinions expressed herein are subject to modification and additions as discovery progresses and new documents or information and other relevant facts become known and available.

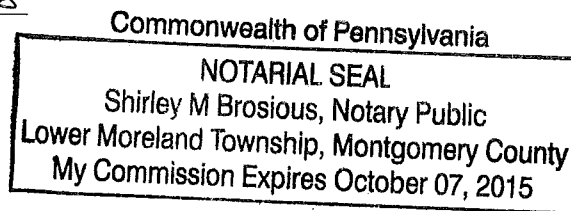
FURTHER AFFIANT SAITH NOT.

Harold P. Koller, M.D.  
Harold P. Koller, M.D.

Sworn to and subscribed before me the 12<sup>th</sup> day of March, 2015.

Shirley M Brosious  
Notary Public

Attachment: CV



**CURRICULUM VITAE**

**HAROLD P. KOLLER, MD, FACS, FAAP**  
**Board-Certified Ophthalmologist**

Huntingdon Valley Eye Care Consultants, Ltd.  
Holy Redeemer Medical Office Building, Suite 150  
1650 Huntingdon Pike  
Meadowbrook, PA 19046

Business Telephone Number: 215-947-6660  
Fax Number: 215-947-7425  
E-mail: eyecareconsultants@verizon.net

Wills Eye Hospital  
840 Walnut Street  
Philadelphia, PA 19107

**EDUCATION**

Central High School  
Philadelphia, Pennsylvania  
Bachelor of Arts Degree  
Graduated 1955

Major: Zoology, Bachelor of Arts Degree  
University of Pennsylvania  
Philadelphia, PA  
Graduated 1959

Major: Zoology  
University of Pennsylvania - Graduate School  
1959-1960

Doctor of Medicine  
Tulane University School of Medicine  
New Orleans, LA  
Graduated 1964

**POSTGRADUATE TRAINING**

1964-1965 Internship in Straight Medicine  
Temple University Medical Center  
Philadelphia, PA

2-3-2015



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**POSTGRADUATE TRAINING (continued)**

1965-1968	Residency in Ophthalmology at Tulane University 7/65 to 6/66 <i>Postgraduate Course of Instruction in Ophthalmology</i> Tulane University School of Medicine 7/66 to 6/68 <i>Resident Surgeon</i> New Orleans Eye, Ear, Nose and Throat Hospital New Orleans, LA
7/1/1970-9/30/1970	Special Fellowship in Pediatric Ophthalmology Children's Hospital of the District of Columbia, Washington, D.C.
3/1/1996-3/6/1996	ASOA Management Program, The Aresty Institute of Executive Education, The Wharton School, The University of Pennsylvania, Philadelphia, PA

**EMPLOYMENT HISTORY**

1986-Present	Huntingdon Valley Eye Care Consultants, Ltd.
2000-2010	Eye Care Physicians & Surgeons of New Jersey
1986-2000	Eye Care Consultants of South Jersey, P.C.
1980-1986	GP MED, solo practice
1971-1980	Solo practice, unincorporated

**HOSPITAL AFFILIATIONS**

2008-Present	Consulting Ped. Ophthalmologist, Hahnemann University Hospital
1970-Present	Attending Surgeon, Wills Eye Hospital
1977-2009	Director, Pediatric Ophthalmology Subsection, Department of Surgery, Holy Redeemer Hospital
1979-1992	Attending Ophthalmologist, Frankford Hospital
1992-2006	Consulting Ophthalmologist, Frankford Hospital
1974-Present	Clinical Affiliate, Children's Hospital of Philadelphia
1971-Present	Attending Ophthalmologist, St. Christopher's Hospital for Children

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**HOSPITAL AFFILIATIONS (continued)**

1983-1999	Attending Ophthalmologist, Nazareth Hospital
1972-2000	Chief, Section of Pediatric Ophthalmology, Department of Surgery, Our Lady of Lourdes Medical Center
2000-Present	Consultant in Pediatric Ophthalmology, Department of Surgery, Our Lady of Lourdes Medical Center
1979-Present	Affiliate, Albert Einstein Medical Center
1970-1990	Attending Ophthalmologist, Jeanes Hospital
1990-2003	Courtesy Staff, Jeanes Hospital
1978-2004	Attending Pediatric Ophthalmologist, Cooper Medical Center
1990-Present	Attending Ophthalmologist, Abington Memorial Hospital
1994-1999	Attending Ophthalmologist, St. Mary Hospital
1994-2013	Consultant in Pediatrics, Ophthalmology Department, Doylestown Hospital
1994-1999	Attending Ophthalmologist, Medical College Hospitals, Main Campus
1975-1990	Consultant in Ophthalmology, Pine Hill Rehabilitation Center
1972-2000	Consultant in Pediatric Ophthalmology, St. Vincent's Home
1972-1990	Consultant in Pediatric Ophthalmology, Association for Jewish Children
1970-1980	Consultant in Pediatric Ophthalmology, USPHS Hospital, Staten Island, NY
1971-1990	Consultant in Pediatric Ophthalmology, Rancocas Valley Hospital
1971-1990	Consultant in Pediatric Ophthalmology, Burlington County Memorial Hospital
1970-2000	Consultant in Pediatric Ophthalmology, Deborah Hospital

