

SEPTEMBER 2014



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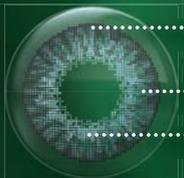
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**References:** 1. Based on ratio of lens oxygen transmissibilities; Alcon data on file, 2013. 2. Based on in vitro measurement of contact angles of unworn lenses; significance demonstrated at 0.05 level. Alcon data on file, 2009. 3. Eiden SB, Davis R, Bergenske P. Prospective study of lotrafilcon B lenses comparing 2 versus 4 weeks of wear for objective and subjective measures of health, comfort, and vision. *Eye & Contact Lens.* 2013;39(4):290-294.

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# The Editorial Page

## There's a First Time for Everything

As fleeting as they might be, firsts are a big deal. Baby's first steps. A first day of school. A first love or a first job. These are the firsts that many people experience. Then there are the first times that mean something for a large group of people, like the cracks in the glass ceiling. These are often talked about in the pages of *Women In Optometry*, such as women becoming the first female deans of schools or rising to ever-higher positions in professional organizations or industry. Despite being able to list the names of dozens of these women who have been first in optometry for some accomplishment, the fact is that firsts like this still make news because of their relative rarity.

Consider the August decision by the San Antonio Spurs to hire Becky Hammon as the NBA's first, full-time, paid assistant coach. Overwhelmingly, the comments to stories about her hiring were positive and congratulatory. But there were skeptics, too, who seemed to say that there is only so much opportunity to go around. If women advance, what happens to the men?

Is that what's happening in optometry? Not surprisingly, the women featured in this issue say no—in part because the definitions of success and opportunity may be changing. **WO**



Marjolijn Bijlefeld

## Remembering Their Firsts and Thinking About Those Yet to Come

### Q: What "first" in your career was important to you?

**Dr. Gilbert-Spear:** While I was looking for an answer, it hit me that what makes me feel good about what I do is when employees or patients thank me for inspiring them or helping them. I distinctly remember the first for both of these. One day, my manager walked into my office to talk to me about her challenge balancing work and family. We talked about how she could make things easier. When we finished, she thanked me and said, "I really admire you. You accomplish a lot but still find time for your family and your staff." I'm not an emotional person, but her words brought tears to my eyes. To know that other women see your trials and accomplishments as motivation is wonderful to me. I also loved learning that I could change patients' lives—just with contact lenses. I had only been in practice for a few months when a multifocal patient (who had never heard of the option before) came back in for a follow-up. She hugged me and said the lenses had changed her life. Being in a profession where we have this gift to give our patients is amazing.

**Dr. Jasper:** The first important event in my career was graduating from optometry school. I knew that the odds were against my sisters and me all accomplishing our dream of becoming doctors. As the oldest, I felt tremendous pressure. If I could make it across that stage, my sisters would follow me. When my parents brag about their three doctor-daughters, I'm a little embarrassed yet proud that they helped three girls with very meager resources make their dreams come true.

### Q: Does the advancement of women in the profession in any way push men aside?

**Dr. Jasper:** In a *Fortune* essay, Warren Buffet wrote, "Women are an undervalued resource who are key to America's prosperity." How can any country know what it is capable of if it is underutilizing or undervaluing half of its people? Many times people of both sexes think that it is women against men or women instead of men. It's not; it is women in addition to men.

I think that women have often been their own worst enemy. Instead of looking for opportunities, we leave it for someone else to do. I am inspired by women and men, inside and outside of the profession, to embrace opportunity even when I don't feel that I'm the most equipped for it. Then I work hard to be the best I can be in an effort to change people's lives for the better. That's my hope: that all of us can one day say that we did all we could to impact others. **WO**



(l-r): Professional Co-editors Dr. Jasper and Dr. Gilbert-Spear



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# Focus on Outcomes

By JeanMarie Davis, OD, FAAO



## Millennials Love Their Colors

How many shades of eye shadow do you have? If you are a millennial makeup user, the average number would be 11. A recent Kelton survey sponsored by Alcon shows that millennials love color and love to change their style frequently.<sup>1</sup> That makes the arrival of AIR OPTIX® COLORS contact lenses an ideal option for this large group of patients.

Certainly, millennials are not the only group of patients who might be interested in changing or enhancing their eye color. But the data on this group serves as a kind of wake-up call that optometrists should be discussing the option with their patients.

More than half of millennials, 52 percent, describe their style as always changing. Indeed, 54 percent say that they regard making regular changes to their appearance as empowering and a fundamental part of their personality.<sup>1</sup>

Millennials also have a special flair when it comes to their appearance. They'll typically incorporate four different colors into one outfit. Whether the look is bold or playful, it is undoubtedly colorful. Millennials surveyed said they are also on a constant lookout for new items to enhance their style. So why not add color contact lenses to the mix? In fact, survey respondents most often said that they enjoy being complimented most on their eyes.<sup>1</sup>

Then again, who wouldn't enjoy a compliment about beautiful eyes? Consider that the worldwide beauty market for products and services is \$426 billion.<sup>2</sup> There is ample opportunity for growth in that segment—right in your practice. While 19 million Americans say that they are extremely interested in

wearing color contact lenses, less than 3 million people wear them today.<sup>3</sup> In fact, of those 19 million, more than 9 million do not wear contact lenses currently.<sup>3</sup>

