A LENS THAT FEELS LIKE

NOTHING

FOR PRESBYOPIC PATIENTS

DAILIES TOTAL1® MULTIFOCAL CONTACT LENSES

The World's First and Only Water Gradient Lens

Designed for Exceptional Comfort[1-3]

Precision Profile® Design

Built to Deliver Seamless Vision at All Distances, Near Through Far[4]

96% FIT SUCCESS

WITH 2 LENSES OR LESS PER EYE with the latest fitting process for Alcon multifocal contact lenses[5,6]

Prescribe DAILIES TOTAL1® Multifocal for your presbyopic patients today

References: 1. Kern J, Kannarr S, Miller J. Clinical Outcomes for Dailies Total1 Multifocal Lens in Symptomatic Patients. Poster presented at the Annual Clinical Conference & Exhibition of the British Contact Lens Association (BCLA); June 9-11, 2017; Liverpool, UK **2.** Angelini TE, Nixon RM, Dunn AC, et al. Viscoelasticity and mesh-size at the surface of hydrogels characterized with microrheology. *Invest Ophthalmol Vis Sci*. 2013;54:E-abstract 500. **3.** Thekveli S, Qui Y, Kapoor Y, et al. Structure-property relationship of delefilcon A lenses. *Cont Lens Anterior Eye*. 2012;35(suppl 1):e14. **4.** Lemp J, Kern J. Alcon multifocal contact lenses for presbyopia correction. Presented at the Canadian Association of Optometrists Congress; June 28-30, 2017; Ottawa, ON. **5.** Bauman E, Lemp J, Kern J. Material effect on multifocal contact lens fitting of lenses of the same optical design with the same fitting guide. Poster presented at the British Contact Lens Association Clinical Conference & Exhibition, June 9-11, 2017. Liverpool, UK. **6.** Merchea M, Evans D, Kannarr S, Miller J, Kaplan M, Nixon L. Assessing a modified fitting approach for improved multifocal contact lens fitting success. Paper presented at Optometry's meeting; June 20-24, 2018; Denver, CO.

See product instructions for complete wear, care and safety information. Rx only

© 2019 Alcon Inc. 09/19 US-DTM-1900026

Alcon

SECO DAILY
FRIDAY, MARCH 6, 2020

Topics covered in today's OD courses, **p.6**
Special four-page guide to the exhibits, **p.11**
SECO welcomes optometry's students, **p.18**

AEs: The Dark Side of Therapy

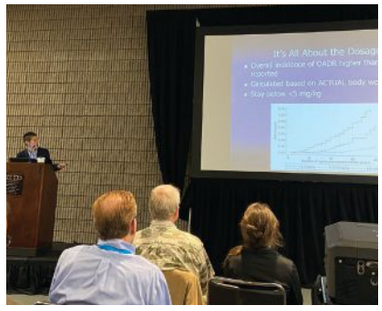
Even the best-laid treatment plans can sometimes lead to adverse events. Here's how to prepare—and adapt.

No one wants to add insult to injury, but for some patients on systemic medical treatment, it's unavoidable. Adverse events (AEs) are possible for just about any medication, and optometrists have to be on high alert when they see systemic treatment in the medical history, according to Tammy Than, OD, who spoke to a packed house on Wednesday. Adverse events aren't as rare as you might think, and the eye is particularly vulnerable, she said. "The eye has an extensive blood supply and a small mass, so it doesn't take much to cause a problem."

Dr. Than kicked off her afternoon lecture, "When Good Drugs Go Bad: Ocular Adverse Side Effects," with a quick primer on how to calculate the probability of seeing an AE. Using a mathematical model, Dr. Than explained that clinicians have to observe at least 300 patients to see an adverse event with an incidence of 1% or higher—and 3,000 patients if the incidence is only 0.1%. "That may seem like a lot, but over the lifetime of a practice, even those are pretty good odds you will see something," she admitted.

Not Rare in Your Chair

Dr. Than walked her attendees through a handful of systemic medications that could wreak havoc on the eyes, beginning with a newly approved medication for metastatic bladder cancer, Balversa (erdafitinib, Johnson & Johnson). This medication is linked to central serous retinopathy and pigment epithelial detachment in up to 25% of patients. "One thing you will notice with these patients, and many experiencing ocular effects, is that these events usually happen pretty quickly, so you will need to ask the patient how long they have been taking the drug." For Balversa, complications will likely present within the first 50 days, she said. Clinicians should watch these patients closely, with monthly follow up for the first four months and then every three months after that.



Dr. Than helped her audience understand the updated Plaquenil guidelines.

Offender Line-up

Dr. Than then touched on some of the more well-known troublemakers, such as Plaquenil (hydroxychloroquine sulfate, Sanofi-Aventis).

Plaquenil is usually prescribed for patients with rheumatoid arthritis or lupus, but researchers are looking into it as a therapy for diabetes, heart disease and certain cancers. "Can you imagine if your patients with diabetes are on this drug? Your OCT would be running all the time," she said. Once you catch early signs, you need to communicate that finding to the prescribing doctor and recommend they stop the medication.

See Treatment, Page 21

WHAT'S INSIDE

Get to know today's refractive surgery options..... 3
Earn CEE at these sessions..... 3
MedPRO360 homes in on dry eye practice-building..... 4
Optometry's Marketplace™ opens for business..... 4
Tomorrow: Learn the ins and outs of glaucoma..... 5
Steer clear of trauma drama.... 15
How to spot a disc at risk..... 16
Tonight: Alumni receptions..... 16
Sleuth out red eye etiologies.... 17
Lid lesion lessons..... 21

OIS Provides a Peek into the Future

Leaders from industry and practice discussed new therapies and treatments.

The second annual Ophthalmic Innovation Summit at SECO took place Wednesday afternoon. The event brought together practice and industry leaders from all over the world to discuss new therapies and treatments that address eye diseases and disorders. "Having the summit at the start of the meeting gives us a chance to use that first day and allow attendants to really enjoy the summit before the full onset of the congress," remarked co-chair James Thimons, OD, before the event. "That way you don't have to choose between the really outstanding CE and the OIS presentations, which are equally remarkable but in a totally different context."

This year's summit continued the organization's mission to share information about the innovations moving the profession forward. The day was jam-packed with product introductions and panel discussions, compartmentalized into spotlights on ocular surface disease, posterior segment, postoperative management and glaucoma. Industry leaders presented on what's new for their company, followed by a panel discussion with ophthalmologists and optometrists at the forefront of their respective fields.

Eyes on the Future

After the networking lunch and welcome from Emmet T. Cunningham, MD, PhD, the day started with an innovation showcase from Eyenovia, Sight Sciences, Tarsus Pharmaceuticals, TearClear, Ocuphire Pharma and Eyedaptic, introduced by Chris Wroten, OD, of Bond-Wroten Eye Clinic in Louisiana. Dr. Wroten joked about Blockbuster Video—a poignant reminder of how not being nimble enough and not staying up-to-date with current trends and technologies can lead a successful company to the verge of extinction. "So, I always try in my practice to be sure that I'm always looking forward to see what's coming up, not forgetting what's in the past," he said.

Drs. Devries, Whitley, O'Dell and Hauser talk with Dr. Boorady about adopting new technologies and absorbing new information that deal with dry eye management.

See OIS, Page 22

START SELLING REFRESH® ONLINE

REFRESH® Direct eCommerce is a best-in-class digital platform that lets you create a personalized online storefront for your practice, making it easy for your patients with dry, irritated eyes to follow through on the **REFRESH®** products you recommend.

Refresh® Direct ECOMMERCE

You pick. They click. We ship.

Register today at refreshbrand.com/ecommerce or stop by Allergan booth #729 to learn more!

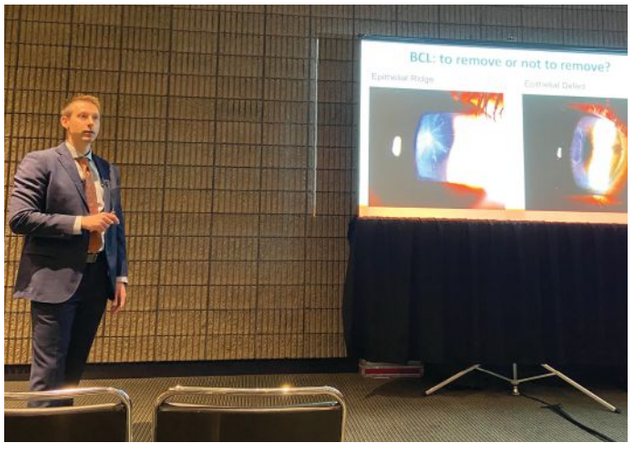
© 2020 Allergan. All rights reserved. All trademarks are the property of their respective owners. REF132780 02/20

Today's Refractive Surgery: How to Choose

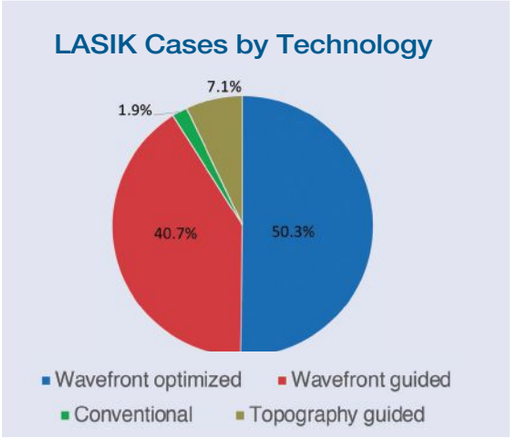
New tools and techniques can provide excellent vision for just about anyone.

If you aren't referring many patients for refractive surgery, you should be, according to yesterday's session speaker Mitch Ibach, OD. During his "Laser K's: Keratectomy to Keratomileusis," session, he discussed the pros and cons of latest surgical options.

The two biggest factors in a successful surgery, he began, are patient selection and education. "The same reason I don't do trust falls is the number one reason consumers say they don't do refractive surgery—fear," he told his audience. "Patients trust you, their long-time optometrist. Your guidance directs their decisions."



Dr. Ibach explained what to do when PRK patients experience a post-op complication such as an epithelial ridge or defect.



Newer technologies mean conventional LASIK is falling by the wayside, with customized options dominating the surgical cases. Source: Market Scope Refractive Surgeon Survey Report – Q4 -2016.

That guidance begins by recommending the right procedure for each patient. It's less about whether or not a patient is a candidate for refractive surgery and more about which procedure is ideal, Dr. Ibach stressed. The many surgical options—whether photorefractive keratectomy (PRK), laser *in situ* keratomileusis (LASIK) or small-incision lenticule extraction (SMILE)—can accommodate nearly every candidate, if chosen carefully, he said. The patient's occupation, refractive goals, visual symptoms and ocular parameters all factor into the decision.

Choose Wisely

With these pearls in mind, Dr. Ibach moved on to each procedure, beginning with PRK. Because it doesn't involve a flap and preserves more corneal strength and structure, it's a good option for patients with thin pachymetry and those with particularly active lifestyles, such as boxers, fighters, military and anyone at risk of frequent head/eye trauma, he said.

However, those undergoing PRK need to be patient, he warned. "Only about 60% of the visual benefit happens the day after surgery," Dr. Ibach told his audience. "The rest comes over the next three to four months, or about 1D a month." LASIK, however, may be a better option for patients in need of instant gratification, with 90% of the visual benefit appreciable within the first day.

Today's LASIK can incorporate all sorts of bells and whistles, such as wavefront analysis. "It's like a fingerprint for the eye, no two wavefront analyses are the same," he explained. And this can be a game-changer for patients with pre-existing higher-order aberrations (HOAs), he added. Patients with normal topography and low levels of HOAs could also consider wavefront optimized, rather than wavefront guided, laser correction. The former is based on population norms and the patient's manifest refraction, while the latter incorporates an aberrometer to customize the ablation based on the patient's existing HOAs. As of 2016, half of all LASIK procedures were wavefront optimized procedures, Dr. Ibach said.

Another advancement in LASIK is topography-guided procedures, which use the patient's corneal data to personalize the ablation profile—normalizing, not customizing, the corneal surface, Dr. Ibach clarified. One study found that topo-guided surgery better addressed HOAs and provided better low-contrast acuity compared with wavefront optimized surgery, he added.