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## CERTIFICATION AND LICENSURE

### MEDICAL LICENSES:

1964 - Present	Louisiana
1968 - Present	Pennsylvania
1969 - 1992	New York
1970 - Present	New Jersey
1971-present	American Board of Ophthalmology Certification (non-time-limited)
1/1/2014- 12/31/2023	Voluntary ABO Re-certification
6/23/1996-12/31/1999	Diplomate, American Board of Quality Assurance & Utilization Review Physicians

### MILITARY SERVICE

1968-1970	Lieutenant Commander, United States Public Health Service, Staten Island, New York
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### HONORS AND AWARDS

2011	<u>US News and World Report: Top 1% of Ophthalmologists in the US-Castle Connolly</u>
2007	American Academy of Ophthalmology's Senior Achievement Award
2007	<u>Who's Who in America, (Marquis) 61<sup>st</sup> edition</u>
2010	Top Doctors, <u>Philadelphia Magazine, May</u>
2008	Top Doctors, <u>Philadelphia Magazine, May</u>
2007	Top Doctors, <u>Philadelphia Magazine, May</u>
2006	Top Doctors, <u>Philadelphia Magazine, May</u>
2005	Top Doctors, <u>Philadelphia Magazine, May</u>
2004	Top Doctors, <u>Philadelphia Magazine, May</u>
2003, 2004, 2005, 2006, 2007	Named one of <i>America's Top Doctors</i> (Castle Connolly Medical)
2008, 2009, 2010, 2011, 2012	3 <sup>rd</sup> , 4 <sup>th</sup> , 5 <sup>th</sup> , 6 <sup>th</sup> , 7 <sup>th</sup> , 8 <sup>th</sup> , 9 <sup>th</sup> , 10 <sup>th</sup> , 11 <sup>th</sup> , 12 <sup>th</sup> editions
1999	Outstanding Tulane Eye Alumnus, presented at the 21 <sup>st</sup> Annual Tulane Eye Alumni Meeting
1985	American Academy of Ophthalmology Honor Award
1975	American Academy of Ophthalmology and Otolaryngology Gold Medal – First Prize Scientific Exhibit
1969 to Present	AMA Physician's Recognition Award (every three years); 2005 to 2016 " <i>With Commendation</i> "

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**PROFESSIONAL SOCIETY MEMBERSHIPS**

National

American Academy of Ophthalmology, Fellow (1971-present)  
American Academy of Pediatrics, Associate Fellow (1980-1994)  
American Academy of Pediatrics, Specialty Fellow (1994-present)  
American Association of Pediatric Ophthalmology & Strabismus (1974-present) (Charter Member)  
American College of Surgeons, Fellow (1974-present)  
American Intraocular Implant Society (1985-present)  
American Medical Association (1971-present)  
American Society of Contemporary Ophthalmology (1971-present)  
Association for Research in Vision and Ophthalmology (1970-present)  
Commissioned Officers Association of U.S. Public Health Service (1968-present)  
Contact Lens Association of Ophthalmologists (1971-1990)  
Kerato-Refractive Society (1980-2000)  
National Association of Residents and Interns (1963-1980)  
Pan American Association of Ophthalmology (1977-present)  
Phi Delta Epsilon Medical Fraternity (1961-present)  
Tulane Medical Alumni Association (1964-present)  
Tulane Ophthalmological Residents Society (1968-present)

New Jersey

Burlington County Medical Society (1971-1983)  
Camden County Medical Society, Associate – Eye Section (1972-1989)  
New Jersey Academy of Ophthalmology & Otolaryngology (1972-1990)  
New Jersey State Medical Society (1973-1983)

Pennsylvania

College of Physicians of Philadelphia, Fellow (1973-present)  
Delaware Valley Pediatric Ophthalmologic Society-founding member (1990-present)  
Inter-County Ophthalmological Society (1981-1997)  
Montgomery County Medical Society – Active (1983-present)  
Ophthalmic Club of Philadelphia – Life Member (1979-present)  
Pennsylvania Academy of Ophthalmology and Otolaryngology, Fellow (1972-2001)  
Pennsylvania Academy of Ophthalmology (2008-2012)  
Pennsylvania Medical Society (1983-present)  
Philadelphia County Medical Society, Member – Eye Section (1971-1995)  
Philadelphia Pediatric Society (1994-present)  
Sports Vision Society (1995)

Non-Medical Organizations

Alpha-Phi Omega National Service Fraternity (1956-present)  
Lions Club, Wissinoming Chapter (1972-1983)

