MEMORANDUM FOR SGCEE
ATTN: CAPT COLIN GALLAGHER

FROM: 59 MDW/SGVU

SUBJECT: Professional Presentation Approval

1. Your paper, entitled LPR5 Mutation Case Presentation presented at/published to Third Coast Retina, Dallas, TX 23 April 2016 with MDWI 41-108, and has been assigned local file #16148.

2. Pertinent biographic information (name of author(s), title, etc.) has been entered into our computer file. Please advise us (by phone or mail) that your presentation was given. At that time, we will need the date (month, day and year) along with the location of your presentation. It is important to update this information so that we can provide quality support for you, your department, and the Medical Center commander. This information is used to document the scholarly activities of our professional staff and students, which is an essential component of Wilford Hall Ambulatory Surgical Center (WHASC) internship and residency programs.

3. Please know that if you are a Graduate Health Sciences Education student and your department has told you they cannot fund your publication, the 59th Clinical Research Division may pay for your basic journal publishing charges (to include costs for tables and black and white photos). We cannot pay for reprints. If you are 59 MDW staff member, we can forward your request for funds to the designated wing POC.

4. Congratulations, and thank you for your efforts and time. Your contributions are vital to the medical mission. We look forward to assisting you in your future publication/presentation efforts.

LINDA STEEL-GOODWIN, Col, USAF, BSC
Director, Clinical Investigations & Research Support
PROCESSING OF PROFESSIONAL MEDICAL RESEARCH/TECHNICAL PUBLICATIONS/PRESENTATIONS

1. TO CLINICAL RESEARCH
   2. FROM: (Author's Name, Rank, Grade, Office Symbol)
      Colin Gallagher, Capt, O-3, SGCEE

3. GME/GHSE STUDENT
   YES NO

4. PROTOCOL NUMBER
   Case Report

5. PROTOCOL TITLE: (NOTE: For each new release of medical research or technical information as a publication/presentation, a new 59 MDW Form 3039 must be submitted for review and approval.)
   Case Report

6. TITLE OF MATERIAL TO BE PUBLISHED OR PRESENTED:
   LPR5 Mutation Case Presentation

7. FUNDING RECEIVED FOR THIS STUDY? YES NO
   FUNDING SOURCE:

8. DO YOU NEED FUNDING SUPPORT FOR PUBLICATION PURPOSES? YES NO

9. IS THIS MATERIAL CLASSIFIED? YES NO

10. IS THIS MATERIAL SUBJECT TO ANY LEGAL RESTRICTIONS FOR PUBLICATION OR PRESENTATION THROUGH A COLLABORATIVE RESEARCH AND DEVELOPMENT AGREEMENT (CRADA), MATERIAL TRANSFER AGREEMENT (MTA), INTELLECTUAL PROPERTY RIGHTS AGREEMENT ETC.? YES NO
    NOTE: If the answer is YES then attach a copy of the Agreement to the Publications/Presentations Request Form.

11. MATERIAL IS FOR: DOMESTIC RELEASE FOREIGN RELEASE
    CHECK APPROPRIATE BOX OR BOXES FOR APPROVAL WITH THIS REQUEST, ATTACH COPY OF MATERIAL TO BE PUBLISHED/PRESENTED.
    Publication/Journal (List intended publication/journal.)
    Published Abstract (List intended journal.)
    Poster (To be demonstrated at meeting: name of meeting, city, state, and date of meeting.)
    Platform Presentation (At civilain institutions: name of meeting, city, state, and date of meeting.)
    Third Coast Retina, Dallas, TX, on 23 April 2016
    Other (Describe: name of meeting, city, state, and date of meeting.)

12. EXPECTED DATE WHEN YOU WILL NEED THE CRD TO SUBMIT YOUR CLEARED PRESENTATION/PUBLICATION TO DTIC
    NOTE: All publications/presentations are required to be placed in the Defense Technical Information Center (DTIC).

   DATE
   April 22, 2016

13. 59 MDW PRIMARY POINT OF CONTACT (Last Name, First Name, M.I., email)
    Silva, Debbie, deborah.silva@us.af.mil

14. DUTY PHONE/PAGER NUMBER
    210-292-6573

15. AUTHORSHIP AND CO-AUTHOR(S) List in the order they will appear in the manuscript
    LAST NAME, FIRST NAME AND M.I.   GRADE/RANK   SQUADRON/GROUP/OFFICE SYMBOL   INSTITUTION (If not 59 MDW)
    Gallagher, Colin O3 59 Trng Squadron/59MDG/SGCEE

   a.
   b.
   c.
   d.
   e.
   f.