With more than 98% of all LASIK patients satisfied with their visual outcomes, why SMILE?, Dr. Ibach asked. The procedure was designed with three goals in mind, he explained: "decrease laser-induced dry eye, maintain corneal biomechanics and decrease corneal nerve damage." To achieve these, SMILE uses a smaller side-cut and a smaller cap cut than LASIK, leaving the upper corneal layers intact, which may reduce the incidence of dry eye and post-op ectasia, he added.

While the refractive surgery options may seem daunting, it's actually great to have so many procedures to choose from, Dr. Ibach said in conclusion. "It's not really PRK vs. LASIK vs. SMILE," he clarified. "Each procedure has its benefits, and we can choose the laser refractive surgery based on the patient's characteristics and achieve excellent results for just about anyone." ■

SECO 20/20 CEE-TQ COURSE SCHEDULE

Friday, March 6

- 2–4pm: Current Topics in Glaucoma, *Joseph Sowka, OD*
- 2–4pm: Differential Diagnosis of the Red Eye, *Andrew Gurwood, OD, Marc Myers, OD*
- 2–4pm: Vision Therapy Grand Rounds, *Lynn Hellerstein, OD*
- 5–7pm: Corneal Degenerations and Dystrophies, *Blair Lonsberry, OD, Michael Greenwood, MD*
- 5–7pm: Pharmaceutical Update 2020, *Tracy Offerdahl, PharmD, Gregory Caldwell, OD*
- 5–7pm: Tales from the Glaucoma Crypt, *Anthony Litwak, OD, Danica Marrelli, OD*

Saturday, March 7

- 4–6pm: Anterior Segment Rounds: The OD and MD Angle, *Blair Lonsberry, OD, Michael Greenwood, MD*
- 4–6pm: Clinical Pearls: OCT Interpretation in Glaucoma, *Anthony Litwak, OD*
- 4–6pm: In the Depths of the Retina, *Jennifer Snyder, OD, Jessica Haynes, OD*
- 4–6pm: Optometric Surgical Co-Management, *Bobby Saenz, OD*
- 6–8pm: Traum-o-Rama: Tales From the Bascom Palmer ER [DINNER COURSE], *Alison Bozung, OD*

Sunday, March 8

- 12–2pm: Case Files from Bascom Palmer [LUNCH COURSE], *Mark Dunbar, OD, Alison Bozung, OD*

DED: Practice Builder with a Purpose

While treating the condition makes a world of difference for patients, it also helps grow your practice if implemented correctly.

During Wednesday's MedPRO360 program, Andrea Knouff, OD, took an unusual approach to dry eye: she focused on the practice management side of the condition. She started off with a question for her audience: "We know how to treat it, but how do we implement it?" she asked. During her lecture, "Generating Revenue with Dry Eye," she helped answer that question, first explaining that optometrists don't need to run special dry eye centers to treat the condition. Rather, specializing in dry eye already sets a practice apart from others.

The status of glands most often dictate treatment, so Dr. Knouff allotted the first part of the lecture to meibomian gland dysfunction (MGD). This occurs when the glands do not secrete appropriate lipids and the aqueous layer evaporates. MGD affects 86% of all dry eye patients and one in every 100 people. Unfortunately, not every patient with MGD knows they have it. But once it's caught, patients are quick to do their research and seek out the appropriate care, according to Dr. Knouff. It's our job to provide it. "If you build it, they will come," she said.

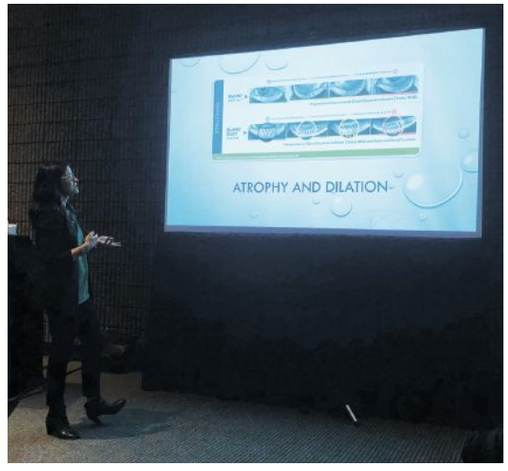
Invest in the Right Tools

Building a practice that offers dry eye services means you must be able to detect it and monitor any changes with treatment, Dr. Knouff emphasized. She noted that detection could involve a SPEED questionnaire, diagnostic expression, gland imaging and non-contact tear break-up time, but an imaging device is always necessary. Many options exist, including the Keratograph 5M (Oculus), LipiView and LipiScan (both Johnson & Johnson Vision), which range in price from $10,000 to $40,000 and offer various services.

Treatment, on the other hand, could be carried out with any number of techniques, depending on the underlying etiology. Debridement, manual expression, gland evacuation and intense pulse light are just a few choices Dr. Knouff mentioned. She suggested all practices interested in pursuing dry eye care invest in BlephEx, LipiFlow (Johnson & Johnson Vision), an imaging device and a handful of products, including nutraceuticals, Bruder masks, eye whiteners, hypochlorous acid topical solutions and eye drops.

Stay Organized

Dr. Knouff recommended creating a dry eye protocol for the sake of consistency, and training all staff members so that everyone understands the process. Once a dry eye screening uncovers on the condition, she advised her attendees, be sure to schedule a dry eye evaluation on a different day and allow enough time for discussion and potentially even same-day treatment. Patients should receive proper after-care instructions and return for a follow-up about two months down the road to give the dryness enough time to subside and the oils enough time to start flowing again. Dr. Knouff's solution to the substantial amount of time required for dry eye care is blocking off certain times or even days to see these patients.

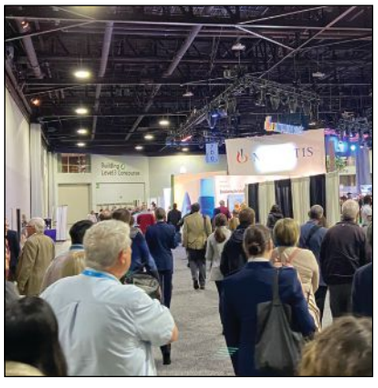


Dr. Knouff shares how to incorporate dry eye into your practice, including what tools to invest in, how to train staff and why it pays to have a standardized process.

Cash in with Care

While dry eye care is rewarding, Dr. Knouff didn't forget to mention that it's also profitable. She gave an example to illustrate the return on investment. One of her patients went through two treatments, four office visits, one set of punctal plugs and a full exam over the course of a year, earning her practice a total profit of $2,700. She noted that if a practice were to see one dry eye patient each week for a year, it would bring in around $35,000 for treatment alone.

"We are the ones on the forefront treating this because we're better than everyone else," Dr. Knouff asserted. She added that treating dry eye has become more of an obligation than ever before, and it's up to each individual practice to decide what works best for them and re-evaluate when necessary. ■



Optometry's Marketplace™ Open for Business

Yesterday morning marked the much-anticipated grand opening of SECO's exhibit hall, Optometry's Marketplace™. Attendees swarmed out of the morning's special session and right into the hall at 10am, ready to check out the latest and greatest tools of the trade. The crowd quickly dispersed, heading off to find their favorite industry contacts and snag a few pens, stress balls and free samples along the way.

With more than 225 vendors in attendance, there's something for everyone—from fashion eyewear to advanced imaging technology. This year's experience includes The View, where eyewear buyers can see what's hot to stock their optical. The popular MedPRO360 and Presentation Theaters are back with a robust lineup of speakers ready to help you better manage your practice. Conference-goers should check SECO's website for a running list of exhibitor-specific show specials and product promotions.

Attendees can roam the expansive hall between 10am and 5pm today and 10am and 4pm tomorrow. ■

Tomorrow: 8–10am AMPHITHEATER A3

Set Your Sights on Glaucoma

Advances in diagnostics and surgery are changing care for the better—learn more tomorrow morning.

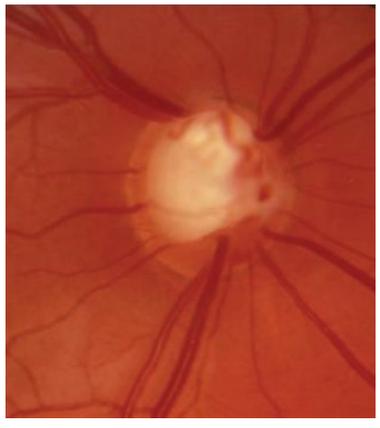
Angle closure, an optic disc with a thin, pink rim on OCT, visual field loss, retinal ganglion cell loss, a disproportionate pallor to cup size, a higher level of intraocular pressure (IOP) and poor vascular perfusion are all characteristic of glaucoma, but are they sufficient pieces of evidence to differentiate the condition from others and diagnose it with confidence?

This is the main question Harry Quigley, MD, will pose during his "21st Century Glaucoma Care: What Do We Know and How Do We Know It?" discussion tomorrow morning. By the end of the Special Session, attendees should better understand the disease and be able to answer this question.

Improve Diagnosis, Improve Prognosis

The esteemed glaucoma expert from Johns Hopkins University's Wilmer Eye Institute will offer the audience his insights on the latest advances in glaucoma care, including diagnostic indicators, progression predictors and therapeutic options.

For instance, with OCT becoming ever more useful in glaucoma diagnosis, the status of automated perimetry is changing. In his talk, Dr. Quigley will offer these recommendations for the new glaucoma patient with real field loss: Consider doing three fields in the first year and one every six months the next year. With a total of five fields in two years, you'll have good data from which to identify the catastrophically worsening patient. Then, scale back to one per year for ongoing monitoring.



Characteristic glaucomatous optic disc and visual field loss are two of a handful of diagnostic indicators.

He'll maintain that evidence- and experience-based improvements in diagnostic accuracy and course prediction are more of a priority than improvements in surgery. Integrating these changes early will carry through the course of the disease for a better prognosis.

Treatment Advances

That's not to say that surgical developments aren't important. For those who require more than medical therapy with IOP-lowering drugs, for example, Dr. Quigley will cover selective laser trabeculoplasty and argon laser trabeculoplasty—which are similar in regards to lowering IOP and repeating results—in addition to minimally invasive glaucoma surgeries (MIGS), trabeculectomy and tube shunts.

When it comes to MIGS, Dr. Quigley will present studies to help support his belief that phacoemulsification on its own is superior to all other techniques. He will also briefly discuss cyclophotocoagulation (Endo Optiks), iStent trabecular micro-bypass (Glaukos), Trabectome (NeoMedix), gonioscopy-assisted transluminal trabeculotomy, Xen gel implant (Allergan), Hydrus microstent (Ivantis) and InnFocus microshunt (Santen), which have had modest, if any, effects.

Lack of Good Evidence for MIGS

1. No controlled clinical trial vs. trabeculectomy.
2. MIGS procedures (USA) are being performed by non-glaucoma experts.
3. Many MIGS eyes have never been treated with drops nor had a visual field test before surgery.
4. No MIGS achieves IOP <15, the target for 50% of those undergoing trab or tube.

In his talk, Dr. Quigley will offer a dose of skepticism about the role MIGS should play in glaucoma care.

Trabeculectomy and tube shunts are further ahead than MIGS, with more documented successes, according to Dr. Quigley. While not ideal, trabeculectomy has been successful, with investigators finding that fornix-based procedures can achieve the same success rates as limbus-based procedures and tend to be accompanied by fewer, more comfortable blebs and not as many leaks or late infections. Research shows that trabeculectomy and tube shunts both work but have their own sets of issues in previously operated eyes; in virgin eyes, tube shunts are the procedure of choice for high-risk cases and obligate contact lens wearers.

As far as advances in surgeries go, Dr. Quigley will suggest a number of different criteria practitioners should consider before adopting a new technique: effectiveness, applicability, safety, acceptability, affordability and difficulty in learning and performing.

It's Dr. Quigley's hope that clinicians will bring key takeaways from his presentation back to their offices to improve their performance as well as patient education and compliance and, consequently, outcomes. ■

FRIDAY, MARCH 6
DOCTOR EDUCATION

SECO's comprehensive program offers more than 250 educational courses throughout the conference. Here are today's courses for ***optometrists, ophthalmologists and PhDs.***

For course descriptions and the entire five-day education program, visit attendseco.com/education.

Missed a course at SECO 2020? Log on to secouniversity.com throughout the year to access all courses.