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### **OFFICERSHIPS**

American Academy of Pediatrics-Past Chair-ex officio, Section on Ophthalmology (2001-2002)  
American Academy of Pediatrics, Section on Ophthalmology, Executive Committee Member (1989-2001)  
Chair, Credential Committee – Section on Ophthalmology (1989-1993)  
Secretary/Treasurer, Section on Ophthalmology (1993-1996)  
Chair, Section on Ophthalmology (1996-2000)  
American Academy of Pediatrics Advisory Board Member – Project Universal Preschool Vision Screening (PUPVS) Task Force (1999-2004)  
Delaware Valley Pediatric Ophthalmology Society, President (1992-1994), Executive Director (1990-2000), Executive Secretary-Treasurer (1990-2000)  
Tulane Ophthalmologic Residents Alumni Society, President (1994-2007)  
American Academy of Ophthalmology - Task Force on Complementary and Alternative Medicine (1999-present)  
Alternate Delegate, American Association for Pediatric Ophthalmology and Strabismus, Socio-Economic Committee (1993-1998)  
Member, Local Medical Advisory Board, Juvenile Diabetes Foundation of Southern New Jersey (1974-1981)  
Representative from the American Academy of Pediatrics to the Council for the American Academy of Ophthalmology (1994-2001)  
Representative from the Delaware Valley Pediatric Ophthalmologic Association to the Pennsylvania Academy of Ophthalmology and Otolaryngology (1990-1996)  
New Jersey Academy of Ophthalmology & Otolaryngology, Member- Board of Governors (1977-1980)

### **ACADEMIC APPOINTMENTS**

1975-Present	Professor of Ophthalmology, Thomas Jefferson University, Philadelphia, PA
1994-Present	Adjunct Professor of Ophthalmology, Pediatrics, Medical College Hospitals/Hahnemann University Hospital, Drexel University, Philadelphia, PA
1985-2013	Clinical Assistant Professor of Ophthalmology, University of Medicine and Dentistry of New Jersey, Newark, NJ
1968-1970	Deputy Chief, Ophthalmology, USPHS Hospital, Staten Island, NY
1965-1968	Assistant in Ophthalmology, Tulane Medical School, New Orleans, LA

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### OTHER APPOINTMENTS

1/1/2000-1/1/2006	Editorial Board, <u>EyeNet Magazine</u> , American Academy of Ophthalmology
1995-2002	Member, Continuing Medical Education Committee, Thomas Jefferson University Hospital
1996-Present	Editorial Board, <u>Review of Ophthalmology</u>
1997-Present	Editorial Board, <u>Journal of Pediatric Ophthalmology and Strabismus</u>

### ACADEMIC TEACHING RESPONSIBILITIES

- Philadelphia College of Osteopathic Medicine Ophthalmology Residency Program  
Clinical mentoring of residents with patients in my private office  
Surgical training at St. Christopher's Hospital for Children and Holy Redeemer Hospital  
operating rooms  
Journal Club presentations and lectures
- Wills Eye Hospital and Thomas Jefferson University College of Medicine Ophthalmology  
Residency Program  
Staffing pediatric ophthalmology "Fight for Sight Eye Clinic"  
Residency surgical training in operating rooms and lectures
- Scheie Eye Institute and University of Pennsylvania Residency Program at Children's Hospital of  
Philadelphia  
Surgical staffing in Operating Room  
Children's Hospital of Philadelphia Pediatric ophthalmology Fellowship surgical staffing in  
operating rooms
- Drexel University/Hahnemann University Hospital  
Resident Lectures (Hahnemann)  
Surgical Preceptorships (St. Christopher's Hospital for Children)

### COMMUNITY SERVICE

1993-1999	Annual Chinatown Community Visual Screening in conjunction with Wills Eye Hospital
April 13, 2013	participant, Wills Eye Institute: Give Kids Sight Day

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### **COURSE TEACHINGS**

1976-1983	Contact Lens Association of Ophthalmologists, Inc., Las Vegas, NV Course Director, "Contact Lenses in Infants and Children"
1976-1987	American Academy of Ophthalmology, San Francisco, CA Course Director, "Practical Amblyopia Therapy"
2008	American Academy of Ophthalmology Atlanta, GA "Learning Disorders and Visual Processing in Clinical Practice"

### **GRANT SUPPORT AND RESEARCH ACTIVITY**

Clinical Investigator for Bausch & Lomb Corporation regarding the use of a high plus polymacon contact lens for the treatment of amblyopia. This was performed between 1973-1975. Total amount of funding from Bausch & Lomb Corporation amounted to \$28,000.

Clinical Investigator in the Silsoft Silicone Elastomer Contact Lens Clinical Research Program for Dow Corning Corporation, developer of universal lens for pediatric aphakia, November 1978 through September 1981. Total amount of funding from the Dow Corning Corporation \$16,000.

Clinical Investigator in the Silsight Silicone Elastomer Contact Lens for cosmetic extended wear Clinical Research Program for Dow Corning Corporation. August 1980 through March 1983.

Clinical Investigator for the IOLAB Corporation Pediatric Lacrimal Duct Catheter Clinical Study, 1981-1996.

Clinical Investigator for the IOLAB Corporation Pediatric Intraocular Lens Implantation Clinical Study, started October 1983.

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**BIBLIOGRAPHY: BOOKS AND BOOK CHAPTERS**

**Koller, H.** “Dissociated Strabismus” in The Wills Eye Institute 5 Minute Ophthalmology Consult, Maguire, Murchison, Jaeger, eds. Lippincott Williams & Wilkins, 2011.

**Koller, H.,** Fecarotta, C. “Congenital & Pediatric Cataracts” in The Wills Eye Institute 5 Minute Ophthalmology Consult, Maguire, Murchison, Jaeger, eds. Lippincott Williams & Wilkins, 2011.