Consider the launch of AIR OPTIX® COLORS contact lenses as a way to meet an untapped desire. For the first time, one contact lens with a unique combination of breathability\*, comfort and beauty is fully capable of capturing the exciting potential for color contact lens growth in your practice. New AIR OPTIX® COLORS contact lenses, the first silicone hydrogel color contact lenses in the U.S., meet the needs of both the patient and the eye care professional. AIR OPTIX® COLORS contact lenses encapsulate the 3-in-1 color technology from FreshLook® contact lenses in lotrafilcon B material. With the color inside, all that touches patients' eyes is the ultrasoft permanent plasma surface of AIR OPTIX® brand contact lenses.

There is no refit required for current AIR OPTIX® AQUA contact lens wearers,<sup>1</sup> which saves chair time and makes it easy to introduce your patients to the world of beautiful, breathable\* and comfortable color contact lenses.

So here's a prime opportunity to expand the color contact lens market. Most color contact lens wearers first become aware of color contact lenses through their family and friends; in fact, only 6 percent first learn about them from practice staff.<sup>3</sup>

Patients have the desire, but eye care professionals have been reluctant to speak to patients about or fit color contact lenses due to barriers such as low oxygen transmissibility, comfort issues or a concern about extensive chair time.<sup>3</sup> With AIR OPTIX® COLORS, those days are over. So bring a little color to your patients' lives. They'll love it.

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<sup>1</sup> Data based on an online survey of 619 American women ages 18-29 and 608 American women ages 35-49; Alcon data on file, 2014.

<sup>2</sup> Jones Geoffrey. *Entrepreneurship and Multinationals*. Edward Elgar Publishing, 2013.

<sup>3</sup> Based on a survey of 375 U.S. consumers interested in, or wearing, color contact lenses; Alcon data on file, 2013.

<sup>4</sup> Alcon data on file, 2013.

<sup>5</sup> Based on a survey of 302 ECPs; Alcon data on file, 2012.

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

Millennial woman appreciate and enjoy being complimented most on their:<sup>1</sup>



Millennials believe using different colors can:<sup>1</sup>



## Visit the Color Studio

Helping patients select the color that's right for them is also simplified with the introduction of the AIR OPTIX® COLORS Color Studio virtual try-on tool at [airoptixcolors.com](http://airoptixcolors.com). For patients currently wearing FreshLook® color contact lenses, AIR OPTIX® COLORS contact lenses are a quick and easy upgrade since the new lenses are available in the same familiar colors.

AIR OPTIX® COLORS contact lenses are available from plano to -8.00D in nine shades—five subtle (Pure Hazel, Blue, Green, Gray and Brown), and four vibrant (Honey, Brilliant Blue, Gemstone Green and Sterling Gray).

### SUBTLE COLOR



### VIBRANT COLOR



JeanMarie Davis, OD, FAAO, is Global Performance Development, Vision Care Technical Head at Alcon.

# When It Comes to Professional, Leadership and Personal Style, One Size Doesn't Fit All

*Women In Optometry* inaugural event emphasizes that molds are meant to be broken

**D**ori Carlson, OD, FAAO, told the audience at the *Women In Optometry* inaugural event held in Philadelphia how she would make herself frantic before she left for any business trip. She'd write lists detailing the schedules for her two sons. She'd spend hours in the kitchen, cooking and freezing meals that her husband, **Mark Helgeson, OD**, could warm up. Then a surprising thing happened, she said. "Mark went on a trip. And he left me nothing. No lists, no meals. Nothing." She realized at that moment that he was just as capable a solo parent as she was. It was a liberating moment as she allowed herself to focus more fully on what her professional requirements were and realized that for the days that she was on the road, she could put most of the daily family obligations aside.



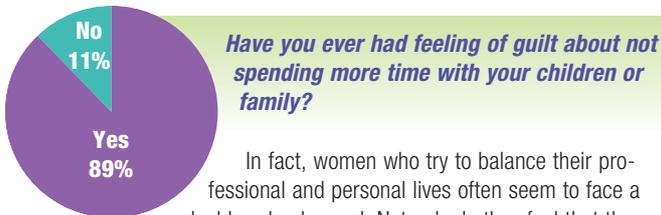
Dr. Carlson

**April Jasper, OD, FAAO**, echoed a similar sentiment. Creating a balance between her professional life as a Vision Source® practitioner and administrator and her personal life has meant blending the two. Her husband, **David Jasper**, is her business manager. Her mother is her office manager. Her father takes care of her two children—or the kids come along on trips.

However, this balance for them and most women ODs is not necessarily guilt-free. Indeed, when the question was asked of the women ODs in the audience whether they ever felt guilty about not spending more time with their children or family, nearly 89 percent of the respondents said that they did.



Dr. Jasper

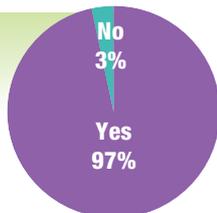


**Have you ever had feeling of guilt about spending more time with your children or family?**

In fact, women who try to balance their professional and personal lives often seem to face a double-edged sword. Not only do they feel that they are sacrificing something at home, they also say they're struggling to accomplish everything at work at times.