- A ABO
- P AOA Paraoptometric
- AS Treatment & Management of Ocular Disease: Anterior Segment
- CE Florida CE Broker
- C&C CEE/TQ Course
- CL Contact Lenses
- EJ Ethics/Jurisprudence
- GL Glaucoma
- GO General Optometry
- IS Injection Skills
- J JCAHPO
- LP Laser Procedures
- N NCLE
- NO Neuro-Optometry
- OP Oral Pharmaceutical
- PD Principles of Diagnosis
- PH Pharmacology
- PM Practice Management
- PO Peri-Operative Management of Ophthalmic Surgery
- PS Treatment & Management of Ocular Disease: Posterior Segment
- RS Refractive Surgery Management
- SD Systemic/Ocular Disease
- SP Surgical Procedures
- FV Functional Vision/Pediatrics
- LV Low Vision/Vision Impairment & Rehabilitation
- PB Public Health
- Learning Lab/Workshop
- Dinner Course

515 The Pupil
7:00AM-8:00AM | **Room A313** | **65532-NO**
Leonard Messner, OD
NO CE N P

130 TBI: Prevention and Treatment
7:00AM-8:00AM | **Room A316** | **65450-NO**
Jennifer Simonson, OD
NO CE

131 Blepharitis Cookbook
7:00AM-8:00AM | **Room A312** | **65600-AS**
Gilbert Spindel, OD
AS CE

132 MIGS in the BIGS
7:00AM-8:00AM | **Room A305** | **65601-GL**
Mitchel Ibach, OD
GL CE

61
Special Session: Surgical Retina & Beyond
8:00AM-10:00AM | **Amphitheater A3** | **65805-PS**
John Miller, MD
PS CE

601 The New You! A Hands-On Learning Lab for Optometric Aesthetics
10:00AM-12:00PM
Room A405 | **65749-SP**
Selina McGee, OD
Chris Wroten, OD
SP CE

415 MedPRO360 Facilitated Learning Lab: Leadership and Differentiation - How to Make Your Practice Stand Out in a Crowd
10:00AM-12:00PM
Room A408 | **65971-PM**
Michael Kling, OD
PM CE P A

FREE CE 202 Navigating Interactions
10:00AM-11:00AM | **MedPRO360 Theater brought to you by Premier Academy360** | **66175-PM**
Shauna Harrington
PM A CE

516 Visual Abnormalities of Dementia
11:00AM-12:00PM
Room A313 | **65630-NO**
Leonard Messner, OD
NO CE P A J

517 Telemedicine in the Practice of Tomorrow
11:00AM-12:00PM
Room A314 | **65631-GO**
Anthony Cavallerano, OD
GO CE A N P

518 Let's Go Viral
11:00AM-12:00PM
Room A312 | **65533-AS**
Bobby Saenz, OD, MS, FAAO
AS CE A N P

305
FREE OD Lunch Symposium presented by Bausch + Lomb & CooperVision
12:00PM-1:00PM | Amphitheater A3

602 Meibomian Gland Dysfunction Learning Lab
1:00PM-3:00PM
Room A405 | **65575-AS**
Alan Kabat, OD
Selina McGee, OD
AS CE

FREE CE 203 Practice Road Map for Diabetes Management
1:00PM-2:00PM | **MedPRO360 Theater brought to you by Premier Academy360** | **65681-PM**
Jeffry Gerson, OD
PM CE

519 New Technologies and Pharmacology: A Look into the Future
2:00PM-4:00PM
Room A314 | **65748-PH**
Chris Wroten, OD
PH CE A N P

520 Differential Diagnosis of the Red Eye
2:00PM-4:00PM
Room A312 | **66191-AS**
Andrew Gurwood, OD
Marc Myers, OD
C&C AS CE N P

521 Vision Therapy Grand Rounds
2:00PM-4:00PM
Room A316 | **65814-FV**
Lynn Hellerstein, OD
C&C FV CE P J

141 Current Topics in Glaucoma
2:00PM-4:00PM
Room A305 | **65806-GL**
Joseph Sowka, OD
C&C GL CE

FREE CE 204 Closing the Communication Gap
4:00PM-5:00PM | **MedPRO360 Theater brought to you by Premier Academy360** | **66176-PM**
Shauna Harrington
PM A CE

522 Optometry 2020 and Beyond
5:00PM-7:00PM
Room A314 | **65679-GO**
Jeffry Gerson, OD;
A. Paul Chous, OD
GO A P CE

523 Topography EyeQ
5:00PM-6:00PM | **Room A313** | **65730-PD**
Jason Jedlicka, OD
PD CE N P J

524 Pharmaceutical Update 2020
5:00PM-7:00PM
Room A305 | **65812-PH**
Tracy Offerdahl, PharmD
Gregory Caldwell, OD
PH C&C A N P J CE

525 Uveitis Front to Back, Start to Finish
5:00PM-7:00PM
Room A312 | **65534-AS**
Alan Kabat, OD
AS CE P

309 Diagnosis and Treatment...
7:30PM-8:30PM
OFFSITE: STATS Brewpub
Jeffry Gerson, OD
Stephanie Vanderveldt, MD
PM CE

STUDENT PARTY
FRIDAY, MARCH 6 | 9 P.M.–MIDNIGHT
Omni, International Ballroom A-C
Sponsored in part by VSP Global
Share your school stories and career aspirations with the students and recent graduate who will shape the future of eyecare with you.

133 AMD A to Z
7:00AM-8:00AM | **Room A311** | **65638-PS**
Jeffry Gerson, OD
PS CE

134 Radiofrequency Radiation in Eyecare
7:00AM-8:00AM | **Room A314** | **65452-SP**
Selina McGee, OD
SP CE

135 Transplantation for Limbal Stem Cell Deficiency
7:00AM-8:00AM | **Room A302** | **65453-AS**
Cecelia Koetting, OD
AS CE

413 MedPRO360: Social Media - The Secret to Creating Influencers to Promote Your Practice for You
7:00AM-8:00AM | **Room A404** | **66202-PM**
Darryl Glover, OD
PM CE P A

414 MedPRO360 Facilitated Learning Lab: The 5 Zones of Practice Profitability
8:00AM-10:00AM | **Room A408** | **65511-PM**
Mike Rothschild, OD
PM CE P A

FREE CE 211 Practical Guidelines for the Diagnosis and Treatment of Non-Exudative AMD
10:00AM-11:00AM | **Presentation Theater** | **66362-PS**
Jeffry Gerson, OD
PS CE

136 Botulinum Toxin in the Primary Eye Care Setting
11:00AM-12:00PM
Room A311 | **65602-PH**
James Fanelli, OD
PH CE

137 A Deep Dive into Secondary Glaucomas
11:00AM-12:00PM
Room A305 | **65456-GL**
Mitchel Ibach, OD
GL CE

138 Presbyopia CL Potpourri
11:00AM-12:00PM
Room A302 | **65457-CL**
Jason Jedlicka, OD
CL CE

139 The Disease of Myopia and Strategies for Myopia Control
11:00AM-12:00PM
Room A315 | **65458-GO**
Melissa Barnett, OD
GO CE

140 Managing Digital Device Use in Young Children
11:00AM-12:00PM
Room A316 | **63670-FV**
Glen Steele, OD
GO CE

416 MedPRO360: The Current and Future State of the Healthcare System and Payors
11:00AM-12:00PM | **MedPRO360 Theater brought to you by Premier Academy360** | **65512-PM**
John Rumpakis, OD
PM CE P A

417 MedPRO360: Buyer's Tips for Vendor Selection
12:00PM-1:00PM | **MedPRO360 Theater brought to you by Premier Academy360** | **65587-PM**
Sharon Carter, ECOC
PM CE P A

418 MedPRO360: Eyewear Trends and Selection Techniques
1:00PM-2:00PM | **Room A404** | **65667-PM**
Laurie Pierce, LDO, ABOM, NCLEC
PM CE P A

142 Cancer and the Eye: Ocular Tumors, Malignancies and Neoplasms
2:00PM-4:00PM
Room A315 | **65459-SD**
Tammy Than, OD
SD CE

143 Who, Why and How: Scleral Lens Fitting
2:00PM-4:00PM
Room A302 | **65460-CL**
Melissa Barnett, OD
CL CE

144 Retinal Findings with Systemic Disease
2:00PM-4:00PM
Room A311 | **65660-SD**
Jeffry Gerson, OD
SD CE

145 Visual Field Interpretation
2:00PM-4:00PM
Room A313 | **65461-GL**
Danica Marrelli, OD
GL CE

420 MedPRO360 Facilitated Learning Lab: HR Landmines That Put You at Risk and How to Navigate Through Them
2:00PM-4:00PM
Room A408 | **65582-PM**
Jason DeMayo, MBA
PM CE P A

419 MedPRO360: 5 Steps to go From Manager to Leader
2:00PM-3:00PM
MedPRO360 Theater brought to you by Premier Academy360 | **65513-PM**
Michael Kling, OD
PM CE P A

421 MedPRO360: Why I Decided to Create a Telemedicine Practice
3:00PM-4:00PM
MedPRO360 Theater brought to you by Premier Academy360 | **65514-PM**
Mike Rothschild, OD
PM CE P A

FREE CE 214 Management of Ocular Pain Considerations when Prescribing Opiates
4:00PM-6:00PM | **Presentation Theater** | **65944-PH**
Andrew Gurwood, OD; Marc Myers, OD
PH CE

526 Top Five Vision Therapy Tools
5:00PM-6:00PM
Room A316 | **65535-FV**
Jennifer Simonson, OD
FV CE A N P J

527 Enhancing Sports Performance
6:00PM-7:00PM | **Room A316** | **65536-FV**
Lynn Hellerstein, OD
FV CE P

146 Corneal Degenerations and Dystrophies
5:00PM-7:00PM
Room A302 | **65850-AS**
Blair Lonsberry, OD
Michael Greenwood, MD
CCO AS CE

147 Tales from the Glaucoma Crypt
5:00PM-7:00PM
Room A315 | **65882-GL**
Anthony Litwak, OD
Danica Marrelli, OD
CCO GL CE

148 OCT-A in Clinical Practice
5:00PM-7:00PM
Room A311 | **65603-PD**
Jessica Haynes, OD
PD CE

ALUMNI RECEPTIONS
FRIDAY, MARCH 6

SECO's alumni receptions bring you together with your classmates-turned-colleagues, so you can reminisce about those days spent hitting the books, share family stories, and get up to date on your recent adventures.

7:00 AM 7:15 AM 7:30 AM 7:45 AM 8:00 AM 8:15AM 8:30 AM 8:45 AM 9:00 AM 9:15 AM 9:30 AM 9:45 AM 10:00 AM 10:15 AM 10:30 AM 10:45 AM 11:00 AM 11:15 AM 11:30 AM 11:45 AM 12:00 PM 12:15 PM 12:30 PM 12:45 PM 1:00 PM 1:15 PM 1:30 PM 1:45 PM 2:00 PM 2:15 PM 2:30 PM 2:45 PM 3:00 PM 3:15 PM 3:30 PM 3:45 PM 4:00 PM 4:15 PM 4:30 PM 4:45 PM 5:00 PM 5:15 PM 5:30 PM 5:45 PM 6:00 PM 6:15 PM 6:30 PM 6:45 PM 7:00 PM 7:15 PM 7:30 PM 7:45 PM 8:00 PM 8:15 PM 8:30 PM 8:45 PM 9:00 PM

FRIDAY, MARCH 6
AHP EDUCATION

*SECO's comprehensive program offers more than 250 educational courses throughout the conference. Here are today's courses for allied health professionals—**opticians, paraoptometrics, technicians and administrators**.*

For course descriptions and the entire five-day education program, visit attendseco.com/education.

Missed a course at SECO 2020? Log on to secouniversity.com throughout the year to access all courses.