**Koller, H.** and Nelson, L. “Lacrimal Anomalies” in the Wills Eye Institute Color Atlas & Synopsis of Clinical Ophthalmology, Leonard Nelson, Ed., Lippincott Williams & Wilkins, 2011.

**Koller, H.,** Goldberg, K. The Ophthalmologist’s Role in Visual Processing and Learning Disabilities, DUANE’S CLINICAL OPHTHALMOLOGY, Vol. 5, chapter 42, E. Jaeger, ed. Lippincott Williams & Wilkins, 2006 edition.

**Koller, H.,** Goldberg, K. Role of the Ophthalmologist in Learning Disorders, HARLEY’S PEDIATRIC OPHTHALMOLOGY, 5<sup>th</sup> edition, chapter 27, Nelson and Olitsky, eds. Lippincott Williams & Wilkins, 2005.

**Koller, H.** Interdisciplinary Council on Developmental & Learning Disorders’ Clinical Practice Guidelines: Redefining the Standards of Care for Infants, Children and Families with Special Needs, Stanley Greenspan, MD, Chair, Chapter 11, 2000, Bethesda, MD.

**Koller, H.,** Schwartz, D. Vision Therapy for Children (Part I), EYENET AUDIO, January, 2000.

**BIBLIOGRAPHY: PEER-REVIEWED ARTICLES**

Kipp, M., **Koller, H.,** and Weaver, D. Eye to Eye: Surgical Management of a Case of Congenital Fourth Nerve Palsy, JOURNAL OF PEDIATRIC OPHTHALMOLOGY AND STRABISMUS, Volume 52, No. 1, 2015.

**Koller, H.** Visual Processing and learning disorders, CURRENT OPINION IN OPHTHALMOLOGY, Wolters Kluwer Health, 2012, 23:377-383, September 2012.

**Koller, H.** (Consultant) Eye Examination in Infants, Children, and Young Adults by Pediatrician, American Academy of Pediatrics, Policy Statement, PEDIATRICS, Volume 111, Number 4, April 2003.

**Koller, H.** An Ophthalmologist’s Approach to Visual Processing/Learning Differences. JOURNAL OF PEDIATRIC OPHTHALMOLOGY AND STRABISMUS, May/June 2002, Vol. 39, No 3.

**Koller, H., Goldberg, K.** Spotting Learning Differences, REVIEW OF OPHTHALMOLOGY, March issue, 2002.

**Koller, H., Goldberg, K.** Your Role in Detecting Learning Differences, REVIEW OF OPHTHALMOLOGY, March issue, 2000.



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**BIBLIOGRAPHY: PEER-REVIEWED ARTICLES (continued)**

**Koller, H.** An Ophthalmologist's Approach to Children with Visual Perception and Learning Differences, AMERICAN ORTHOPTIC JOURNAL, Volume 49, 1999.

**Koller, H.** Recognize the Signs of Learning Disabilities, EYENET, May issue, 1999.

**Koller, H.** Effective Options in Amblyopia Therapy, EYENET, April issue, 1999.

**Koller, H.,** Goldberg, K. A Guide to Visual and Perceptual Learning Disabilities, CURRENT CONCEPTS IN OPHTHALMOLOGY, Volume 7, March 1999.

**Koller, H.** Tips for Enhancing Pediatric Exam Efficiency, EYENET, March issue, 1999.

**Koller, H.** How Does Vision Affect Learning II? , JOURNAL OF OPHTHALMIC NURSING AND TECHNOLOGY, November/December issue, 1998.

**Koller, H.** (SOOp Chair) Screening for Retinopathy in the Pediatric Patient With Type 1 Diabetes Mellitus, American Academy of Pediatrics , PEDIATRICS, Volume 101, Number 2, February 1998.

**Koller, H.** Is Vision Therapy Quackery? How to Separate Fact from Fiction and Get Pediatric Patients the Help They Need, REVIEW OF OPHTHALMOLOGY, March 1998.

**Koller, H.** 10 Tips on Refracting Children, REVIEW OF OPHTHALMOLOGY, Vol. IV, No. 2, February 1997.

**Koller, H.** How Does Vision Affect Learning? JOURNAL OF OPHTHALMIC NURSING & TECHNOLOGY, Vol. 16, No. 1, January/February 1997.

Becker, B., Berry, F.D., **Koller, H.** Balloon Catheter Dilation for Treatment of Congenital Nasolacrimal Duct Obstruction. AMERICAN JOURNAL OF OPHTHALMOLOGY, Vol. 121, March 1996.

Shields, J.A., Shields, C.L., **Koller, H.**, Federman, J.L., Koblenzer, P., Barbera, L.S. Cutis Marmorata Telangiectatica Congenita Associated with Bilateral Congenital Retinal Detachment. RETINA 10:2, April/June 1990.

Gottlob, I., Zubcov, A., Catalano, R., Reinecke, R., **Koller, H.**, Calhoun, J., Manley, D.

Nystagmus Patterns of Spasmus Nutans with or without CNS Lesions and Infantile Nystagmus. OPHTHALMOLOGY 97(9), 1166-1175, 1990.

Federman, J.A., Altman, J., **Koller, H.** The Surgical and Non-Surgical Management of Persistent Hyperplastic Primary Vitreous, OPHTHALMOLOGY 89:29, 1984.