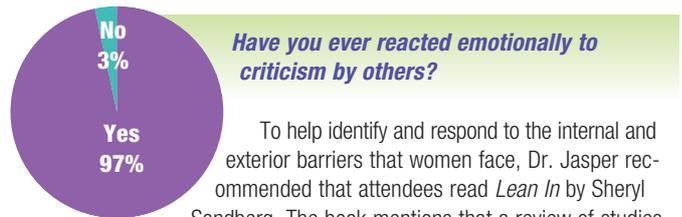
**Have you ever felt like you were struggling to get it all done at home and at work?**

"Women will experience guilt when anything goes wrong with the family or the job. We tend to believe that all that goes wrong is somehow due to our inadequacies," said Dr. Carlson. "We must overcome that. We cannot control everything. We must let others



in our family circle help us so that we can be leaders. Remember the analogy of the leadership path being a jungle gym, not a ladder. There is no one way to do things; there is the way that works best for you. Just remember, there is always a way."

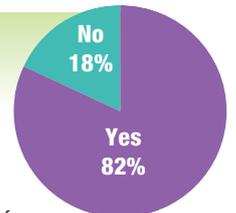
"Women have no less ability than men, but they are harder on themselves," said Dr. Jasper. That's not just the audience that felt that way, either. Dr. Jasper cited a study of college students on performance on course exams that found that women judged themselves more harshly and responded more emotionally to criticism than men.



**Have you ever reacted emotionally to criticism by others?**

To help identify and respond to the internal and exterior barriers that women face, Dr. Jasper recommended that attendees read *Lean In* by Sheryl Sandberg. The book mentions that a review of studies on work-life balance found that women who participate in multiple roles have lower levels of anxiety and higher levels of mental well-being. That was offered as encouragement to say yes to opportunities that arise.

**Have you ever been afraid to say yes to an opportunity?**



## The Changing Workforce

The *Women In Optometry* meeting was held at the 150-year-old Union Club, a stately building for a social club that allowed women as members only beginning in 1986. It seemed an apt setting for a networking session of women in a profession that is changing rapidly, at least by the numbers. Women ODs accounted for about 28 percent of the workforce in 2008. "They're at about 40 percent today, and it's expected to be 50 percent by 2020," said **Marjolijn Bijlefeld**, editor of *Women In Optometry*, who welcomed attendees. "Two factors drive the shift: women have outnumbered men about 2-to-1 in optometry school, and more of the ODs who are retiring are male."

However, approaching equality in numbers in the workforce isn't the same as equality in distribution. A workforce distribution chart from the American Optometry Association shows that with the exception of government positions, more men than women are in ownership positions while the more women than men are in employed categories. "There are perfectly valid reasons why women may prefer employed positions," Bijlefeld said, adding that it does leave a question about the leadership void as the current owners of practices retire. **WO**



Marjolijn Bijlefeld

*Continued on page 7*

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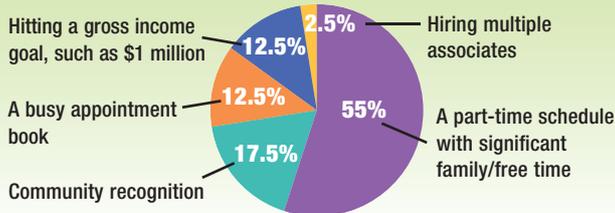
## COVER STORY

**C**heryl Engels, OD, MBA, a senior consultant for The Power Practice and director of its Practice Made Perfect program, told attendees that success is measured differently by each individual. She emphasized that point by asking attendees to identify the one key factor by which they measured their success in practice—and the answers varied widely.



Dr. Engels shared effective management strategies.

### Which response most resembles your idea of professional success?



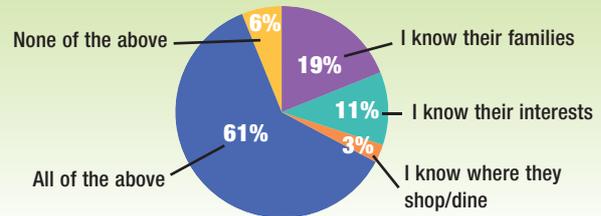
Clearly success doesn't have the same look to all people, but Dr. Engels said that there is a characteristic in common. "Successful people look forward to going to work." She said she derives great pleasure from helping young ODs get started and enjoys the detailed planning that goes into opening or purchasing a practice. She recommends that ODs find those aspects of their day that bring them joy.

She also said ODs can cultivate a management and leadership style in their setting that feels comfortable to them and is successful. The first strategy

is to empower employees to make decisions and take action. If employees feel that the ODs are micromanaging each task of the day, it stifles creativity and adds to the workload of the OD. She recommended the business management book, *The E-Myth Revisited* by Michael Gerber, which helps readers outline a way to work on their businesses, not just in their businesses.

She also encouraged ODs to get to know their employees so that they could reward and recognize them in meaningful ways. Many of the attendees of the *WO* meeting seemed to be on board with this idea already.