I CERTIFY ANY HUMAN OR ANIMAL RESEARCH RELATED STUDIES WERE APPROVED AND PERFORMED IN STRICT ACCORDANCE WITH 32 CFR 219, AFMAN 40-401, JP, AND 59 MDW 41-108. I HAVE READ THE FINAL VERSION OF THE ATTACHED MATERIAL AND CERTIFY THAT IT IS AN ACCURATE MANUSCRIPT FOR PUBLICATION AND/OR PRESENTATION.

16. AUTHOR’S PRINTED NAME, RANK, GRADE
    Colin Gallagher, Capt, O3

   17. AUTHOR’S SIGNATURE
      GALLAGHER COLIN FRANCIS 11
      71271262
      Date: 20160302

18. DATE
    March 26, 2016

   19. APPROVING AUTHORITY’S PRINTED NAME, RANK, TITLE
      Walter Steigemean, CDR, Ophthalmology Program Director

   20. APPROVING AUTHORITY’S SIGNATURE
      STEIGLEMAN WALTER A 118693
      Date: 20160302

   March 28, 2016
The presentation is approved.
**PROCESSING OF PROFESSIONAL MEDICAL RESEARCH/TECHNICAL PUBLICATIONS/PRESENTATIONS**

1st ENDORSEMENT (59 MDW/SGVU Use Only)

<table>
<thead>
<tr>
<th>TO: Clinical Research Division</th>
<th>22. DATE RECEIVED</th>
<th>23. ASSIGNED PROCESSING REQUEST FILE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>69 MDW/CHD</td>
<td>3/30/2016</td>
<td>16148</td>
</tr>
</tbody>
</table>

24. DATE REVIEWED: 6 Apr 2016

25. DATE FORWARD TO 502 ISEGJAC: 

26. AUTHOR CONTACTED FOR RECOMMENDED OR NECESSARY CHANGES: ☑ NO ☐ YES If yes, give date: N/A

27. COMMENTS: ☑ APPROVED ☐ DISAPPROVED

The presentation is approved.

28. PRINTED NAME, RANK/GRADE, TITLE OF REVIEWER: Rocky Calcote, PhD, Clinical Research Administrator

29. REVIEWER SIGNATURE: CALCOTE ROCKY D 117824564

30. DATE: 

---

2nd ENDORSEMENT (502 ISEGJAC Use Only)

31. DATE RECEIVED: 

32. DATE FORWARD TO 502 MDWPA: 

33. COMMENTS: ☑ APPROVED (In compliance with security and policy review directives.) ☐ DISAPPROVED

Slide presentation includes the disclaimer required by the Joint Ethics Regulation. There are no ethics issues with making this presentation at the Third Coast Retina meeting on 23 April 2016.

34. PRINTED NAME, RANK/GRADE, TITLE OF REVIEWER: Arlene R. Christilles, GS-14, Chief, Civil Law

35. REVIEWER SIGNATURE: [Signature]

36. DATE: 7 Apr 2016

---

3rd ENDORSEMENT (59 MDW/PA Use Only)

37. DATE RECEIVED: 

38. DATE FORWARD TO 59 MDWS/SGVU: 

39. COMMENTS: ☐ APPROVED (In compliance with security and policy review directives.) ☑ DISAPPROVED

---

40. PRINTED NAME, RANK/GRADE, TITLE OF REVIEWER: 

41. REVIEWER SIGNATURE: 

42. DATE: 

---

4th ENDORSEMENT (59 MDW/SGVU Use Only)

43. DATE RECEIVED: 

44. SENIOR AUTHOR NOTIFIED BY PHONE OF APPROVAL OR DISAPPROVAL: YES ☐ NO ☐ COULD NOT BE REACHED ☐ LEFT MESSAGE

45. COMMENTS: ☐ APPROVED ☑ DISAPPROVED

---

46. PRINTED NAME, RANK/GRADE, TITLE OF REVIEWER: 

47. REVIEWER SIGNATURE: 

48. DATE: 

---
HOW OLD?