Schwartz, R., **Koller, H.** Survey of Sutures Used in Strabismus Surgery, JOURNAL OF PEDIATRIC OPHTHALMOLOGY AND STRABISMUS, 18:1, January/February 1981.

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**BIBLIOGRAPHY: PEER-REVIEWED ARTICLES (continued)**

Getnick, R., Harley, R., **Koller, H.** Unusual Presentation of Optic N. Glioma. ANNALS OF OPHTHALMOLOGY, 1975.

Dabazies, O.H., **Koller, H.** Atromid and Diabetic Retinopathy, ANNALS OF OPHTHALMOLOGY, 1:213, 1969.

**CONTRIBUTING AND CONSULTING EDITORIAL RESPONSIBILITIES**

**Koller, H.** (Contributing Editor): YOUR BABY’S FIRST YEAR, 1998.

**Koller, H.** (Contributing Editor): THE OFFICIAL, COMPLETE HOME REFERENCE GUIDE TO YOUR CHILD’S SYMPTOMS – BIRTH THROUGH ADOLESCENCE, 1998.

**Koller, H.** (Technical Advisor): THE COMPLETE AND AUTHORITATIVE GUIDE – CARING FOR YOUR BABY AND YOUNG CHILD – BIRTH TO AGE FIVE, 1998.

**Koller, H.** (Subcommittee) Red Reflex Examination in Infants. American Academy of Pediatrics, Policy Statement, PEDIATRICS, Volume 109, Number 5, May 2002.

**Koller, H.** (Consultant) Use of Photoscreening for Children’s Vision Screening, American Academy of Pediatrics, PEDIATRICS, Volume 109, Number 3, March 2002.

**Koller, H.** (Consultant) Screening Examination of Premature Infants for Retinopathy of Prematurity, American Academy of Pediatrics, PEDIATRICS, Volume 108, Number 3, September 2001.

**INVITED LOCAL PRESENTATIONS (partial recent list)**

“Pediatric Ophthalmology for the Primary Care Physician and Health Professionals”, Wills Eye Hospital, Philadelphia, January 10, 2015.

Resident Lecture: “Forensic Issues in Ophthalmology”, Wills Eye Hospital, July 2, 2014.

Resident Lecture: “Guidelines for Prescribing Glasses”, Wills Eye Hospital, April 10, 2014.

Resident Lecture: “Medicolegal Issues”, Wills Eye Hospital, July 10, 2013.

“Pediatric Ophthalmology for the Primary Care Physician and Health Professionals”, Wills Eye Institute, Philadelphia, January 12, 2013.

“Forensic Issues in Medicine”, Holy Redeemer Hospital, Meadowbrook, PA December 5, 2012.

Resident Lecture: “Learning Disability/Disorder”, Wills Eye Institute, Philadelphia, PA December 6, 2012.

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**INVITED LOCAL PRESENTATIONS (continued)**

Resident Lecture: “Medicolegal Issues”, Wills Eye Institute, Philadelphia, PA, July 9, 2012

“How to Avoid Malpractice Actions in Pediatric Ophthalmology”, Lecture to Primary Care Pediatricians, Abington Memorial Hospital, April 24, 2012

“A Career in Ophthalmology”, National Youth Leadership Forum, Villanova, PA, June 28, 2012

“Pediatric Ophthalmology for Primary Care Physicians, Pediatricians, and Allied Health Professionals”, Wills Eye Institute, Philadelphia, January 7, 2012.

Resident Lecture: “Medical-Legal Concepts in Ophthalmology”, Wills Eye Institute, Philadelphia, PA, July 18, 2011.

“A Career in Ophthalmology”, National Youth Leadership Forum, Villanova, PA, July 15, 2011

Resident Lecture: “Oblique Muscle Surgery”, Wills Eye Institute, Philadelphia, PA, May 26, 2011.

Resident Lecture: “Essentials of Avoiding Medical Malpractice for the Ophthalmologist”, Wills Eye Institute, Philadelphia, PA, May 5, 2011.

Resident Lecture: “Learning Disability/Disorders”, Wills Eye Institute, Philadelphia, PA, February 1, 2011.

“Ophthalmology for the Pediatrician: “The Eye and Headaches”, Wills Eye Institute, Philadelphia, PA, January 8, 2011.

Grand Rounds: “Medical-Legal and Other Concerns in Ophthalmology Affecting Pediatricians and Primary Care Physicians”, Abington Memorial Hospital, June 2, 2010.

“Introducing an Emerging Therapeutic Option for the Treatment of Bacterial Conjunctivitis”, (Bausch & Lomb), Langhorne, PA, May 4, 2010.

“Medical-Legal Seminar: Avoiding Litigation in the Clinical Practice of Ophthalmology”, Wills Eye Institute, Philadelphia, PA, January 16, 2010.

“Ophthalmology for the Pediatrician: “Vision and Learning Disorders”, Wills Eye Institute, Philadelphia, PA, January 9, 2010.

“The Red Eye”, Meadowbrook Pediatrics, Meadowbrook, PA, December 14, 2009.

“Vertical Misalignments”, Wills Eye Institute Resident Lecture Series, Philadelphia, PA, November 10, 2009.