### Which one best describes your knowledge of your employees?



This is relevant information, she emphasized, because it allows the OD to increase the impact of recognition. In other words, the Starbucks gift card shouldn't be the default recognition tool. For an employee who is having a difficult time financially, a \$50 grocery store card may be exactly what that employee needs. Another may appreciate a donation to a child's sport's team.

When you have the right employees supporting you, do what you can to keep them. And if the employee isn't right for the job, work fast to fix the issue. Fifty-three percent of the audience responders at the meeting said that they had an employee whom they wish would turn in a resignation notice. Dr. Engels encouraged them not to wait for that. If that employee is a distraction to you, at work or even outside of it, it's not a good fit. Either outline what the expected behavior will be or, if it's not something you believe can be corrected, let the employee go, she said. "Fire quickly and hire slowly." *WO*

## Personal Style Matters

**J**ust as a management style reflects on you as a person, so does your personal style, said **Katie Gilbert-Spear, OD, MPH**, in her presentation to the *Women In Optometry* meeting. Dr. Gilbert-Spear quoted *Vogue* fashion director Lucinda Chambers, who said, "Style is self-expression but you have to have a self to express... You need to get to know yourself and what works for you; it's all about trial and error."



Dr. Gilbert-Spear

That's true for patients, too, who want to select just the right frames in the optical dispensary or the color contact lenses that enhance their eyes, she said. Women ODs are a natural source for information for patients who want to enhance their style with color contact lenses. While that characteristic can cover many patients, it's especially true for today's younger women between 16 and 34, who like to dress more fashionably, are influenced by trends and like to show off their looks, she said.

Dr. Gilbert-Spear was joined by **Ilaria Urbanati**, fashion stylist for

several of today's hottest celebrities. Urbanati, an emerging celebrity in her own right, along with actor **Nina Dobrev**, are the celebrity spokespeople for

the launch of AIR OPTIX® COLORS contact lenses. Urbanati told the attendees how she developed her career as a stylist, offering advice and trends from the latest fashion shows.

- For trendy clothes, buy inexpensive. For classic items, buy high-end.
- Staples for a wardrobe should include a cashmere sweater that doesn't pill and a great pair of jeans.
- Essentials for a business trip include one pair of flats, one pair of heels, one good dress, a purse or strap bag and a clutch (and the above-mentioned jeans and sweater).
- Fashion no-nos include boot-cut jeans and square-toed shoes.
- Keep skirts to two inches above the knee if you're wearing flats.
- Royal blue looks good on everybody. *WO*



Speakers at the *WO* event, (l-r): Dr. Carlson, Dr. Engels, Marjolijn Bijlefeld, Dr. Jasper, Ilaria Urbanati and Dr. Gilbert-Spear

# Take the Opportunity for a Fresh Start

After just a few months, OD sees practice ownership opportunity fills a need in community

In August 2013, **Carolyn Martin, OD, MS, FAAO**, received a phone call from her former employer. She was informed that the ophthalmology referral center where she had worked was closing in just a few months, and the doctor suggested Dr. Martin open up her own office to fill the void of eye care that would be left in Sedona, Ariz. "They were going to leave a huge vacuum because this community needs a local, full-service eye care provider," Dr. Martin explains. It would be a challenge, particularly for elderly patients, to drive 25 minutes to the next closest provider. "I thought about it for a couple of days and said OK."

The timing was right for Dr. Martin—she had left that office and temporarily retired for personal family reasons but was now able to get back to work. The doctors with whom she had previously worked knew she had a following of patients. "The community is big enough to support me, so it seemed like a no-brainer," Dr. Martin says. She found an office space in a shopping plaza and renovated the empty shell to become her dream practice.

When Dr. Martin opened her doors this year in early March, she was a first-time business owner—but one with several strategies and a lot of experience in place.



Dr. Martin built buzz by posting photos of the construction on her practice Facebook page.



Dr. Martin

**■ Draw from past experiences.** In addition to her time spent at MD referral practices, Dr. Martin got her career started at the VA in Albuquerque and returned several years later as the director of education there. She also worked at the Barbara Davis Center for Childhood Diabetes in Denver, which was affiliated with the University of Colorado, and at Walmart, and all of these experiences helped mold the practice she wanted to have.

**■ Invest in the best diagnostic equipment.** "I didn't want to open up with any regrets if I didn't make it, so I went all in and invested in all of the instrumentation that I thought a full-service eye care provider should have," Dr. Martin says. She did plenty of research before making her purchases. "I selected equipment that would bring value to the patients and help me diagnose and treat them with a higher standard of care," she says. "As an independent provider, I can be responsive to the community and its needs." If she learns she'll need more as technology advances, she'll add it.

**■ Offer patients something new.** In a rural practice setting, Dr. Martin says customers and patients are not exposed to many brand name frames. "The variety of eyeglasses available locally was minimal, so I wanted to bring in products that I knew people in the community wanted," Dr. Martin says. She also installed an in-house edger to provide the fastest turnaround time in the area, and she's recommending nutraceutical supplements that she has researched and believes will make a difference for patients.

**■ Create an appealing shopping area.** Dr. Martin turned to **Jay Binkowitz** and his consultative team at Gateway Professional Network (GPN), and the GPN Dispensary Management Program. "They helped me design the optical component so it maximized the space and was appealing to people coming in through the door," she says.