COLIN GALLAGHER

DISCLOSURES

The views expressed are those of myself, Dr. Gallagher, and do not reflect the official views or policy of the Department of Defense or its Components.
HISTORY OF PRESENT ILLNESS

- Chief Complaint: Decreased red reflex of right eye

- HPI: 3 day old M referred from pediatrics for decreased leukocoria in right eye

HPI CONTINUED

PMHx:  
- Term from G2P2  
- Uncomplicated SVD  
- Denied consanguinity  
- (-) infectious screen  
- Passed hearing screen

Schx: Non-contributory

Meds: None

ALL: None

PSHx:  
- None
FHX - SISTER AT 4 MO

PHYSICAL EXAM

VA:
- OD: NBTL
- OS: BTL

External Exam:
microphthalmic right eye
PSLE:

- LLL: Nml OU
- C/S: W & Q OU
- K: Clr & Q OU
- AC: D & Q OU
- I: F & R OU
- L: retrolental opacity OD>OS

DILATED FUNDUS EXAM
LABS

<table>
<thead>
<tr>
<th>Test</th>
<th>Source</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acylcarnitine Panel</td>
<td>Blood</td>
<td>Normal</td>
</tr>
<tr>
<td>Amino Acids Profile Neonatal</td>
<td>Blood</td>
<td>Normal</td>
</tr>
<tr>
<td>G6PD Gene Mutation Analysis</td>
<td>Blood</td>
<td>Normal</td>
</tr>
<tr>
<td>17-Hydroxyprogesterone</td>
<td>Blood</td>
<td>Normal</td>
</tr>
<tr>
<td>Cystic Fibrosis Screen</td>
<td>Blood</td>
<td>Normal</td>
</tr>
<tr>
<td>Biotinidase Neonatal</td>
<td>Blood</td>
<td>Normal</td>
</tr>
<tr>
<td>Thyrotropin Neonatal</td>
<td>Blood</td>
<td>Normal</td>
</tr>
<tr>
<td>Hemoglobinopathy</td>
<td>Blood</td>
<td>Normal</td>
</tr>
<tr>
<td>Galactose Neonatal</td>
<td>Blood</td>
<td>Normal</td>
</tr>
</tbody>
</table>

DIFFERENTIAL DIAGNOSIS

- Retinoblastoma
- Retinopathy of prematurity
- Coats disease
- Norrie disease
- X-linked/AD familial exudative vitreoretinopathy
- Persistent fetal vasculature/persistent hyperplastic primary vitreous syndrome
- ATOH7 mutation
FETAL VASCULATURE

LITERATURE

Pathophysiology and Mechanisms of Severe Retinopathy of Prematurity

M. Elizabeth Harmsen, MD

STUDIES ON THE PATHOGENESIS OF AVASCULAR RETINA AND NEOVASCULARIZATION INTO THE VITREOUS IN PERIPHERAL-SEVERE RETINOPATHY OF PREMATURITY (AN AMERICAN OPHTHALMOLOGICAL SOCIETY THESIS)

by Mary Elizabeth Harmsen MD
LITERATURE

Locus for Autosomal Recessive Nonsyndromic Persistent Hyperplastic Primary Vitreous
Shagufa Khaliq, Abdul Hamied, Muhammad Ismail, Khalid Atwar, Sart Larco, Annemete M. Payne, Shomi S. Bhattacharya, S. Qasim Memon

LITERATURE

ATOH7 mutations cause autosomal recessive persistent hyperplasia of the primary vitreous
Lev Prasov1,2, Tehmina Musadiq3,2, Shagufa Khaliq2, S. Qasim Mehdi4, Alysha Abid1, Edward R. Oliver3, Eduardo D. Silva2, Amy Lewanda1, Michael C. Brodsky5, Mark Borchert6, Daniel Kelberman9, Jane C. Sowden10, Mehul T. Dattani11 and Tom Glaser1,2.
LITERATURE

Visual Acuity Outcomes with and without Surgery in Patients with Persistent Fetal Vasculature

George Alexandrakis, MD, Ingold U. Scott, MD, MPH; Harry W. Flynn, Jr., MD; Timothy G. Murasz, MD; William J. Feuer, MS

LITERATURE

Infant Aphakia Treatment Study: Effects of persistent fetal vasculature on outcome at 1 year of age

David G. Morrison, MD, M. Edward Wilson, MD; Rupal H. Trivedi, MD, MSCR; Scott R. Lambert, MD; and Michael J. Lynn, MS, for the Infant Aphakia Treatment Study Group
DISCUSSION

- Treatment options?
- Similar presentations?
THANK YOU

Dr. Kim
Dr. Grant
Dr. Harper

REFERENCES