“Face Turns and Incomitant Strabismus”, Wills Eye Institute Resident Lecture Series, Philadelphia, PA, May 28, 2009.

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**INVITED LOCAL PRESENTATIONS (continued)**

“Systemic Disease Diagnosis Based on Eye Symptoms in Children & Adults”, Holy Redeemer Hospital, Meadowbrook, PA, March 18, 2009.

“Ophthalmology for the Pediatrician“, Wills Eye Institute, Philadelphia, PA, January 10, 2009.

“Medical Legal Pearls for Avoiding Litigation,” Holy Redeemer Hospital, Meadowbrook, PA, December 17, 2008.

“Learning Disorders and Visual Processing in Clinical Practice”, AAO Annual Meeting, Atlanta Georgia, November 10, 2008.

“Incomitant Deviations Causing Abnormal Head Positions”, Wills Eye Institute, Philadelphia, PA January 29, 2008.

Ophthalmology for the Pediatrician”, Wills Eye Institute, Philadelphia, PA January 5, 2008.

National Youth Leadership Forum: active participant, 2006, 2007, 2008, 2009, 2010, 2011, 2012.

“Management of Visual Processing in Pediatric Ophthalmology” (Presentation and Workshop), American Association of Certified Orthoptists, Philadelphia, PA July 14, 2007.

“Ophthalmology for the Pediatrician”, Wills Eye Hospital, Philadelphia, PA, January 27, 2007.

“Ophthalmology for the Pediatrician”, Wills Eye Hospital, Philadelphia, PA, January 21, 2006.

“Pediatric Diagnosis of the Red Eye”, Frankford Pediatrics, Philadelphia, PA, December 6, 2005.

“Avoiding Misdiagnosis in Children with Red Eyes”, Torresdale Pediatrics, Philadelphia, PA, September 27, 2005.

“The *Red Eye* Dilemma”, Red Lion Pediatrics, Philadelphia, PA, September 22, 2005.

“Visual Perception and Eye Movement Disorders”, Saint Vincent Catholic Medical Centers, Flushing, NY, May 5, 2005.

“Ophthalmology and Family Medicine”, Abington Family Medicine Practice, Jenkintown, PA, February 23, 2005.

“Ophthalmology for the Pediatrician: Headaches in Children--Ophthalmic Causes”, Wills Eye Hospital, Philadelphia, PA, January 29, 2005.

“Visual Perception & Learning in Children & Adults - The Primary Care Physician’s Role”, Grand Rounds, Abington Memorial Hospital, Abington, PA, July 21, 2004.

“Latest Innovations in Amblyopia Therapy and the Pediatric Ophthalmologist’s Approach to Visual Processing and Perception”, New York Medical College, Valhalla, NY, March 2, 2004.

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**INVITED LOCAL PRESENTATIONS (continued)**

“Understanding Your Child’s Learning Disabilities: A Multidisciplinary Approach”, Doylestown Hospital, Doylestown, PA, February 28, 2004.

“The Art of Strabismus Surgical Techniques”, Philadelphia College of Osteopathic Medicine, Philadelphia, PA, February 19, 2004.

“The Ophthalmologist’s Role in learning Disabilities”, Wills Eye Hospital, Philadelphia, PA, January 31, 2004.

“The Science of Visual Perception, Processing, and Learning”, Delaware Valley Pediatric Ophthalmology Society, Philadelphia, PA, January 14, 2004.

“The Pediatrician’s Role in the Diagnosis and Treatment of Learning Differences,” Frankford Hospital, Department of Pediatrics, Philadelphia, PA, September 12, 2003.

“Update on Visual Perception and Processing Disorders,” Ophthalmology for Pediatricians/Primary Care Physicians, Wills Eye Hospital, Philadelphia, PA, January 26, 2002.

“An Interdisciplinary Approach to Assisting Children with Learning Differences,” Supporting Parents of Exceptional Kids through Education (SPEKE), Cherry Hill, NJ, January 17, 2002.

“Dylexia and Headaches,” Wills Eye Hospital Pediatrics Eye Opener and Core Lecture, Wills Eye Hospital, Philadelphia, PA, December 4, 2001.

“Visual Perception and Processing: Easy Diagnosis in the Pediatric Ophthalmology Practice,” New Jersey American Academy of Pediatrics, Woodbridge, NJ, May 19, 2001.

“Update on Visual Perception and Processing Disorder,” Wills Eye Hospital, Philadelphia, PA, January 27, 2001.

“Unsuspected Visual and Perceptual Consequences of Prematurity,” Abington Memorial Hospital, Abington, PA, October 17, 2000.

“An Interdisciplinary Approach to Assisting Children with Learning Differences,” Widener University, Chester, PA, April 8, 2000.

“The Multidisciplinary Approach to Learning Differences,” Wills Eye Hospital Annual Conference, Adam’s Mark Hotel, Philadelphia, PA, March 11, 2000.

“Treating the Red Eye,” Guest lecturer for Speakers Alliance Program, Woodbridge, NJ, March 6, 2000.

“Update on Visual Perception and Processing Disorders,” Ophthalmology for the Pediatrician, Wills Eye Hospital, Philadelphia, PA, January 22, 2000.

