

Move to the cutting edge of medicine.



THE MEDICAL DIRECTOR AT GENENTECH



Using human genetic information to create better therapies is the cutting edge of medicine—and Genentech is already there. While most biotech research in the United States has yet to result in an approved product, we have brought more than 10 new and groundbreaking treatments to millions of patients in our 27-year history. With the most robust development pipeline in the industry, we're prepared to push further still. **Meet eight medical directors who chose to join Genentech and turn the possibilities of biotechnology into improved realities for patients.** They, like you, are doctors and scientists who are experts in their field. They have come from private practice, academia, or other companies in the industry. Each one had personal and professional reasons for making the move, but they all have one thing in common: They like a challenge.



{ Ivor Caro }  
MEDICAL DIRECTOR, DERMATOLOGY

Came from Harvard Medical School and Massachusetts General Hospital in Boston,  
where he was Director, Dermatology Clinical Investigations Unit;  
Director, International Training Program in Dermatology; and Assistant Professor of Dermatology.

Joined Genentech in June 2003.

“Here I am, 57 years old with a whole new career ahead of me. I feel like a resident again.”

“I’m a clinical dermatologist at heart, so I find my work here incredibly exciting. At Harvard, I was involved in clinical trials of late-stage medications. But here I have a chance to take a promising drug molecule from pre-clinical research through to FDA approval. My wife asks me every day if I had fun, and I give her a resounding yes. I’m working with some of the brightest people I’ve ever worked with, I’m plundering the medical library, and I’m studying an area of particular interest to me—auto-immune diseases with skin involvement.”



{ Pam Klein }  
ASSOCIATE GROUP DIRECTOR,  
HERCEPTIN® AND TARCEVA™

Came from the National Cancer Institute in Bethesda, Maryland,  
where she was Research Director, NCI/Navy Breast Care Center.

Joined Genentech in April 2001.

“The first monoclonal antibody specifically targeted for breast cancer was created at Genentech. That’s why I came here. I worked with breast cancer patients at the NCI and I saw what Herceptin could do for these women and their quality of life and care. And I wanted to be a part of that progress. Nothing even close is happening anywhere else.”

“Compared with government or academia, people—and drugs—develop faster here. The scope of my responsibilities has rapidly grown to include two drugs and a team of medical directors.”

“When I started, I was told something that I now tell others who join my team: *If you think about what’s right for the patient, you’ll never make a wrong decision.* This company lives by those words. And I think we attract the excellent people we do because of that.”



{ **Matt Rhoa** }

MEDICAL DIRECTOR,  
SPECIALTY BIOTHERAPEUTICS

Came from Wyeth Pharmaceuticals in Philadelphia, Pennsylvania,  
where he was Senior Medical Director of Women's Health.

Joined Genentech in January 2003.

“My background is gynecology, but I’ve had the chance here to explore additional areas like endocrinology and pulmonary medicine.”

“At larger pharmaceutical companies you don’t get the same opportunity to work across research phases and across drug programs. And some of the most important and interesting work we do here is Phase IV research, where we discover new benefits of marketed drugs that often lead to additional indications. Working closely with our colleagues in clinical practice, we can then explore this newfound potential and support their research interests.”



{ William Novotny }  
PRINCIPAL MEDICAL DIRECTOR, AVASTIN™

Came from the Hematology and Oncology faculty at the University of California in San Diego, where he was researching, teaching, and treating patients.

Joined Genentech in June 1995.

“I’ve certainly had the chance to put my scientific training to very good use here. I’ve worked on many drugs and on many parts of the process—from writing Biologic License Applications and designing clinical protocols to analyzing the safety data. In this capacity, I know I’m influencing many more patients than I could otherwise.”

“I don’t think I would have had the opportunities and the responsibilities I’ve had here anywhere else. It’s been an eight-year adventure in science, and it’s only just begun.”

“This is a good time to join Genentech. The cancer research that’s happening in buildings 10, 11, and 12 is first class. These scientists are committed to becoming the biggest force in oncology in the world and there’s a very strong pipeline of cancer therapies to get involved in as a medical director.”



{ **Paula O'Connor** }

ASSOCIATE MEDICAL DIRECTOR, RITUXAN®

Came from Massachusetts General Hospital in Boston,  
where she was the Attending Physician for the Lymphoma/Hematology Service.

Joined Genentech in August 2002.

“Genentech’s chief operating officer is a woman of color, so I know there are no  
limits to how I can grow and contribute.”

“When I came for my interview I noticed the *Journal of Clinical Oncology* and *Blood* magazine on every-  
one’s shelf. It made quite an impression. It showed me that people here have a desire to know, that they  
don’t think they have all the answers—and that they have respect for the science and efforts of others. I  
knew that this would be an opportunity to learn a great deal and contribute to improving patient care.”



{ Kip Benyunes }  
GROUP DIRECTOR,  
CLINICAL HEMATOLOGY AND ONCOLOGY }

Came from Cellpro Inc. in Seattle, Washington, where he was the Medical Director.

Joined Genentech in January 1998.

