

I first fell in love with ophthalmology—and, though I did not yet realize it, with retina—as a high schooler shadowing a pars plana vitrectomy. That love was further developed in the laboratory as an undergraduate, dissecting out tiny mouse retinas and analyzing waveforms from microelectrode arrays. In residency, it became something more tangible: the ability to restore vision with our own hands. I still think about the moment my attending gently peeled a diabetic tractional membrane off my patient’s optic nerve, an act that was both technically precise and profoundly human.

Since then, I have been drawn to the aspects of retina that are both technically demanding and clinically uncertain. It has been especially meaningful to care for patients with complex, vision-threatening retinal disease in my own continuity clinic, to be able to prevent retinal detachments through laser retinopexy even as an early resident on call, and to see how research—even my own—can directly inform clinical decision-making. These experiences have shaped my decision to pursue vitreoretinal fellowship and a career in academic ophthalmology.

I hope to continue engaging in research as part of a career in vitreoretinal surgery, particularly given that retina has always been a field that has been at the forefront of innovation, with open collaboration, partnership with industry, and landmark trials that frequently reshape clinical practice. I am especially interested in studying complications of retinal therapies and variability in outcomes in real-world settings. At the same time, mentorship has been integral to my training, both through the guidance I have received and through my own work mentoring junior residents on call and medical students in free eye care clinics, and I hope to continue supporting trainees as they develop their own paths.

The Heed Resident Retreat represents an opportunity to better understand how to translate these interests into an academic career. I am eager to learn from physician-scientists who have successfully balanced clinical care, research, and education, and to connect with peers who share a similar commitment to academic ophthalmology.