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**INVITED LOCAL PRESENTATIONS (continued)**

*Dialogue with a Doctor Series*, “The Eye, Vision and Learning,” Doylestown Hospital, Doylestown, PA, January 17, 2000.

“Classroom Diagnoses of Learning Differences in Children,” Beaver College Graduate Colloquium Series, Glenside, PA, October 19, 1999.

“Visual Perception and Learning Differences – An Ophthalmologist’s View,” James H. Allen Guest Lecturer, 21<sup>st</sup> Annual Tulane Eye Alumni Day, Tulane University School of Medicine, New Orleans, LA, June 11-12, 1999.

“Treatment of Red Eyes,” Guest Lecturer for the Barnet Dulaney Foundation, Hasbrouck Heights, NJ, May 4, 1999.

“Reading & Learning Disorders – Are Your Child’s Eyes At Fault?” Lecture with Kenneth Goldberg, Psy.D., Northeast Regional Library, Philadelphia, PA, January 30, 1999.

“Visual Processing and Learning Deficiencies,” Wills Eye Hospital Conference for Pediatricians/Primary Care Physicians, Philadelphia, PA, January 23, 1999.

“Headaches and Learning Disabilities,” Wills Eye Hospital Core Lecture, Philadelphia, PA, January 21, 1999.

“Headaches and Learning Differences – Is There An Eye Problem?,” Temple University Hospital, Philadelphia, PA, January 5, 1999.

“Reading and Learning Disorders – Are Your Child’s Eyes At Fault?” Jeanes Hospital Speakers Bureau Lecture, Philadelphia, PA, May 14, 1998.

“Pre-Visit Cycloplegia for Pediatric Re-Examinations,” 50<sup>th</sup> Annual Wills Eye Hospital Conference, Philadelphia, PA, March 12, 1998.

“Learning, Vision and Systemic Illness (Does the Under-Achiever in School Have Something More Serious Going On?),” School Nurses’ Ophthalmologic Update, Wills Eye Hospital Conference, Philadelphia, PA, March 22, 1997.

Presented “Managed Care Ophthalmology – Is This Really Our Future?” at the Wills Eye Hospital Annual Conference, Philadelphia, PA, March 21, 1997.

“Ophthalmological Diagnoses Contributing to Learning Disabilities,” Clinical Center for the Study of Learning Disabilities, Chapel Hill, NC, February 25, 1997.

“Headaches – Ocular and Non-Ocular Causes,” Wills Eye Hospital Conference, Philadelphia, PA, January 25, 1997.

“Ocular Manifestations of Metabolic Disease,” Wills Eye Hospital Annual Conference, Philadelphia, PA, January 17, 1998.

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**INVITED LOCAL PRESENTATIONS (continued)**

“Does Vision Affect Learning in School?” presented to Delaware County Nurse Association, Springfield, PA, November 11, 1996.

“How Does Vision Affect Learning?,” School Nurses’ Ophthalmology Update Program presented by Wills Eye Hospital, Philadelphia, PA, March 16, 1996.

“Current Signs of a Positive Evolution in the Managed Care Environment,” 48<sup>th</sup> Wills Eye Hospital Annual Conference, Philadelphia, PA, March 15, 1996.

“Tearing in Infants and Children: Is It Serious?” Allegheny County Medical Society, Carnegie, PA, February 13, 1996.

“The Causes of Tearing and Red Eyes in Infants and Children,” New Castle County Pediatric Society, Wilmington, DE, November 28, 1995.

“Innovative Concepts in the Treatment/Diagnosis of Pediatric Eye Problems,” Southern New Jersey Pediatric Society, Westmont, NJ, July 11, 1995.

Lectured on “The Efficacy of Balloon Dacryoplasty in Congenital Lacrimal Obstruction,” Annual Tulane University School of Medicine Alumni Lecture, New Orleans, LA, June 9-10, 1995.

“Treating Red and Allergic Eyes in a Managed Care Environment,” Our Lady of Lourdes Hospital, Camden, NJ, April 25, 1995.

Guest Speaker at the Raleigh Journal Club on “Ocular Allergies and Treatment,” Raleigh, NC, April 18, 1995.

“Significant Causes of Visual Loss in Children,” Abington Memorial Hospital, Abington, PA, March 29, 1995.

Presented the following lectures at the Wills Eye Hospital Annual Conference, Philadelphia, PA, March 16-18, 1995:

- “The Efficacy of Balloon Dacryoplasty in Congenital Lacrimal Obstruction”
- “Intraocular Lenses in Children: The Wills Experience”
- “A Model for Ultimate Failure of the Managed Care System As We Know It”

Guest lecturer on “Allergies & Therapies,” Lehigh Valley Ophthalmologic Society, Bethlehem, PA, March 7, 1995.

“Cataracts,” Wills Eye Hospital Pediatric Update, Philadelphia, PA, January 28, 1995.

“Intraocular Lens Implants in Children,” Cooper Eye Institute, Our Lady of Lourdes Hospital, Camden, NJ, January 17, 1995.

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**INVITED LOCAL PRESENTATIONS (continued)**

Presented "The Incidence of Migraine in the Pediatric Ophthalmologic Practice," Annual Tulane University Medical School Alumni Lecture, New Orleans, LA, June 10, 1994.

"Managing Eye Problems in Your Office," presented to Jeanes Hospital Staff, June 3, 1994.