“I’ve had such a fantastic experience here that I’m truly excited about supporting and guiding others who want to come. I’m here to help you do this job very well, because we need smart, committed people in order to keep on making history.”

“Starting in this industry is a whole new beginning, and your first year is like a fellowship.

We’ll expose you to a great deal so you can decide what really grabs you.”

“It is extremely gratifying to watch a drug program grow and change to reach its potential. Rituxan was the first monoclonal antibody approved for the treatment of cancer in the United States. The initial scope of our program was small, but now Rituxan is the biggest oncology drug in the world.”



**Morris Cheeks**  
ASSOCIATE MEDICAL DIRECTOR,  
PULMONARY

Came from Proctor & Gamble in Cincinnati, Ohio,  
where he was Associate Medical Director, Cardiovascular & Internal Medicine.

Joined Genentech in September 2000.

“I feel very positive about my work here. The culture encourages me to care, educate,  
and ultimately be an advocate for the patient.”

“We’re exploring new territory so everything is not all figured out, as it was in my former job. Consequently, we are not limited by the way it’s always been done. I have the freedom and the challenge to make my job what I want it to be. And I have ownership of my projects and the opportunity to present the team’s work to professional associations. Looking back at my decision to join Genentech, I’d have to say that intellectual stimulation was the biggest draw—and I haven’t been disappointed.”



**Charles Semba**  
ASSOCIATE GROUP DIRECTOR,  
VASCULAR MEDICINE AND NEUROLOGY

Came from the faculty of Stanford University Medical School, Stanford, California, where he was an Associate Professor of Cardiovascular-Interventional Radiology and Director of the Interventional Radiology Fellowship Program.

Joined Genentech in September 2000.

“I was a device-based interventionist, but I realized that we were reaching the plateau of what we can do with mechanics alone. The future lies in understanding molecular platforms. Because when we understand what the cells and genes are doing to cause disease, we can create treatments that are more targeted and less invasive. My ultimate goal is to heal more elegantly. And I can reach that goal through my work at Genentech.”

“The support I get here lets me do the best work I can. I’m no longer a lone academician hustling for grants and trying to fix my own computer.”

“There is a wealth and breadth of scientific endeavor going on at Genentech. And we have secured thousands of patents that will allow us to explore where our collective passion and curiosity take us.”

In October 2003, *Science* magazine named Genentech the “top employer and most admired company in the biotechnology and pharmaceutical industries” for the second year in a row.

Genentech, its management, and its founders are regularly recognized as leaders in the biotechnology industry.

Meet the management team you’ll work with if you join Genentech as a medical director:

Susan Desmond-Hellmann, M.D., M.P.H.

EXECUTIVE VICE PRESIDENT, DEVELOPMENT AND PRODUCT OPERATIONS AND CHIEF MEDICAL OFFICER

Susan Desmond-Hellmann joined Genentech in 1995 as a medical director. She is the Chief Medical Officer and a member of Genentech’s Executive Committee. Prior to joining Genentech, Hellmann was associate director of clinical cancer research at Bristol-Myers Squibb Pharmaceutical Research Institute. She received her medical degree from the University of Nevada, Reno, a master’s degree in epidemiology and biostatistics from the University of California, Berkeley, and trained in Internal Medicine and Oncology at the University of California, San Francisco.

## Hal Barron, M.D., FACC

VICE PRESIDENT, MEDICAL AFFAIRS

Hal Barron joined Genentech in 1996 as a medical director. After directing Cardiovascular Research and Specialty BioTherapeutics, he was promoted to vice president of Medical Affairs, where he is now responsible for the oversight of all Genentech clinical activities. Prior to Genentech, Barron was an assistant professor at the University of California, San Francisco (UCSF). He received his medical degree from Yale University. He was trained in internal medicine and in cardiology at UCSF.

## Gwen Fyfe, M.D.

VICE PRESIDENT, CLINICAL HEMATOLOGY/ONCOLOGY

Gwen Fyfe joined Genentech in 1997 as director of Oncology in Medical Affairs. She is responsible for the clinical development of all oncology drugs. Prior to Genentech, Fyfe was director of Oncology Research and Development at Chiron Corporation. She received her medical degree and fellowship training in Immunology from Washington University in St. Louis. She also performed fellowships in Oncology at St. Louis Children's Hospital, Missouri, and in Hematology at Oakland Children's Hospital.

## Charlie Johnson, M.D.

SENIOR DIRECTOR, SPECIALTY BIOTHERAPEUTICS

Charlie Johnson joined Genentech in 1994 as a medical director. He is currently responsible for the clinical development of all drugs in immunology, neurology, and vascular medicine. Prior to Genentech, Johnson was the director of the Cystic Fibrosis Center at Washington University in St. Louis. He received his medical degree from the University of Cape Town in South Africa and completed his fellowship in Pediatric Pulmonology at Washington University.

Genentech is poised to make many of the next decade's discoveries in oncology, vascular medicine, and the treatment of immunological diseases. But we need your passion and curiosity to help drive these drugs from *promising* to *proven*.

Are you ready to move to the cutting edge of medicine?

Visit [www.gene.com/careers](http://www.gene.com/careers) and click Medical/Clinical affairs.



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