- A ABO
- P AOA Paraoptometric
- AS Treatment & Management of Ocular Disease: Anterior Segment
- CE Florida CE Broker
- CEE/TQ Course
- CL Contact Lenses
- EJ Ethics/Jurisprudence
- GL Glaucoma
- GO General Optometry
- IS Injection Skills
- J JCAHPO
- LP Laser Procedures
- N NCLE
- NO Neuro-Optometry
- OP Oral Pharmaceutical
- PD Principles of Diagnosis
- PH Pharmacology
- PM Practice Management
- PO Peri-Operative Management of Ophthalmic Surgery
- PS Treatment & Management of Ocular Disease: Posterior Segment
- RS Refractive Surgery Management
- SD Systemic/Ocular Disease
- SP Surgical Procedures
- FV Functional Vision/Pediatrics
- LV Low Vision/Vision Impairment & Rehabilitation
- PB Public Health
- Learning Lab/Workshop
- Dinner Course

515 The Pupil
7:00AM-8:00AM | **Room A313** | **65532-NO**
Leonard Messner, OD
NO CE N P

730 Astigmatism Fitting Strategies
7:00AM-8:00AM | **Room A403**
Michael Gzik
N CE

731 Modern Day Management of Cataract Patients
7:00AM-8:00AM | **Room A410**
Roy Ferguson, PhD
A P CE

61
Special Session: Surgical Retina & Beyond
8:00AM-10:00AM | **Room Amphitheater A3** | **65805-PS**
John Miller, MD
PS CE

801 Eyewear Adjustment and Repair Hacks Learning Lab
8:00AM-10:00AM
Room A406
Alex Yoho, ABOM
A P CE

802 Basic Lensometry Learning Lab
10:00AM-12:00PM
Room A406
Alex Yoho, ABOM
A P J CE

803 Eye Dissection Learning Lab
10:00AM-12:00PM
Room A407
Thomas Griffith, OD
A N P J CE

FREE CE 202 Navigating Interactions
10:00AM-11:00AM | **MedPRO360 Theater brought to you by Premier Academy360** | **66175-PM**
Shauna Harrington
PM A CE

304 FREE Opticians, Technicians, Administrators Lunch Symposium presented by CooperVision and Allergan
11:00AM-12:00PM | Room A411/412b

516 Visual Abnormalities of Dementia
11:00AM-12:00PM | **Room A313** | **65630-NO**
Leonard Messner, OD
NO CE P A J

735 Making the Most Out of Patient History
12:00PM-1:00PM | **Room A410**
Blair Lonsberry, OD
P J CE

736 Macular Degeneration 101
12:00PM-1:00PM | **Room A402**
Jeffry Gerson, OD
P CE

739 Glaucoma and IOP: It's More Than the Pressure
1:00PM-2:00PM | **Room A402**
Michael Stewart, MD
P J CE

740 Focusing on Presbyopia
1:00PM-2:00PM | **Room A403**
Roy Ferguson, PhD
A P CE

203 Practice Road Map for Diabetes Management
1:00PM-2:00PM | **MedPRO360 Theater brought to you by Premier Academy 360** | **65681-PM**
Jeffry Gerson, OD
PM CE

906 From Optical Dispensary to Frame Gallery
2:00PM-3:00PM | **Exhibit Hall - The VIEW**
Mary Lanning, ABOC
A P CE

519 New Technologies and Pharmacology: A Look into the Future
2:00PM-4:00PM
Room A314 | **65748-PH**
Chris Wroten, OD
PH CE A N P

520 Differential Diagnosis of the Red Eye
2:00PM-4:00PM
Room A312 | **66191-AS**
Andrew Gurwood, OD
Marc Myers, OD
CEE AS CE N P

742
GENERAL SESSION: Myopia Management: What's All the Hype?
3:00PM-5:00PM | Room 411/412
Ryan Parker, O.D.
Walter "Pete" Hanlin, ABOM
Pam Lowe, OD
Alan Glazier, OD
A N P J CE

204 Closing the Communication Gap
4:00PM-5:00PM | **MedPRO360 Theater brought to you by Premier Academy 360** | **66176-PM**
Shauna Harrington
PM A CE

522 Optometry 2020 and Beyond
5:00PM-7:00PM
Room A314 | **65679-GO**
Jeffry Gerson, OD;
A. Paul Chous, OD
GO A P CE

523 Topography EyeQ
5:00PM-6:00PM | **Room A313** | **65730-PD**
Jason Jedlicka, OD
PD CE N P J

524 Pharmaceutical Update 2020
5:00PM-7:00PM
Room A305 | **65812-PH**
Tracy Offerdahl, PharmD;
Gregory Caldwell, OD
PH CEE A N P J CE

525 Uveitis Front to Back, Start to Finish
5:00PM-7:00PM
Room A312 | **65534-AS**
Alan Kabat, OD
AS CE P

526 Top Five Vision Therapy Tools
5:00PM-6:00PM | **Room A316** | **65535-FV**
Jennifer Simonson, OD
FV CE A N P J

527 Enhancing Sports Performance
6:00PM-7:00PM | **Room A316** | **65536-FV**
Lynn Hellerstein, OD
FV CE P

NEW!
SPECS BUYER'S CERTIFICATE PROGRAM

In this series of interactive sessions, you'll master core retail buying strategies and receive formal training in inventory management that will enable you to sell more eyewear and boost your practice's bottom line. Complete this program and you'll leave with the tools you need to better plan, promote and manage your optical inventory.

Sponsored in part by Gazal and Zyloware

732 The Importance of the Technician's Role in the Ophthalmic Exam
7:00AM-8:00AM | **Room A402**
Michael Stewart, MD
P J CE

413 MedPRO360: Social Media - The Secret to Creating Influencers to Promote Your Practice for You
7:00AM-8:00AM | **Room A404** | **66202-PM**
Darryl Glover, OD
COVD PM CE P A

414 MedPRO360 Facilitated Learning Lab: The 5 Zones of Practice Profitability
8:00AM-10:00AM | **Room A408** | **65511-PM**
Mike Rothschild, OD
COVD PM CE P A

733 What Is This? Ocular Findings in Systemic Disease
8:00AM-10:00AM
Room A410
Michael Stewart, MD
P CE

734 O'Keefe Sisters Share Optical Tips and Tricks
8:00AM-10:00AM
Room A412a
Jackie O'Keefe, ABOC
Candace O'Keefe Culp, ABOC
Laurie Pierce, LDO, ABOM, NCLEC
A CE

904 Specs Buyer's Forum: Take Inventory on Your Inventory
8:00AM-10:00AM
Exhibit Hall - The VIEW
Mary Lanning, ABOC
A P CE

905 Going from Ordinary to Extraordinary: How to Convert from Selling Mainstream Product to Luxury
10:00AM-11:00AM | **Exhibit Hall - The VIEW**
Saeed Andy Tabrizipour A P CE

415 MedPRO360 Facilitated Learning Lab: Leadership and Differentiation - How to Make Your Practice Stand Out in a Crowd
10:00AM-12:00PM
Room A408 | **65971-PM**
Michael Kling, OD
COVD PM CE P A

517 Telemedicine in the Practice of Practice of Tomorrow
11:00AM-12:00PM | **Room A314** | **65631-GO**
Anthony Cavallerano, OD
COVD GO CE A N P

518 Let's Go Viral
11:00AM-12:00PM | **Room A312** | **65533-AS**
Bobby Saenz, OD, MS, FAAO
COVD AS CE A N P

416 MedPRO360: The Current and Future State of the Healthcare System and Payors
11:00AM-12:00PM | **MedPRO360 Theater brought to you by Premier Academy360** | **65512-PM**
John Rumpakis, OD COVD PM CE P A

737 Biomicroscopy in a Contact Lens Practice
12:00PM-1:00PM
Room A404 |
Michael Gzik N CE

738 Designing Spectacle Lenses for Your Toughest Patient
12:00PM-1:00PM | **Room A403**
Charlie Saccarelli, ABOM
A P J CE

417 MedPRO360: Buyer's Tips for Vendor Selection
12:00PM-1:00PM | **MedPRO360 Theater brought to you by Premier Academy360** | **65587-PM**
Sharon Carter, ECOC COVD PM CE P A

741 Focusing on Presbyopia
1:00PM-2:00PM | **Room A410**
Blair Lonsberry, OD
P J CE

804 Advanced Lensometry Learning Lab
1:00PM-3:00PM
Room A406
Alex Yoho, ABOM
A P J CE

418 MedPRO360: Eyewear Trends and Selection Techniques
1:00PM-2:00PM | **Room A404** | **65667-PM**
Laurie Pierce, LDO, ABOM, NCLEC
COVD PM CE P A

521 Vision Therapy Grand Rounds
2:00PM-4:00PM
Room A316 | **65814-FV**
Lynn Hellerstein, OD
COVD CCG COVD FV CE P J

420 MedPRO360 Facilitated Learning Lab: HR Landmines That Put You at Risk and How to Navigate Through Them
2:00PM-4:00PM
Room A408 | **65582-PM**
Jason DeMayo, MBA
COVD PM CE P A

419 MedPRO360: 5 Steps to go From Manager to Leader
2:00PM-3:00PM
MedPRO360 Theater brought to you by Premier Academy360 | **65513-PM**
Michael Kling, OD COVD PM CE P A

421 MedPRO360: Why I Decided to Create a Telemedicine Optometric...
3:00PM-4:00PM
MedPRO360 Theater brought to you by Premier Academy360 | **65514-PM**
Mike Rothschild, OD COVD PM CE P A

FREE CE 204 Closing the Communication Gap
4:00PM-5:00PM | **MedPRO360 Theater brought to you by Premier Academy360** | **66176-PM**
Shauna Harrington
COVD PM A CE

ALUMNI RECEPTIONS

FRIDAY, MARCH 6

SECO's alumni receptions bring you together with your classmates-turned-colleagues, so you can reminisce about those days spent hitting the books, share family stories, and get up to date on your recent adventures.

7:00 AM 7:15 AM 7:30 AM 7:45 AM 8:00 AM 8:15AM 8:30 AM 8:45 AM 9:00 AM 9:15 AM 9:30 AM 9:45 AM 10:00 AM 10:15 AM 10:30 AM 10:45 AM 11:00 AM 11:15 AM 11:30 AM 11:45 AM 12:00 PM 12:15 PM 12:30 PM 12:45 PM 1:00 PM 1:15 PM 1:30 PM 1:45 PM 2:00 PM 2:15 PM 2:30 PM 2:45 PM 3:00 PM 3:15 PM 3:30 PM 3:45 PM 4:00 PM 4:15 PM 4:30 PM 4:45 PM 5:00 PM 5:15 PM 5:30 PM 5:45 PM 6:00 PM 6:15 PM 6:30 PM 6:45 PM 7:00 PM 7:15 PM 7:30 PM 7:45 PM 8:00 PM 8:15 PM 8:30 PM 8:45 PM 9:00 PM

Earn up to
19 CE
Credits*

NEW TECHNOLOGIES & TREATMENTS IN EYE CARE 2020
REVIEW EDUCATION GROUP

San Diego

May 29-31, 2020 - Manchester Grand Hyatt

A Medscape LIVE! CONFERENCE

EARN UP TO 19* CE CREDITS!

Join *Review*'s New Technologies & Treatments in Eye Care in San Diego for three days of education detailing the latest ideas and innovations in eye care.

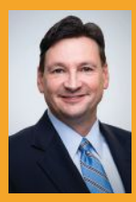
WHEN:
Friday, May 29, 2020 - Sunday, May 31, 2020

WHERE:
Manchester Grand Hyatt
1 Market Place, San Diego CA 92101
Discounted room rate: $269/night† + tax and resort fee.

Registration Cost: $495 **Early Bird Special:** $420

TO REGISTER: www.ReviewEducationGroup.com/SanDiego2020
Call: 866-658-1772 or E-mail: ReviewMeetings@MedscapeLIVE.com

PROGRAM CHAIR:



Paul M. Karpecki, OD, FAAO
Director of Cornea,
Kentucky Eye Institute

Director of OSD,
Gaddie Eye Centers

Register by April 6, 2020 for Early Bird Pricing

REGISTER: WWW.REVIEWEDUCATIONGROUP.COM/SANDIEGO2020

Administered by:
REVIEW EDUCATION GROUP

cope
*Approval pending

SALUS UNIVERSITY
Pennsylvania College of Optometry

Review Education Group partners with Salus University for those ODs who are licensed in states that require university credit.
†Rooms limited. See website for additional details.