Lecture on "Current Trends in Ocular Allergy Management" for the South Jersey Allergy Society, May 3, 1994.

"Migraine in Children," Wills Eye Hospital Annual Conference, April 23, 1994.

Guest speaker on Ophthalmology at the Annual Meeting of the Philadelphia Dermatologic Society Meeting, St. Christopher's Hospital for Children, March 18, 1994.

"Diagnosis and Treatment of Pediatric Migraine," Ophthalmology Department Meeting, Children's Hospital of Philadelphia, Philadelphia, PA, February 28, 1994.

"Organic Causes of Amblyopia in Childhood," Grand Rounds, Department of Pediatrics, Medical College Hospitals, Philadelphia, PA, February 17, 1994.

Guest Lecturer on Pediatric Ophthalmology, Penn State University School of Medicine Grand Rounds, Hershey, PA, August 18, 1993.

"Indications for Intraocular Lens Implants in Children," Annual Tulane University School of Medicine Alumni Day, New Orleans, LA, June 12, 1993.

"Indications for Intraocular Lens Implants in Children," Children's Hospital of Philadelphia, Philadelphia, PA, May 14, 1993.

"Complications with Intraocular Lens Implants," Wills Eye Hospital Annual Conference, April 1-3, 1993.

"Cataract Surgery in Children," Wills Eye Hospital Ophthalmology Update for Pediatricians, Philadelphia, PA, January 16, 1993.

"Diagnosis and Management of Congenital Cataracts," Our Lady of Lourdes Pediatric Department, Camden, NJ, September 22, 1992.

"Intraocular Lens Implantation in Children – Why, When, and How," The Eye Institute of New Jersey, Newark, NJ, June 15, 1992.

"Diplopia as an Indicator of Systemic Disease," Abington Memorial Hospital Department of Family Practice, Abington, PA, June 14, 1992.

"The Diagnosis and Treatment of Congenital (Infantile) Cataracts," Wills Eye Hospital Ophthalmology Update for the Pediatrician, Philadelphia, PA, January 18, 1992.



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**INVITED LOCAL PRESENTATIONS (continued)**

“Diagnosis as an Indicator of Systemic Disease,” Holy Redeemer Hospital Family Practice Physicians, Meadowbrook, PA, February 20, 1991.

“Pediatric Ophthalmology in the Future,” Lehigh Valley Ophthalmologic Society, Bethlehem, PA, January 8, 1991.

“Overview of Pediatric Ophthalmology,” Abington Memorial Hospital Family Practice Residents, Abington, PA, December 13, 1990.

“Diplopia as an Indicator of Systemic Disease,” Wills Eye Hospital – Ophthalmology Update for the Primary Care Physician, Philadelphia, PA, October 10, 1990.

“The Treatment of Visual Losses in Children,” Southampton Lions Club, Meadowbrook, PA, April 25, 1990.

“Cataracts in Children,” Wills Eye Hospital Pediatric Ophthalmology Update, Philadelphia, PA, April 7, 1990.

“Blocked Tear Ducts in Infants,” 1990 Wills Eye Hospital Annual Conference, Philadelphia, PA, March 31, 1990.

**PRESENTATIONS AT NATIONAL SCIENTIFIC MEETINGS**

“Why Can’t EYE Learn?” Learning Differences and Visual Perception from a Pediatric Ophthalmology and Neuropsychology Perspective, Sponsored by the American Academy of Pediatrics’ Section on Ophthalmology and the Jefferson Medical College Office of CME, March 21, 2001, Orlando, Florida.

“Learning Differences in Pediatric Ophthalmology Practices: Parental Perception,” Poster Presentation (Harold P. Koller, M.D., Stephen R. Glaser, M.D., Kenneth B. Goldberg, Psy.D.), American Association for Pediatric Ophthalmology and Strabismus, March 2001, Orlando, Florida.

“Pre-Visit Home Cycloplegia in Pediatric Ophthalmology: An Outcome Study,” The American Association for Pediatric Ophthalmology and Strabismus Annual Meeting, April 8, 1998, Palm Springs, CA.

“Practicing Pediatric Ophthalmology in a Managed Care Environment: Strategy for Success,” American Academy of Pediatrics Annual Meeting, April 12, 1995, Philadelphia, PA.

“Childhood Migraine in a Pediatric Ophthalmic Practice,” The American Association for Pediatric Ophthalmology and Strabismus Annual Meeting, April 18, 1993, Palm Springs, CA.

“The Diagnosis and Management of Congenital and Juvenile Cataracts,” The American Academy of Pediatrics Annual Spring Meeting, April 13, 1992, New York, NY.

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**PRESENTATIONS AT NATIONAL SCIENTIFIC MEETINGS (continued)**

“Efficient Organization of a Pediatric Ophthalmology Practice,” The American Association for Pediatric Ophthalmology and Strabismus Annual Meeting – Practice Enhancement Workshop, May 18, 1991, Montreal, Canada.

“The Diagnosis and Implications of Migraine in the Pediatric Ophthalmology Practice,” Eastern Regional Orthoptic Meeting, March 13, 1990, Princeton, NJ.

*Over 100 additional presentations locally and nationally 1965 to 1990-unlisted.*