**■ Keep it local.** Dr. Martin likes to support local businesses, and she makes the assumption that most of the residents in Sedona do, too. So she keeps her prices competitive so that it's easy for people in the community to stay with her. If a patient mentions finding contact lenses cheaper online, she will match the price. "The patient is in control of the decision, and many people would rather keep it local," she says. "As a member of the community, I will take \$1 less if it makes my patients happy and they will be returning customers."

**■ Re-energize the community.** In just the few months since Dr. Martin opened Eye Boutique of Sedona, she says that the feedback has been incredibly positive. She has enjoyed participating in local events and



Dr. Martin opened her doors in March, just six months after hearing about an opportunity.

supporting the place where she lives and works. "We have a family connection because my daughter goes to the local school, so it's my duty to this community," she says. "The office has been well-received and has generated a lot of buzz." In particular, the ownership of the plaza where her office is located took notice of her modern design. "The owner is starting his own renovation to give the plaza a face lift because the office took everything up a notch."

**■ Look toward the future.** Dr. Martin is focusing on stabilizing the business and paying off her opening inventory so she can start producing a profit. But down the road, she sees the addition of an optician and, later, an associate doctor, who can work with her to utilize all three of her exam rooms. **WO**

# Don't Sweat the Debt

Doctor says excellent loan terms and steady income let her rest easy while living in the red



Can a young OD come out of school with a mountain of education debt and still afford to launch a solo practice? **Mindy Nguyen, OD, FAAO**, says the answer is yes, because she's done it.

Now nine years out of the Illinois College of Optometry (ICO), Dr. Nguyen has a six-year-old practice in Huntley, Ill., a northwestern suburb of Chicago, and is handling about \$500,000 in education and business debt without losing sleep over it.



Dr. Nguyen

"A lot of new graduates want that immediate check"

and take a job working in a corporate or retail setting so they don't have to sweat their debt. "Somebody offers them \$90,000, and that's a good chunk of money to pass up for a new grad with a significant debt," she says.

Still, for those willing to learn the business side, going solo is an option and not that impossible, she says. For Dr. Nguyen, the independence is worth the effort. "There are not many professions out there where you can be your own boss. Optometry is one of them," she says.

How she did it is key. She started her practice, Huntley Eye Care LLC, slowly and steadily. She negotiated her lease to get a few months rent-free, and she lived with a sister. She bought equipment she trusts, like a Marco slit lamp she purchased used instead of new. The office décor was neat but basic. She hired just one employee and was on the faculty at ICO, living on that income while she treated patients a few days a week. "I opened very conservatively with what I knew would let me open the door and get patients in," she says.

As the business grew, she made new hires or added equipment as needed. And there were bumps along the road. "I learned the hard way with certain things," she says. "But I always looked at my budget very closely. In the beginning, every time I purchased something I would ask, 'Can I pay it back?'"

She's still following the slow-and-steady method today, adding equipment and newer décor. The practice is still in the same location, and she sees patients there three-and-a-half

days a week and teaches one day a week at ICO. She has an office manager and two assistants and handles some administrative duties herself.

She doesn't try to do it all. She has a "great group of staff" that includes a capable office manager to do billing and deal with invoices. But at the end of each month, Dr. Nguyen looks at every statement and reviews the practice's finances, "so at least I can know if I'm having a good month or a bad month," she says. Nobody should be more invested in the practice than the owner, especially in a small practice where the loss of a key employee can wreak havoc.

As for dealing with debt, her student loan and her business loan are each about \$250,000. The terms are favorable; she says she was lucky when she borrowed for optometry school because the interest rate was very low, about 1.75 percent. "So I'm not in a hurry to pay it back because I'm not going to find a loan for less interest. I'd rather take the extra cash flow to invest back into the business."

Getting the business loan back when she started seemed daunting, "but I went ahead and applied anyway." The lending firm Matsco—now called Wells Fargo Practice Finance—approved the loan and structured it so she owed smaller payments during her start-up. Working with lenders who know the business of health care made a difference, she says. A local banker she approached kept pressing her to put down 20 percent, which she didn't have. "My brother-in-law joked around—'I can't believe any bank would loan you money.

You have nothing,'" she says. To his surprise, she got the loan approved.

Her lender was actually more optimistic than she was in estimating the business income during its start. She sent in a conservative estimate, "and the lender sent it back and said, 'You're going to make much more than this.' I was like, 'Really?' But we've done pretty well so far."

Though she's in solo practice now, her career path actually started with teaching. She received her bachelor's from Loyola University in Chicago, where she grew up, and then headed to ICO. After graduating there, she did a year of post-graduate residency training at the University of Houston College of Optometry. Then it was back to Chicago to teach at ICO while working part time at a corporate location.

She enjoyed teaching but found it exhausting. "Teaching was great, but I couldn't do it full time until the day I retired," she says. And she wanted more time around patients, but not in a corporate setting. "So opening a practice was my way of finding another environment where I would be happier."