OPTOMETRY'S MARKETPLACE™

EXHIBITOR BOOTH LISTINGS FOR SECO 20/20

TITLE PARTNER: ALCON — VISIT BOOTH 1015

Featured Supporters

Bausch + Lomb 715
Johnson & Johnson Vision 1325
Novartis Pharmaceuticals 1527
CooperVision 927
VSP Global 823

Contributing Supporters

Essilor of America 1123
Allergan 729

Promotional Supporters

Regeneron 1029
Hoya Vision Care 1414
MacuLogix 838
Luxottica Group 637

The View Luxury Pavillion

Baumvision 13V
Davette's Lunettes & Casanova Eyewear ... 15V
Design Eyewear Group ..... 1 V
Etnia Barcelona 12V
Faniel Eyewear ..... 3 V
Gazal Eyewear 16V
Henau 17V
L.A. Eyeworks ..... 2 V
Orgreen + Goldsmith 14V
Poets Eyewear 4V
Salt 6V
Studio Optyx 10V

360care 1447
A&A Optical 1300
ABS Smart Mirror 843
ABB Optical Group 1247
Acculens 1023
Acuity Pro 1101
Aerie Pharmaceuticals 948
AI Care 514
Alcon 1015
Allergan 729
Allied Powers 1049
Amazing Stim 1749
American Board of Opticianry –National Contact Lens Examiners 443
American Board of Optometry 529
American Society of Optometric Surgeons ... 653
Arbor Eyewear 1607
Armed Forces Optometric Society 528
Aspex Eyewear Group 1307
Avēsis (a Guardian Company) 531
Baumvision 13V
Bausch + Lomb 715
BioPhotonic Scanner 608
Bio-Tissue 1209
BlephEx 1240
BQ Ergonomics 1547
Bruder Healthcare Company 625
Bryn Mawr Communications 1600
CareCredit 1439
Centervue 701
ClearVision Optical/BluTech 807
Clerio Vision–Extreme H2O 1546
Coburn Technologies 510
Compulink Healthcare Solutions 909
CooperVision 927
Corporate Optometry 1211
Costa Sunglasses 1237
Davette's Lunettes & Casanova Eyewear ... 15V
Design Eyewear Group 1V
Designer Drugs Pharmacy 1347
DGH Technology 1437
Diaton Tonometer 1701
Digital Healthcare Professionals 646
Diopsys 524
Doctor Multimedia 1537
Dry Eye Institute 601
Eastern Ophthalmic Supply & Repair 1109
EdgePro by GPN Technologies 1231
E-dr. Network/New Era 1443
Energeyes, the Association of Corporate-Affiliated Optometrists 1252
Eschenbach Optik 842
eSee Acuity 522
Essilor of America 1123
Etnia Barcelona 12V
Europa Eyewear 741
EventSphere 710
Eye Cloud Pro 1406
Eye Designs 723
EyecareLive 1149
Eyefficient 1643
Eyefunc–Sightique Optical 1613
EyeQuest 1646
Eyes of Faith Optical 632
Eyevance Pharmaceuticals 1446
Faniel Eyewear ..... 3 V
FCI Ophthalmic 1647
For Eyes 1542
Fortifye Vitamins 720
Frey 947
Gazal Eyewear 16V
Good-Lite 501
Health-Advance 1506
Heidelberg Engineering 1203
Heine USA 606
Henau 17V
Hoya Vision Care 1414
Icare USA/Centervue 701
i-dealoptics 525
IDOC 1034
iMatrix 1137
Invision Magazine 1709
Jeunesse Innovations 1508
Johnson & Johnson Vision 1325
Kala Pharmaceuticals 847
Kasperek USA Optical 518
Kentucky College of Optometry 549
Kids Bright Eyes 628
Konan Medical 1217
L.A. Eyeworks ..... 2 V
Lacrivera 746
Lafont 1612
LasikPlus 716
Liquid HER 1211
Lombart Instrument 610
Lumenis Vision 626
Luneau Technology USA (AIT, Briot, Weco, LPO, Visionix) 702
Luxottica Group 637
M&S Technologies 1242
MacuHealth 939
MacuLogix 838
Marco Ophthalmic 515
MaximEyes by First Insight 600
MaxiVision (MedOp Health) 1602
Medi Lazer 1201
Mediknox 507
MedPhoto Manager 1540
MEI System 1122
Miraflex 1706
MNY Innovations 1246
Modern Optical International 1409
Mondottica USA 935
Morganton Eye Physicians PA 1449
Myco Industries 1639
MyEyeDr 709
National Academy of Opticianry 441
National Board of Examiners in Optometry ... 753
Natural Ophthalmics 503
Nidek 1510
Notal Vision 647
Nova Southeastern University College of Optometry 530
Novartis Pharmaceuticals 1527
NuSight Medical 1509
Oasis Medical 532
Ocular Innovations 1348
Oculus 1047
Ocusoft 1408
Ophthalmic Concepts 1441
Ophthalmic World 516
Ophthalogix 1038
Optikam Tech 1415
OptiLanes 1146
OptiUSA/BK Frames/ Rodenstock Instruments 1225
Optometric Architects 630
Optometric Extension Program Fdn. 1747
Optometry Times 512
Optos 401
Optovue 506
Orgreen + Goldsmith 14V
Patch 1248
PentaVision 852
Pharmanex 1046
Plusoptix 1147
Poets Eyewear 4V
Premier Ophthalmic Services 1638
Primary Care Optometry News and Healio.com By Slack 1745
Professional Eye Care Associates of America 1346
Quantel Medical 700
Quidel Corporation 1503
Regeneron 1029
Reichert 1536
Remote Area Medical 1655
Review of Optometry 1553
RevolutionEHR 1400
RightEye 1043
Robertson Optical Laboratories 1401
Roya.com 1402
Salt Optics 6V
Santinelli International 1143
ScienceBased Health 1533
Scleral Lens Education Society 739
Scratchpay 1148
Sight Sciences 631
Signet Armorlite 737
Solutionreach 1153
Southern College of Optometry 1611
Studio Optyx 10V
Sun Ophthalmics 1035
TelScreen 1303
The Dry Eye Doctor 547
TLC Laser Eye Centers 747
Topcon Medical Systems 1007
TRP Company 603
Twenty200 Optical Lab 1740
US Optical 1301
Valley Contax 946
Vertical Pharmaceuticals 1636
Vision Associates 447
Vision Trends 509
Vital Tears 748
VSP Global 823
Walman 914
Wal-Mart Health and Wellness 1539
Weave 1141
Wiley X 615
Wolters Kluwer 1407
Zeiss 1215
Zyloware Eyewear 1713

EXHIBIT HALL MAP AND SPECIA

OPENS: 10am

User Groups

The SECO User Groups allow you to learn best practices, experiences and provide input into product road maps back to the supplier.

MedPRO360 Theater

New for 20/20! SECO's business intel and strategy resources for eyecare providers, MedPRO360 will now encompass practice management and business content in the exhibit hall! Eleven of the 33 courses delivered in the MedPRO360 Theater are brought to you in part by Premier Academy360. These courses require separate registrations. Today's sessions:

10–11am: *Navigating Interactions, Shauna Harrington*

1–2pm: *Practice Roadmap for Diabetes Management, Jeffrey Gerson, OD*

4–5pm: *Closing the Communication Gap, Shauna Harrington*

Check back tomorrow for more!

Optix Lounge

Calling all AHPs! Take a break between sessions, network with other allied healthcare professionals—opticians, paraoptometrics, technicians and administrators–and utilize the resources to grow personally and professionally. The Optix Lounge features pop-up CE presentations, career coaching and daily giveaways. *Sponsored by Essilor.*

SECO Instagram Contest

The SECO 'See Yourself' Instagram Competition rewards you when you take a selfie in front of designated stations, upload the image(s) and tag the image(s) with #SEEYOURSELFATSECO. Hit all six stations and be entered win daily prizes! Look for the Instagram logo on this map to find the stations.

CLOSES: 5pm

Multimedia Poster Program

See the latest optometric research and case reports through these posters from students, residents, and faculty that take advantage of technology to deliver a dynamic presentation that is far beyond the posters of old.

OD Lounge

Network, connect, and recharge directly on the exhibit hall floor with exciting daily giveaways and interactive opportunities!

Entrance to Amphitheater

The View

Visit SECO's Luxury Eyewear Pavilion, which brings some of the world's most exclusive frame companies and brands to Atlanta. Mix and mingle with your peers. Share ideas and strategies for creating the most dynamic inventory mix for your unique environment while increasing patient satisfaction and practice revenue.

Presentation Theater—Free CE

Attend COPE and CE broker accredited presentations. Courses are free to attend on a first come, first served basis and don't conflict with other continuing education courses outside of the hall. Today's sessions:

10–11am: *Practical Guidelines for the Diagnosis and Treatment of Non-Exudative AMD, Jeffry Gerson, OD*

4–6pm: *Management of Ocular Pain Considerations when Prescribing Opiates, Andrew Gurwood, OD, and Marc Myers, OD*

Check back tomorrow for more!

Presentation Theater

Show Specials & Product Launches

Make the most of your time at Optometry's Marketplace™ with these great offerings in the exhibit hall.

Alcon, *Booth #1015*
Precision1 is the lens for new wearers to start in and stay in because they were designed to combat new wearer dropout by delivering precise vision, dependable comfort and easy handling. These lenses feature a permanent micro-thin layer of moisture that helps support a stable tear film and deliver long-lasting lens surface moisture.

Allergan, *Booth #729*
Refresh Direct eCommerce lets you create your own online store. You can email or text patients recommendations, and they'll be able to purchase directly from you. Also, the new Refresh Relieva will be available in multidose and multidose preservative-free. Relieva for Contacts is specifically designed for contact lens wearers.

Bausch + Lomb, *Booth #715*
Ultra Multifocal for Astigmatism—the first and only multifocal toric lens available as a standard offering.

Bruder Healthcare, *Booth #625*
The Bruder Hygienic Eyelid Care Kit provides a simple yet comprehensive lid hygiene regimen. Three easy steps—wipe, spray and warm—are all that's needed. The kit features Bruder's moist heat eye compress, hygienic eyelid sheets, lid cleansing wipes and hygienic eyelid solution.

Eyes of Faith Optical, *Booth #632*
For every frame sold from the Delilah collaboration, Eyes of Faith will donate $10 to help build homes that give refuge to orphans at the Point Hope Village in Ghana. Products include Soar, Shelter, Refuge and Shadow.

Face A Face, *Booth 1V*
Bocca Lemon frames combine positive energy with a twist of tangy flavors. They feature an abundance of curvature, color, slender legs and are finished with the iconic Bocca stiletto.

First Insight Corp., *Booth #600*
Looking for a unified EHR and practice management system that simplifies business functions, is easy to learn and offers many shortcuts for speedy documentation? See the new, completely rewritten MaximEyes software. Access your data, anywhere, anytime, from any device.

Good-Lite Company, *Booth #501*
The QuikVue Adapter smartphone accessory is designed for anterior segment imaging.

Hoya Vision Care, *Booth #1414*
You put your time and care towards your patients. We put ours towards you. Our products, pricing and support programs are all designed with the eye care professional in mind. Discover the difference it makes when you partner with an optical supplier who simply has your back.

iMatrix, *Booth #1137*
Find out your practice's marketing score and see how well you rank against your top local competitors with a free competitor analysis from iMatrix. With our reputation management service, your practice can keep track of top competitors in your area, control your reputation management and update your business information.

Kasperek USA Optical, *Booth #518*
A bold adaptation on a vintage style, the Brush offers a sleek, tailored look. The Calumet is handcrafted with wood temples of solid walnut and a premium acetate front. A protective coating reduces warping and water damage. The Ronan has a slim rectangular profile and premium barrel hinges with a built-in magnet to allow a polarized sun clip to be attached.

Kids Bright Eyes, *Booth #628*
The Glitter Series uses surgical-grade TR90 material, allowing these frames to be bent in unimaginable ways. The simple yet sophisticated design allows your patients to shine bright like a diamond in any environment.

LA Eyeworks, *Booth #2v*
The Beat 40th anniversary ultra-limited edition is a revival of LA Eyeworks' first frame design presented in striking colors and a custom-engraved finish.

Lacrivera, *Booth #746*
Vera180 absorbable lacrimal plugs provide extended temporary occlusion (approximately six months). The Vera180, made of poly-p-dioxanone, is available in 0.2mm, 0.3mm, 0.4mm and 0.5mm sizes, packaged in single- and 10-pair boxes (20 plugs). Lacrivera continues to offer a comprehensive line of dry eye products.

Lafont, *Booth #1612*
Discover the new Francesca sunglasses, inspired by artisanal jewelry designs, featuring Swarovski crystal accents and luxury resin details.

LiquidEHR, *Booth #1211*
Communicate with your patients anytime and every time, through text, email and online scheduling.

M&S Technologies, *Booth #1242*
Melbourne Rapid Fields is a comprehensive, space-saving visual field test, done right from a high-resolution tablet. Full threshold and screening tests are done quickly and accurately.

Mediknox, *Booth #507*
Mediknox works with the most advanced medical devices to simplify professional medical technology for home use.

