Gastroenteropancreatic neuroendocrine tumors (GEP-NETs) and pheochromocytomas/paragangliomas (PHEOs/PARAs) are extremely rare, usually slow to develop and difficult to diagnose. Symptoms can be vague, varied and even absent. Due to the rarity, slow development and potentially life-threatening complications, early diagnosis and successful management depends largely on:

- Physician experience and expertise
- Advanced imaging and laboratory facilities
- Genetic testing
- Multidisciplinary treatments

The Penn Neuroendocrine Tumor Program is a multidisciplinary program centered on the diagnosis, staging and treatment of GEP-NETs and PHEOs/PARAs. Penn Medicine is the only academic medical center in the United States with a unified program for both GEP-NETs and PHEOs/PARAs. The Penn NET program features a dedicated nurse coordinator and tumor board review of cases.

The Penn NET program aims to:

- Provide a comprehensive, patient-centered approach to the care of patients diagnosed with neuroendocrine tumors.
- Advance clinical, translational, and basic research in neuroendocrine tumor epidemiology and treatments.
- Provide training and education of students, residents, fellows, pharmacy students, nurses, and physician extenders across disciplines in the diagnosis, management, and treatment of neuroendocrine tumors.
- Enhance public awareness, patient education, and advocacy of neuroendocrine tumors.

**David Metz, MD**  
Co-Director
Dr. Metz is a professor of medicine and associate chief of clinical affairs in the division of gastroenterology. An expert in neuroendocrine tumors, Dr. Metz has extensive experience diagnosing and treating these rare disorders. He has a particular interest in the early diagnosis of both alimentary tract and pancreatic neuroendocrine tumors.

**Debbie Cohen, MD**  
Co-Director
Dr. Cohen is an associate professor of medicine and director of hypertension in the division of renal electrolyte and hypertension. She has focused research interests in hypertension in the field of pheochromocytoma and adrenal hypertension.

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