And she is. Her goal is not to live rich, just to live well and have some control, she says. Making time for big events, such as vacations, is a lot easier when you're the boss. "I love this job. It's my office; no one tells me what to do. It's not an easy road, but it's not the paycheck that matters. It's the happiness you get. It's not for everyone, but if you want it go for it, it's possible with passion and hard work." **WO**

The screenshot shows the homepage of the Women in Optometry website. At the top left is the 'WO' logo with the tagline 'WOMEN IN OPTOMETRY'. To the right is a banner for 'Vision Source' with the text 'I REALIZED THE POTENTIAL FOR GROWTH WITH VISION SOURCE!' and a 'CLICK HERE TO SEE HER VIDEO' button. Below the banner is a navigation menu with links: HOME, MODELS OF PRACTICE, PHASES OF PRACTICE, BEYOND THE PRACTICE, FOCUS ON OUTCOMES, WID SURVEYS, LIVE EVENTS, and VIDEOS. The main content area features two article teasers: 'Private Practice Provided Maximum Flexibility for Family' by Joelynn Estevan, OD, and 'Staying True to Her Vision' by Rachel Cohn, OD. At the bottom, there are three sections: 'LETTERS FROM THE EDITORS' with an article 'Experience Makes Juggling Easier', 'DIGITAL MAGAZINE' with a 'View Archives' link, and 'WOMEN IN OPTOMETRY SPONSORS' listing Alcon, CareCredit, MARCHON, and others.

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References: 1. A market research study conducted amongst 107 US contact lens wearers representative of CLEAR CARE® purchasers in the United States, 2007. 2. Based on third party industry report 52 weeks ending 12/29/12; Alcon data on file. 3. Alcon data on file, 2009. 4. SOFTWEAR™ Saline package insert. 5. Paugh, Jerry R, et al. Ocular response to hydrogen peroxide. *American Journal of Optometry & Physiological Optics*: 1988; 65:2,91-98.

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# As Owner, OD Relies on Experience as Corporate Regional Director

Doctor takes the strategies she shared with others to build success in her practice

**W**hen **Deeba Chaudri, OD**, joined Luxottica in a Cole location soon after her 1997 graduation from Nova Southeastern College of Optometry, she told herself she'd stay for one year. She's still with the company—and can't imagine leaving now that she's made the commitment two years ago to become a sublease doctor at a flagship store in midtown Manhattan. Four years before, she had switched brands within Luxottica, moving from a Pearle Vision store to a regional director for LensCrafters, recruiting and hiring ODs and coaching them as they started with the company.



Dr. Chaudri

as a regional director. "I learned to coach and motivate doctors, and I learned about how to create and articulate a vision. When you have specific aspects you expect—whether that's seeing a certain number of patients or meeting revenue goals or meeting service goals—you have to manage the people who work for you. It's a matter of coaching and reinforcing," she says. For example, she'll coach the doctors who work there to make sure they don't turn their backs on patients while entering data into the electronic medical record. That's not necessarily intuitive, so it's worth mentioning. She also likes to share her goals for the practice. "Are we dilating or are we doing Optomap images on all patients? It's not just about making a dollar, but if we saw 100 patients and only looked at the retinas for 50 of them, we're missing educa-

tional and clinical opportunities."

With such a busy location, the goal is to be consistent with patient care. "We can't be robotic, and I don't want to tell the doctors who work for me how to practice. But I do want the message to be the same because what doctors say to these patients reflects on me," she says. For example, 50 percent of the business in this location comes from walk-in visits. "We take appointments, but emergencies and walk-in visits are key. We try to accommodate everybody," she says. More importantly, the practice goal is to make sure patients don't wait for more than about 10 to 15 minutes. So that means that the staff and doctors need to keep track of where a patient is, how long he or she has been there and what can be done to minimize the wait time or at least explain any delay to the patient. **WO**

## One-block Move Results in Big Changes

**T**he LensCrafters flagship store wasn't new when **Dr. Deeba Chaudri** came on. "The last doctor had been at the fashionable Fifth Avenue location for 15 years, and it had a great local clientele as well as lots of tourists," Dr. Chaudri says. The store did move last year—just one block away. In Manhattan, a one-avenue change of address can have a big impact. "Sixth Avenue is more of a corporate Manhattan location. We're near the offices for the Food Network, HBO and many law firms. We are able to do different things as a result," she says. For example, she has appeared on *The Dr. Oz Show* to explain how a comprehensive eye exam can detect systemic conditions, such as high blood pressure.

The new location also has an entirely new design, with hardwood floors and a trendy orange-colored theme. "It's very different from the old Fifth Avenue carpeting. In Manhattan, people want nice, clean and trendy. LensCrafters takes care of everything; we have a beautiful contact lens area, and it's a much better work environment," she says. Working in affiliation with the flagship store, Dr. Chaudri says, "there's a huge emphasis on the exam experience. LensCrafters and other corporate locations are starting to put more of an emphasis on the doctor's role. It's more important than just coming in for a new prescription and more of an explanation of the precision equipment that the doctor has, too, to arrive at the best prescription." **WO**

Today, her practice, Cosmopolitan Optometry, has five ODs, four of whom are women. She and another OD are full time, and the others are part time. That's essential in such a busy location. "We have seven-day coverage, with two doctors on five days a week. I work full time, Monday through Friday, but I like to have the doctors rotate," she says. Residents at the State University of New York State College of Optometry often take slots there, too, so that they can keep their clinical skills fresh, she says. Being right around the corner from SUNY is helpful, of course. New graduates who want to stay in the city can usually piece together a full-time schedule if they're willing to be flexible. "In Manhattan, there's an optical on nearly every block, but they may not all have an OD every day. But everyone wants an OD to cover on Saturday." So she likes to network with her contact lens representatives, through professional group dinners and through the students she knows to get leads on doctors looking for work.