Mondottica USA, *Booth #935*
Benetton is the Italian lifestyle brand designed for men, women and children wherever they live, whatever the color of their skin and whichever language they speak. The eyewear features handmade Mazzucchelli acetate, adjustable metal non-slip nose pads, universal fit, tonal lamination, printed temple tip stitch logo in pop colors with subtle logo placement on temple.

Myco Industries, *Booth #1639*
The Ab Max provides advanced functionality for treating anterior blepharitis. It uses the same forward and reverse features as competitive devices plus a pulse mode to remove even the most tenacious debris, while massaging the anterior eyelid margins for a more comfortable patient experience at less than half the cost.

Nidek, *Booth #1510*
Nidek introduces the advanced YAG and SLT combination laser, YC-200 S plus, and the enhanced YC-200 YAG laser, with improvements in function and precision. Features for targeting pathology, accurate energy delivery and operative assist functions allow the surgeon to deliver treatments "right on the mark."

Notal Vision, *Booth #647*
The home-based ForeseeHome AMD Monitoring Program supports earlier detection of wet AMD in intermediate dry AMD patients, allowing doctors to help preserve patients' functional vision with earlier treatment.

Oasis Medical, *Booth #532*
Oasis Tears Vision has a unique formulation made from key sources like maqui berry and astaxanthin for general eye health. Tears Omega 3 offers 3,000mg of combined DHA and EPA in a triglyceride form with a serving size of three standard softgels. Its omega uses two unique processes for purification and potency.

OptiUSA/BK Frames/Rodenstock, *Booth #1225*
The Alino Multifunction Refractometer is easy operating (auto alignment), space saving (six systems in one), time saving (change modes in three seconds) and highly accurate (combines different measurements for precise results). It also offers friendly air puff control, enhanced refraction function and dry eye analysis.

Orgreen + Goldsmith, *Booth #14V*
Introducing Tamara, Nicolas and Bob. Tamara is a smaller female style in acetate with an oval shape enhanced by a cat-eye finish and a wavy topline. Nicolas is a classic style for men in one mono and five combination colors, with an industrial, modern aesthetic. Bob is a modern square style for men, ideal for mid-size faces.

Quidel Corp., *Booth #1503*
QuickVue Adenoviral Conjunctivitis Test (formerly AdenoPlus) detects all known serotypes of adenoviral conjunctivitis. With QuickVue, you can make a rapid, accurate diagnosis before the patient leaves your office, allowing you to isolate contagious patients, prevent spread of infection and reduce unnecessary prescriptions.

Roya, *Booth #1402*
Canvas Studio lets you create custom social posts to increase brand awareness. We are also partnering with other vendors and uploading their content to our library. We will be offering a free 30-day trial for anyone who attends SECO.

Sight Sciences, *Booth #631*
TearCare applies targeted heat to the eyelids to remove blockage associated with MGD. The SmartLids contour to fit the shape of the lid. Patients can open and close their eyes during the procedure, taking advantage of the built-in expression mechanism of the blink. Maintains heat at a therapeutic temperature (41˚ to 45˚ C).

The Dry Eye Doctor, *Booth #547*
These antimicrobial dry eye compress masks have a machine washable/dryable cover and can be heated in the microwave or oven for moist heat. Can be used for cold treatments also. Designed to fit all size faces comfortably.

Weave, *Booth #1141*
Weave Payments eliminates phone tag, mailing invoices and the forced and uncomfortable conversations around collecting. Collect payments with a simple text message, take a payment by Apple Pay with the in-office terminal or use one of many other payment features.

Wiley X, *Booth #615*
Tell Monday through Friday to hit the bricks! The WX Weekender combines fashion and functionality in one stylish pair of eyewear. The ANSI Z87.1–rated frames and lenses provide premium optical clarity and protection from high mass/high velocity impact.

Tomorrow: 6–8pm ROOM A411A/A412B

Trauma Drama

An ER optometrist opens her files for some impolite dinner conversation.

Eventually, every optometrist is going to see a patient with some level of ocular trauma. Whether from a sports injury, automobile accident, renegade metal shaving or splashed caustic chemicals, your skills will be called upon and must be up-to-date. Each year, 2.5 million patients in the United States seek treatment for eye injuries that can include lid lacerations, orbital fractures, foreign bodies, chemical burns, trauma-induced hyphema, iritis or retinal detatchments.

When better to review these sometimes gory cases than over a delicious meal? If that's your idea of a spirited Saturday night in Atlanta, you're in luck. Alison Bozung, OD, of the Bascom Palmer Eye Institute in Miami, will be presenting the lessons she learned and cases she saw from her time at the Bascom Palmer ER. And dinner will be served.

The presentation will emphasize the value of gathering a full patient history, even in the face of a panicked patient with a penetrating laceration from a nail or other sharp object. It will refresh ODs on performing a basic exam on patients who have such dire looking presentations and help decide whether to treat, what to do and when to refer out. The course splits trauma patients into five groups:

1. Adnexa
2. Cornea and conjunctiva
3. Anterior chamber
4. Retina
5. Open globe

For adnexal injuries, Dr. Bozung will explain how to clean and evaluate wounds such as lid lacerations to judge whether the cut is mild enough to heal sans sutures or if it's deep enough to recommend stitches. With orbital fracture, she'll help evaluate when a patient needs imaging and how soon to follow up.

No one is happy to see a patient like this, with a rather large object penetrating the globe, but Dr. Bozung says her successful management makes this one of her favorite stories to share. She'll tell this tale and more tomorrow night.

Lacerations of the conjunctiva are more common than you might think. Patients can present with a lacerated conjunctiva from such everyday incidents as a make-up brush mishap, rough-housing with the family pet or even just allergy-related scratching. It's the optometrist's job to determine if the laceration is partial or full before perhaps prescribing an antibiotic ointment. Corneal abrasions can be more threatening and could require epithelial debridement or a bandage contact lens.

Dr. Bozung will explain how to classify chemical burns and how those classifications can help guide treatment and follow up decisions.

Some head injuries—even if the globe isn't penetrated or even struck at all—can leave a patient seeing flashes and floaters. These can indicate retinal detachments, tears or vitreous hemorrhaging. Establishing which is causing the flashes can mean the difference between preserving or losing a patient's vision.

Dr. Bozung's cases will be replete with photos and back-stories, including basketball moves that left players with iritis, airbag-induced hyphema and champagne cork corneal abrasions. This is a dinner course, so pull up a seat, if you can stomach it. ■

SPEAKER SPOTLIGHT

Dr. Offerdahl's SECO 20/20 course schedule includes:

- ***Pharmaceutical Update 2020***
  Friday 5–7pm, Room A305
- ***Looking for the Alpha in a World of Omegas***
  Saturday 2–3pm, Room A315
- ***CBD, THC and Marijuana: Weeding Through the Choices***
  Saturday 4–6pm, Room A314
- ***What's New in Pharmacology?***
  Sunday 7–8am, Room A403

Tracy Offerdahl, OD, PharmD

Instructor, Pennsylvania College of Optometry at Salus University

Dr. Offerdahl attended Temple University School of Pharmacy in Philadelphia for both her undergraduate and graduate degrees. Upon completion of her Doctor of Pharmacy degree, she completed a Residency at Temple University Hospital, where much of her time was spent in internal medicine and infectious diseases.

She is currently on faculty at Salus University in the Department of Optometry, where she is the course director and instructor for all systemic pharmacology courses for students in the optometry, audiology, and physician assistant programs. Additionally, she is a practicing clinical pharmacist with a pharmacy and a patient care practice site in Rosemont, PA. She lectures extensively in the optometry community.

SPEAKER SPOTLIGHT

Dr. Haynes's SECO 20/20 course schedule includes:

- ***OCT-A in Clinical Practice***
  Friday 5–7pm, Room A311
- ***Diagnostic Imaging in Macular Degeneration***
  Saturday 7–8am, Room A312
- ***Optometric Comanagement of Retinal Lasers***
  Saturday 2–pm, Room A313
- ***In the Depths of the Retina***
  Saturday 4–6pm, Room A311

Jessica Haynes, OD

Optometrist, Charles Retina Institute

Dr. Haynes is an optometric physician at Charles Retina Institute in Germantown, TN and consulting faculty for the Southern College of Optometry in Memphis, TN. She is a graduate of Southern College of Optometry and completed a primary care residency at the Memphis VA Medical Center followed by a two-year vitreoretinal fellowship at Charles Retina Institute. She has published in numerous journals and lectures primarily on the topic of posterior segment disease.

Tomorrow: 11am–12pm ROOM A312

Optic Discs at Risk

Edema can result from any number of conditions, and knowing the underlying etiology can help you treat it appropriately.

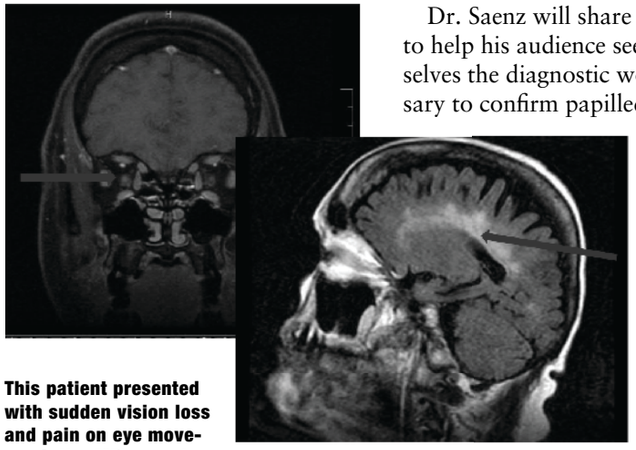
Swelling is never a good sign in the eye. When it involves the disc, ODs need to act fast to ensure it's not caused by any sight-threatening etiologies. Bobby Saenz, OD, will help attendees work through the long list of differentials during his Saturday morning lecture, "The Disky Divas."

Document

The first step is getting to know the patient with a solid history. Age, history of symptoms, laterality and medical history are all key to the diagnosis.

Next, diagnostic testing must include visual acuity, color testing, pupillary testing and ophthalmoscopy; however, ancillary testing with OCT, visual fields and neuroimaging may be necessary. For example, visual fields will reveal a large blind spot with papilledema but diffuse and paracentral loss with optic neuritis. Non-arteritic anterior ischemic optic neuropathy (NAION) often shows a more specific pattern of loss in the inferior altitudinal and inferior nasal regions.

On neuroimaging, clinicians can identify papilledema by an empty sella, flattening of the posterior aspect of the globe, a tortuous optic nerve and transverse venous sinus stenosis on neuroimaging.



This patient presented with sudden vision loss and pain on eye movement. Her MRI reveals white matter lesions involving the periventricular white matter in the brain. It also shows an abnormal focal enhancement of the right optic nerve. She was diagnosed with optic neuritis.

Differentiate

"The most difficult decisions optometrists face (clinically) is differentiating between *mild* papilledema and pseudopapilledema," he will warn his audience. A thorough discussion and good clinical images will help attendees better understand the differences. Pseudopapilledema can be due to small, crowded discs, a tilted or oblique insertion and drusen—none of which are urgent.

Papilledema, however, is often caused by a tumor or idiopathic intracranial hypertension (IIH), both of which can be an urgent matter. Dr. Saenz believes ODs will be called upon to manage IIH, in part because they can order MRIs and lumbar punctures. In addition, visual symptoms are often the presenting signs of a problem.

Dr. Saenz will share several cases to help his audience see for themselves the diagnostic workup necessary to confirm papilledema due to IIH, including MRI, visual field and OCT findings.

After the comprehensive look at papilledema, Dr. Saenz will move on to optic neuritis, again providing a robust portfolio of clinical examples. Women are twice as likely to be affected by this, he notes, and most cases have unilateral painful vision loss. Again, MRI will be an important part of the diagnostic workup to rule out etiologies such as multiple sclerosis and reveal findings such as perioperative ischemic optic neuropathy due to a dental procedure.

NAION is another biggie, according to Dr. Saenz, as it is the most likely etiology of disc edema in patients over the age of 50. For these patients, hypertension, diabetes, sleep apnea, night-time dosing of blood pressure medications and even erectile dysfunction medications can all be risk factors for ischemic optic neuropathy. If you are confident you have properly diagnosed the NAION, you can treat it, Dr. Saenz will encourage his audience. However, make sure you aren't missing an infection such as *Bartonella*, giant cell arteritis or neurosyphilis.

Lastly, you can't have a lecture on disc edema without at least a mention of ethambutol, which is known to cause optic neuropathy. Expect a lively discussion. ■

Photo: David Lynne, OD

This 52-year-old Hispanic male's right eye shows 360-degree disc edema with swelling of the adjacent retinal nerve fiber layer.