In a way, what she's doing for her own practice now is similar to what she was doing

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### Patricia Poma, OD

#### Don't Be Afraid to Make Changes

*Just make sure your patients experience satisfaction through their visit and beyond*

Patricia Poma, OD, says a few simple strategies increased practice revenues at Birmingham Vision Care in Bloomfield Township, Mich. The three practice partners—Dr. Poma, Harriet Pelton, OD, Lloyd Snider, OD—took the leap and decided to raise prices for their services while dropping some managed vision plans that reimbursed poorly. That's not as simple as it sounds; it's scary, especially as the economy was starting to stumble. But Dr. Poma says they knew that they had to do some pruning to make the practice thrive. At the same time, they added more medical services, began participating in more medical plans, and added emphasis on their vision therapy services, too.

Even before the Dr. Poma joined the practice in 2006, right around the time the group joined Vision Source<sup>®</sup>, the doctors and staff took pride in the excellent patient service they provided. "Patients feel like they've come to visit a friend. The staff members talk to them, and we take the time to answer their questions. We don't rush patients through," she says. All four of the doctors, including associate Stephanie Baxter, OD, and the staff are friendly and caring, and they make sure that any new employees display those same characteristics. "I'm only as good as my weakest employee," she says.

Dr. Poma recalls that the practice partners realized they needed to do something to disrupt the status quo. "I don't think there was an a-ha moment, but we are good at gauging when things change. When the economy took a hit in suburban Detroit, people began fleeing the state. So you have to adapt to the changes that brings."

They realized they risked potentially losing some patients by raising prices modestly and stopping their participation with some plans. They were also hopeful that those losses might be temporary. And, indeed, some were. "Some of my patients came back to me and told me, 'I left you for\_\_\_\_, and I'm never doing that again.' They realized that they didn't get the level of care at other places that they had come to expect from us," she says.

For example, Dr. Poma calls herself a stickler about the schedule. "Patience is not my virtue, so I want patients to know we respect their time. The practice staff and doctors have an instant message system to alert a doctor if a patient has been waiting for five minutes. At that point, an explanation is offered to the patient. With two of the four doctors working at a time in four exam lanes and an ancillary lane, keeping track of the schedule is an important task. Patients appreciate the prompt attention they receive, and they also appreciate being kept updated if there are any brief delays.

There's an important lesson in that. "Sometimes we focus on the patients who frustrate us ... like the ones who complain or the ones who aren't loyal enough to stay with us. But really, those are a drop in the bucket. If we really focus on the patients who make us happy, we end up providing a better level of service for all of our patients. We learn from them, and we enjoy ourselves," she says.

The staff at the practice is empowered through a philosophy Dr. Poma calls "the power of yes". "Just take care of the patient now, and we'll talk about it later. It makes staff members feel good if they can solve a problem and take care of the patient, and there's much less knocking on my door to ask me questions that they are generally capable of solving." If an employee doesn't handle the situation quite like she might have liked, she considers it a learning opportunity. Privately with the employee, if necessary, but more often at a staff meeting, she and the staff can talk about ways to handle similar situations differently in the future. "We keep a small stack of Starbucks gift cards in our safe, and staff members are free to give those out as needed. Staff members report back if they hand out a gift card, and they're expected to explain what happened and why it happened. That allows us to fix any systemic problems and exceed expectations for all of our patients."



Patricia Poma, OD

# Starting at the Right Scale

Electronic medical records and e-communication tools were part of the vision for doctor's first office

Patients sitting in the reception area at Custom Eyes Optometry in Roseville, Calif., are having a little fun, completing their medical history questionnaire on an iPad. "They're excited to have the technology at their fingertips,"



**Dr. Jennifer Everett and her husband, Brian Everett, opened their practice in late 2013.**

says **Jennifer Everett, OD**, who opened the practice in September 2013 with her husband, **Brian Everett**, an ophthalmic technician.

The two had wanted to open a practice together and spent several years looking for the right location. This community, a dozen or so miles outside of Sacramento, seemed like a good fit for the family, which includes the couple and their 8-year-old twins.

She knew she wanted to have electronic medical records (EMR) from the start, and she selected MacPractice, which she chose in part for its affordability and also for the intuitive learning. Another benefit is that it syncs with SolutionReach, which she uses to send text and email reminders to patients. Dr. Everett had never worked with an EMR before, but she likes the ability to move through the process quickly, especially for normal findings. She is, however, cognizant that an EMR can distract a doctor's attention away from the patient. "I do my best to make eye contact with the patient as much as possible. I lay my iPad on the desk and only enter data into the system when the phoropter is in front of the patient or at the end of the visit. I leave it down in between, when we're speaking."