Alumni Receptions —*Tonight!*

Reconnect with old classmates and beloved professors—and get to know the next generation of students—at these much-anticipated reunions. **All events happen tonight at the Omni hotel from 7pm to 8:30pm.**

UABSO Alumni Reception
Grand Ballroom E

Southern College of Optometry Reception for Alumni & Friends
Atrium Terrace

NSUCO Alumni & Friends Reception (Nova)
Magnolia Room

IU School of Optometry Alumni & Friends Reception
Room TBD

Salus University Pennsylvania College of Optometry Alumni & Friends Reception
Grand Ballroom A

Kentucky College of Optometry Reception
Room TBD

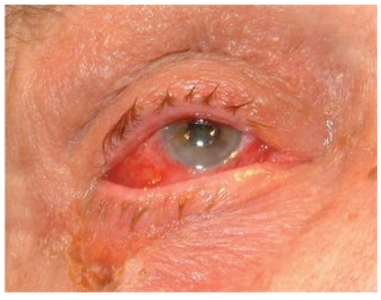
Today: 2pm–4pm ROOM A312

Red Eyes: Like Snowflakes, No Two Are Alike

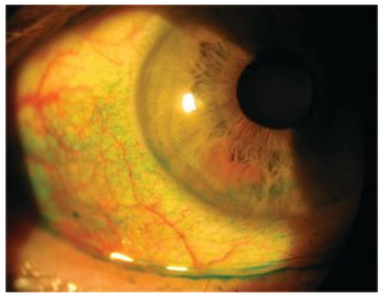
A careful workup and case history will yield clues that can help in tailoring therapy.

As in many cases, to understand a condition you must first understand its cause. This is particularly true for red eyes, which are associated with myriad pathophysiologies, including infection, inflammation, elevated intraocular pressure, foreign body and toxic substance exposure. A red eye may also be due to mechanical, ischemic, glaucomatous or congestive sources. Andrew S. Gurwood, OD, and Marc D. Myers, OD, plan to review them all in their "Differential Diagnosis of the Red Eye" talk this afternoon.

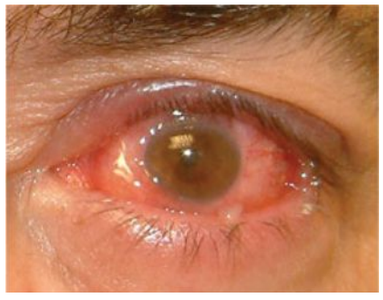
Beginning with a discussion of pathophysiology, the duo will explain the mechanisms of antigen exposure and which therapeutic agents intervene at each step of the cascade. They'll also walk through the clinical signs and symptoms and offer pearls for connecting those to potential etiologies.



This patient has chemical burn–induced keratoconjunctivitis with accompanying skin irritation due to a gasoline splash.



Tear film insufficiency is causing conjunctival and corneal staining in this patient.



Contact lens overwear is responsible for this patient's bout of conjunctival and corneal edema.

Measure and Document

Once attendees learn how to quickly differentiate this common clinical presentation and better comprehend its potential etiologies, Drs. Gurwood and Myers will then transition into how to approach the various management strategies based on the known etiology.

The pair will lead an interactive, case-based discussion to give the audience a hands-on understanding of how to manage both acute and chronic red eyes. Audience members can expect an overview of the best treatment strategies and expected outcomes based on patient signs, symptoms and history, in addition to any exacerbating and mitigating influences.

Factors to keep in mind when evaluating a red eye patient include a close look at the globe, conjunctiva and adnexa, as well as visual acuity, extraocular muscles, pupils, visual fields, lymph nodes, corneal sensitivity and blood pressure. Biomicroscopy of the lids, lashes, tear film, conjunctiva, cornea, anterior chamber, iris, lens, vitreous, retina and nerve is an important part of this step for a full clinical picture. Exam findings will then dictate the proper treatment.

If a systemic origin is suspected, a blood workup may be warranted. Drs. Gurwood and Myers will run through the various tests that can be ordered and the proper indications for each.

Treat and Monitor

Drug therapy can run the gamut, depending on the diagnosis, and could involve anti-infectives, anti-virals, anti-inflammatories or even a combination of all three as well as anti-glaucoma, cycloplegic or analgesic medications. Ocular lubrication with artificial tears and ointments and contact lenses are all temporary topical treatment options. Drs. Gurwood and Myers will instruct the audience on prudent prescribing strategies.

The red eye, as simple as it may sound, is a complicated clinical presentation, and getting to the root of the problem is a priority to steer the proper management course.

Drs. Gurwood and Myers hope that their course will help guide clinicians through challenging cases they may face in their own practices for the best overall outcomes. ■

SECO Welcomes Students and Residents

SECO is committed to helping future eye care professionals achieve their goals, offering a robust program that allows students to expand their knowledge, refine their skills, make professional connections and move their budding career forward. With world-class educational programming, ground-breaking innovations and unbeatable networking opportunities all in one location, there's no better place to build your future as an eye care professional than SECO 20/20.

Current optometric students and residents are encouraged to participate in SECO's renowned educational programming, featuring a variety of in-depth, hands-on sessions designed to help you build your skills—all free of charge. Designed specifically for students and residents, the Student Symposium will feature networking opportunities as well as presentations from industry leaders Alcon, Johnson & Johnson Vision Care and CooperVision. You could even win a $1,000 scholarship just by attending!

Are you preparing for Part 1 of the NBEO exam? The SECO Optometry Board Review–Part 1 program, sponsored by VSP Global, is designed to provide third-year optometry students with an opportunity for a condensed one-day interactive learning experience to assist with preparation for the Part 1 (Applied Basic Science), NBEO exam.

Stop by Optometry's Marketplace™ and get a clear view of tomorrow's eye care solutions. Be sure to check out SECO's multimedia poster presentations, where you can see the latest optometric research and case reports from students, residents, faculty and practicing optometrists. These posters leverage technology to deliver a dynamic presentation that is far beyond the posters of old, and presenters will be available to answer any questions. Don't miss out on your $100 stipend—stop by the OD Lounge on Saturday between 1pm and 3pm with your SECO badge and photo ID to claim your stipend.

And don't forget to have some fun while you're here! SECO 20/20's many networking events give you the chance to mingle with other students and enjoy an unforgettable experience. Join us for a fun night out filled with a silent disco, unlimited appetizers and great networking at the Student Party, sponsored by VSP Global, held on Friday night at the Omni Hotel. Don't miss the event that everyone will be talking about: the Saturday Night "Back Where You Belong" Party, sponsored by Luxottica and Vision Source, with music performed by the "Bad Habits: Eye Docs of Rock" and headliner band "38 Special," held on Saturday at The Tabernacle. SECO also hosts numerous alumni receptions to reunite classmates and graduates. For the most up-to-date event schedule, check SECO's mobile app. ■

Tomorrow's ODs can jump-start their careers by making connections and building their skills here at SECO 20/20.

Student Optometry Board Review: Saturday, March 7, 9am–4pm

Supported in part by VSP Global

The Optometry Board Review–Part 1 program is designed to provide third-year optometry students with an opportunity for a condensed one-day interactive learning experience. This program is customized to assist with preparation for the Part 1 (Applied Basic Science) NBEO exam. Our Continuing Education Committee has developed this unique program in response to feedback received from students, and we are happy to offer this opportunity at SECO 20/20!

CE Policies and Procedures

Here's how to make your accreditation process painless at SECO 20/20.

Badges and Course Attendance

All information regarding registered courses will be linked to your badge barcode. Your badge is required for admittance to each course and is required to be scanned in and out of each course. If you make any changes to your education registration after you print your badge on-site, it will update automatically—no need to print a new badge. SECO will replace lost badges for a non-refundable fee of $25. Please wear your SECO badge at all times and remember that a photo ID is required for alcoholic beverage purchases.

Schedule Changes

Changes to your course schedule can easily be made by logging into your SECO registration account at attendseco.com. You can also make changes to your schedule by visiting Registration in Hall A Level 400 or at the kiosks on Level 300. Please note that schedule changes can only be made before a course is scheduled to begin and cannot be made at the course's location.

Course Handouts

Want to make sure you don't miss any great clinical pearls from a lecture? Course handouts can be downloaded through the SECO Mobile App or by visiting attendseco.com/download.

Attendance Requirements

Attendees *must* have a SECO badge scanned in order to gain entrance into a course. Once the course begins, attendees may not be absent from the course for a cumulative time in excess of 10 minutes per course hour. If you leave the room for any reason while a course is in session, your badge will be scanned upon exit and re-entry. Badges do not have to be scanned upon exiting the course at its conclusion.

Verification of Attendance

SECO is going paperless and will no longer provide onsite printers to print your Verification of Attendance. To verify and download your Verification of Attendance, please log on to your registration account through the SECO Mobile App or by visiting attendseco.com. Verification of Attendance will be updated two hours after the completion of each course.

Audio Recordings

Recordings (MP3 download) of select courses are available for purchase for both the optometrist and allied healthcare professional programs. The cost is $125 per program or $200 for both. To purchase, visit the Registration Hall A Level 400 or contact SECO International at 770-451-8206 after April 15. Audio recordings are part of your SECO University subscription, which is included with every Summit, Premium & Congress Package registration.

Assistance

SECO volunteers and ambassadors are happy to answer any questions about SECO 20/20. They are wearing SECO volunteer name badges. You can find additional assistance at the Registration Area in Hall A Level 400.

SPEAKER SPOTLIGHT

Dr. Carter's SECO 2020 course schedule includes:

- ***MedPro360: Buyer's Tips for Vendor Selection***
  Friday 12–1pm, MedPRO360 Theater
- ***New to the Office: Front Desk***
  Saturday 10–11am, ROOM A402
- ***MedPro360: Coding and Billing***
  Saturday 1–2pm, ROOM A302
- ***MedPro360: 21st Century Scheduling —Strategies for Keeping the Book Full and the Pace You Want!***
  Saturday 3–4pm, ROOM A404

Sharon Carter

Founder, Eye Care Optometric Consulting

With more than 30 years of optometric experience, including as an office manager, sales and training for an optometric software company and consulting for private practices, Sharon Carter launched her own company, Eye Care Optometric Consulting in 2001. She consults in offices all over the country spreading her team building philosophy. For more than 15 years, she has been speaking and motivating staff at state, national and international conferences sharing her company's philosophy of "provide the best patient care possible and the money will follow."

Earn up to 19 CE Credits*

A Medscape LIVE! CONFERENCE

NEW TECHNOLOGIES & TREATMENTS IN 2020 EYE CARE

REVIEW® OF OPTOMETRY

Philadelphia, Pennsylvania

November 6-8, 2020

at the Philadelphia Marriott Downtown

Review's New Technologies & Treatments in Eye Care proudly presents Philadelphia 2020! Join us for three days of education detailing the latest ideas and innovations in eye care.

Register before September 11 for Early Bird discount.

PROGRAM FACULTY:

Paul M. Karpecki, OD, FAAO
PROGRAM CHAIR

Douglas K. Devries, OD

Alan G. Kabat, OD, FAAO

Eric E. Schmidt, OD, FAAO

LOCATION:

Philadelphia Marriott Downtown
1201 Market Street
Philadelphia, PA 19107
(215) 625-2900

REGISTRATION COST:

Early Bird Special: $495
Full Conference after September 11: $595

See event website for daily fees.

A limited number of rooms have been reserved at the group rate of $289/night + tax.
Call the hotel directly at the number above and identify yourself as a participant of "*Review*'s New Tech" for group rate.

THREE WAYS TO REGISTER:

www.ReviewEducationGroup.com/Philadelphia2020

Call: 866-658-1772 or E-mail: ReviewMeetings@MedscapeLIVE.com

Administered by: REVIEW EDUCATION GROUP

COPE *Approval pending

SALUS UNIVERSITY Pennsylvania College of Optometry

Review Education Group partners with Salus University for those ODs who are licensed in states that require university credit.

Managing Ocular Adverse Events of Medical Treatment

Treatment, continued from Page 1

Remember, you aren't going to be the one prescribing these medications, so good communication with other doctors is crucial, she advised. "Let them know that these patients need to be dumped into your practice within that first year," she said. "Let them know that you are capable, prepared and ready to take care of those patients."

Topiramate is another tricky systemic medication, in part because it has a laundry list of indications and off-label uses. Approximately 3% can experience acute angle-closure, usually within the first two weeks of initiating the medication, Dr. Than said. It's not something you can predict or screen for, so you just have to be prepared to notice it right away and handle it after the fact.

Another, more recent discovery is the risk of visual field defects with topiramate. However, the risk isn't high enough to start screening every patient on topiramate, she noted. Instead, you just have to know it's a possibility. "Remember, this medication can be prescribed for all walks of life. You never know who will be affected," she said.

A common cancer treatment, tamoxifen, can cause significant damage to the retina, Dr. Than explained, sharing the mechanism of action that can cause cell death as quickly as 18 hours after beginning the medication. "The bottom line is that it's doing something to the retina that it shouldn't be doing." With these adverse effects in particular, high-level OCT has provided new insights, leading to the discovery of pseudocystic foveal cavitation. "OCT will tell you if what you are seeing is a cyst or if it's just empty space," she explained. "Every patient should be entitled to an OCT scan every year."

Fingolimod, a multiple sclerosis drug, has an ocular manifestation so special it has its own name: fingolimod-associated macular edema, or FAME. This can arise quickly—usually within a week—so ODs need to monitor these patients closely, Dr. Than said. If you notice FAME, you can treat it with a non-steroidal anti-inflammatory drug.

One ocular effect you won't escape is keratopathy, as 100% of patients taking amiodarone—a common medication used to treat cardiac abnormalities—will experience this, according to Dr. Than. Luckily, it clears up once patients discontinue the medication.

Bisphosphonates are another well-known drug class used to treat osteoporosis, and these can cause the "-itises," Dr. Than said: conjunctivitis, uveitis, episcleritis and scleritis. Given the early onset of these adverse effects, "if I see uveitis in a patient right after they started a bisphosphonate, I won't even bother with a work-up because of the strong connection between the two," she said.

Dr. Than touched on oral contraceptives, which can be the underlying cause for far worse than dry eye and contact lens intolerance, she said. These can include intracranial hypertension and retinal vascular thrombosis. And don't forget, you need to counsel patients taking oral contraceptives about the dangers of smoking because both can cause clotting; putting them together is a "double-whammy," she warned.

These are all ocular adverse side effect clinicians can't afford to miss, because many have lasting effects, she concluded. ■

It'll Grow On You: Tips for Lid Lesion Cases

These patients need optometry. Will you answer the call?

Optometrists aren't the first doctors most patients turn to with an unusual lesion or growth. That's the jurisdiction of dermatology. But when they appear on the lid or around the eye, ODs are often called upon to decipher whether these lesions are malignant, which they are approximately 15% to 20% of the time, according to Blair Lonsberry, OD, at his Thursday morning course. And, if the lesions are not malignant, optometrists may be tasked with treating them, as they could be contagious, cause mechanical damage or be cosmetically displeasing to the patient.

Examining, diagnosing and treating these lesions elevates the profession and allows patients to see a doctor dedicated to this specific structure. "I never refer to general dermatology for anything on the lids," Dr. Lonsberry said. He prefers someone who "knows what the lids are doing," which means oculoplastics. If it's something that can be treated within the scope of optometry—which depends on state laws—the optometrist has the knowledge, tools and ability to manage these patients.

On Presentation

Before making a diagnosis, keep a few tips in mind. Number one, "look at the eyelashes," Dr. Lonsberry said. "Hair loss is a big one for us. Malignant lesions won't keep lashes intact. They'll either lose them, or they will change color," he explained.

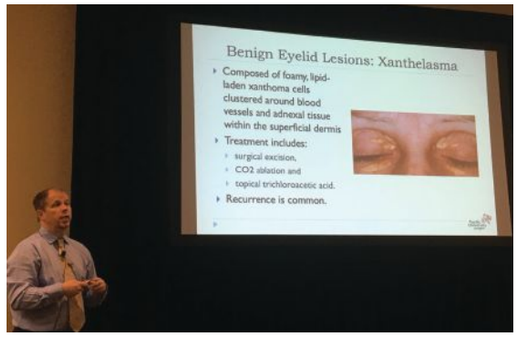
Second, consider size and shape. If it's asymmetric, shows unusual vessels, bleeds, is multicolored or is "greater than a pencil eraser in size (5mm), that's usually very concerning," he said.

Benign

When it comes to growths around the eye, the most common are skin tags, Dr. Lonsberry explained. They are benign but not always harmless. When pedunculated (as opposed to flat or sessile) papillomas grow on the lid, they can irritate patients and interrupt blinking, setting off a cascade of ocular surface discomfort.

You're also likely to come across patients with various types of hordeola, which are mostly caused by *Staph.* pathogens, themselves usually associated with blepharitis. So, Dr. Lonsberry advised, treat the blepharitis.

Bacterial conjunctivitis is often caused by serious infections, but before making that diagnosis, check to make sure the patient's blepharitis isn't rooted in *Demodex*. Dr. Lonsberry's tip for evaluating this: you don't need to yank a lash out to see the little mites. Simply twisting a lash will often cause them to creep around on the base.



Dr. Lonsberry shares his vast insight on treating various periocular lesions.

Malignant

With cancers, Dr. Lonsberry explained, you're most likely to see basal cell carcinoma, but misdiagnosis is common. You're looking at a misdiagnosed sebaceous cell carcinoma when you see chalazia recurring in the same spot, he said. Sebaceous cell carcinoma doesn't tend to metastasize, but squamous cell carcinoma often does, he said.

While sebaceous gland carcinomas are rare within the general public, they are somewhat common in the Asian Indian population, where they represent 40% of eyelid malignancies. They can be identified by firm, yellowish nodules that resemble a chalazion, but do not respond to standard therapy. So, if you're treating and seeing no change, it's time for a biopsy, and it may be time to set up that oculoplastics consultation, according to Dr. Lonsberry. ■

Innovation Summit Showcases New Tools in the Pipeline

OIS, continued from Page 1

The presenting companies certainly are headed down the right path, with a slew of innovative products, including a multi-dose eye drop solution for blepharitis, an eye drop bottle that withholds BAK preservative in the container and releases the drop preservative-free on the eye, and a topical drug that has the potential to reverse mydriasis.

A spotlight on the evolution of dry eye management included presentations from Oyster Point Pharma, TearSolutions, 20/20 OptimEyes Technologies and Azura Ophthalmics. New therapies on the way include a nasal spray for dry eye symptoms, a peptide treatment to restore normal tearing and corneal health, an aqueous mucoadhesive formulation with a higher-dose cyclosporine A drop and an eyelid ointment that targets hyperkeratosis and reduced lipid production from meibomian gland dysfunction.

Joseph Boorady, OD, co-chair of the event, moderated a panel discussion that explored current therapies quickly becoming standard of care, as well as newer therapies and technologies that drive the decision-making process and help practitioners diagnose and tailor treatment. The panel also discussed how clinicians can improve patient adherence and compliance, which continues to be an issue, even with all of the exciting new technologies.

"There's such an incredible unmet need that we have, and it's worldwide, so we'll continue to have entrepreneurs and creators coming up with solutions for that," Douglas K. Devries, OD, noted. "I'm sure 10 years from now we'll be saying how archaic were we in 2020."

The next segment on advancements in glaucoma therapies featured Belkin Laser, Diopter Corp. and Allergan, with presentations of a non-contact and painless SLT laser, a modified contact lens that delivers drugs directly to the cornea and a bimatoprost sustained-release drug delivery implant.

Dr. Thimons moderated a panel of experts who discussed rehabilitation and drug delivery to lower the number of drops for patients.

Mitch Ibach, OD, remarked on the possible ease of a contact lens drug delivery device. "I thought about how many patients are wearing contact lenses and how easily adaptable that technology would be for patients already comfortable putting in and taking out a contact lens," he noted. The panel did feel that older patients unfamiliar with contact lenses might fare better with an implantable option rather than a contact lens.

Trailblazing Together

The second half of the summit started with another product showcase, this one highlighting spectacle lens technology to control myopia progression (SightGlass Vision), a next-generation contact lens design (Lentechs), an easy-to-use eye lipid mobilizer for dry eye (Eyedetec Medical), a wearable low vision solution with VR technology (IrisVision) and a dark adaptation testing headset (Maculogix).

Drs. Chester, Wiley, Trattler and Kramer discuss with Dr. Karpecki how ODs and MDs can work together to provide their patients better integrated care.

The next spotlight on collaborative care in cataracts and ocular surface disease featured a discussion moderated by summit co-chair Paul Karpecki, OD, that also emphasized premium intraocular lenses and crosslinking procedures. Elise Kramer, OD, noted that the combination of corneal crosslinking and specialty lenses can help many patients with their vision and their fears of progression.

Thomas Chester, OD, emphasized that for optometry to participate in the medical model and validate its credibility, optometrists need to stay up-to-date and remain on the forefront of innovation. The panel agreed having more events where innovating optometrists and ophthalmologist can learn from each other can help forge and reinforce that relationship.

"Without collaborative care, we're not going to be able to serve our patients," William Wiley, MD, said. "Using either internal or external co-management, I think optometry and ophthalmology now have to work together."

The final panel featured industry leaders from Allergan, Johnson & Johnson, Alcon, Bausch + Lomb and Novartis on their insights into innovation and the continuing relationship between industry and eye care professionals. The panelists remarked on the tremendous role of optometrists who help with the development of products that are eventually used every day by their peers. The panel also highlighted optometry's seat at the table on the innovation stage, during the promotional approval process and for possible commercial leadership positions. They noted the optometrist's management of patients early in their visual journey is critical for their respective companies' futures.

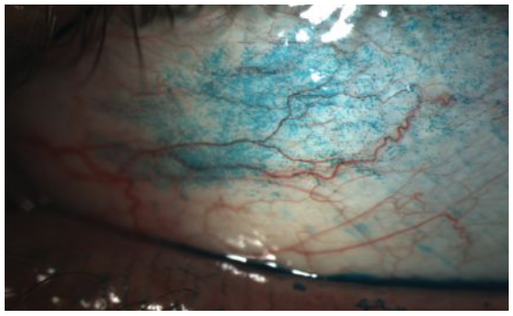


Photo: Whitney Hauser, OD

Patients with dry eye have a lot of new treatment options in the pipeline, as discussed by expert panelists at OIS on Wednesday afternoon.

OIS brings industry, investors, innovators and doctors together under one roof to share ideas, network and learn not only about current thinking but also get a look at the future. The summit continues to give optometrists and ophthalmologists alike new data and collegial advice and insight to better care for patients.

"You get to be ahead of the curve, which I think is the most exciting place to be," said Dr. Thimons. ■

WHAT COULD BE SMARTER THAN GROWING YOUR OPPORTUNITIES?

Premier Academy360

As an optometric practice, you want more patients, consistently well-trained staff, and fewer missed opportunities. Premier Academy360™ is here. It's a suite of workshops, webinars, and eLearnings designed to help you build your business.

Premier Academy360 is a proud sponsor of the SECO MedPRO360 Theater. Learn more at **Academy360SECO.com**.

VSP PREMIER PROGRAM

Experience More™

©2020 Vision Service Plan. All rights reserved.
VSP is a registered trademark, and Premier Academy and Experience More are trademarks of Vision Service Plan. 63415

During SECO, Get Your FREE AB Max™

The POWER of the PULSE

Advanced Doctor Treatment for Anterior Blepharitis*

Visit Myco Industries/AB Max™ in Booth 1639 During SECO

As part of the special program during the event, when you purchase six (6) boxes of AB Max™ procedure packs, you will get the AB Max™ device for FREE.

From one of the inventors of the first doctor's treatment for blepharitis — the AB Max™ is a new Doctor's Treatment for Anterior Blepharitis* with Patented PULSE functionality specifically engineered to remove even the most tenacious debris and plaque (biofilm) while gently massaging the outer eyelid margins for a better patient experience!

This innovative product delivers a newly Patented PULSE action for more efficient and rapid outer eyelid debridement, and a more comfortable patient experience without catching or pulling long eyelashes or lash extensions out.

AB Max™ provides:

- **BETTER treatment outcomes with HIGHER PROFITS**
- **Add $100,000 or more to your bottom line annually**
- **During the event - NO CAPITAL INVESTMENT required**

Ask us about our Trade IN Trade UP to upgrade your first-generation device for the AB Max™

www.AB-Max.com • 1-800-721-8006

**Anterior blepharitis means blepharitis on the outer eyelid margin, including the eyelashes.*

AB Max™