When she opened the practice, she knew the kind of high-tech and high-touch look she



**The couple's 8-year-old twins enjoyed the ribbon-cutting ceremony.**

wanted. "This is a full-service practice, offering vision therapy in its own room," she says. In addition, she has two exam lanes, as well as a pretesting room. Brian Everett manages the in-house lab so that the practice can deliver eyeglasses fast to most patients.

The full dispensary carries about 350 frames and 10 different brands of sunglasses. The front of the office features large panes of glass, letting in lots of light and offering a full view to the curious

passerby. "When I used to go to my optometrist, it was a dark space. I wanted everything here to be clean, inviting, bright and modern."

For the first year, it has just been the two of them managing all the tasks needed to start up a practice. "We were at 300 patients and building this summer," she says, so she's pleased to be hitting the marks they have set for themselves. **WO**

## Primed for Her Second Career to Start

As **Emily Pike, OD, MPH**, gets ready for her career to start as the optometrist in a business venture developed by an ophthalmologist, another optometrist and their business partner, she says she realizes how much the connections that she's made have played a role.

A 2014 graduate of University of Missouri-St. Louis (UMSL) College of Optometry, Dr. Pike comes to optometry from a 12-year career in public health. With three children, now 10, 7 and 5, she decided to go back to school, something she had long anticipated she'd do. "I have always been interested in health care and did apply to medical school right out of my undergraduate program," she recalls. In retrospect, being wait-listed was a lucky thing. "I decided to pursue the master's in public health instead."

Despite a satisfying and varied career in public health, "I always felt like there was something missing," Dr. Pike recalls. A conversation with some friends who were ODs crystallized her decision. "Hearing them talk about it

made me want to learn more," she says. So she dipped her toes in the water by working "very part time" as an optician at a nearby practice.



**Dr. Pike**

She ended up deferring her admission for a year, as she was pregnant with their third child. Then when she was ready to start school, she remembers "swallowing my pride and asking my parents for help." Her retired father turned out to be an enthusiastic caretaker for the kids, and a happy result is that her parents and children have developed a special relationship. Her husband's support for the career change

helped make it possible, she says.

Dr. Pike says she knows she is lucky that her career change didn't require her to uproot her family. St. Louis is a relatively saturated market because so many graduates want to stay in the area. That's one reason that Dr. Pike began developing a network early in school. She served as the American Optometric Student Association national liaison to the American Public Health Association. She was also the president of the

Missouri Optometric Student Association and the president of UMSL's private practice club.

One of the early contacts she made was with the business partner in what has now launched as Absolute Vision in Webster Groves, Mo.—the practice where she'll be working. Neither the ophthalmologist nor the other OD will be seeing patients in this practice location; the business partners simply saw the opportunity and realized Dr. Pike was the one to bring it to fruition.

She won't disconnect from her public health background entirely, especially not her role as a health educator. "Optometry is not just a separate entity in health care. When we contribute to an individual's health care, we're contributing to the collective health of the community," she says.

And she'll remain active in professional organizations that seek to advance the profession. "Without people to advocate for our rights to practice, we'll lose what we've gained." She also plans to volunteer her time outside of the new practice to help provide vision screenings and care for the needy. **WO**

# Women in the NEWS

These ODs have recently been awarded, acknowledged or recognized in their communities or by organizations

◆ **Janice Scharre, OD, MA, FFAO**, was appointed to the position of provost and vice president for academic affairs at Salus University. Dr. Scharre will work to promote and maintain a distinctive academic vision at the uni-



Dr. Scharre



Dr. Grover

versity as the chief academic officer, in coordination with the president. Dr. Scharre also recently announced the appointment of **Lori Grover, OD, PhD**, as dean of the Salus University Pennsylvania College of Optometry.

◆ **Amy Dinardo, OD**, an associate professor in the Michigan College of Optometry at Ferris State University, has been named regional vice chair for the American Academy of Optometry's Admittance Committee. Dr. Dinardo will provide assistance to candidates applying for a fellowship.



Dr. Dinardo

◆ Johnson & Johnson Vision Care, Inc. (JJVCI) announced the appointment of **Charissa Lee, OD**, to the role of director, education, JJVCI North America. In this role, Dr. Lee will lead the development of programs supporting the schools and colleges of optometry across the U.S. She will report directly to **Millicent Knight, OD**, head of professional affairs, JJVCI.



Dr. Lee



Dr. Knight

◆ The Ohio State University College of Optometry has named **Karla Zadnik, OD, PhD**, its fifth dean effective June 1, 2014. Dr. Zadnik is the first female to be appointed dean of The Ohio State University. Also, **Barbara Fink, OD**, associate professor of optometry and vision science and chair of the Committee for Inclusion and Diversity at the college, received the Association of Schools and Colleges of Optometry (ASCO) Dr. Jack Bennett Innovation in Optometric Education Award.



Dr. Zadnik



Dr. Fink

◆ At the American Optometric Association's annual Optometry's Meeting in Philadelphia, **Andrea P. Thau, OD**, of New York City, was elected vice president after serving on the board since her election in 2007. **Barbara L. Horn, OD**, of Washington, Michigan, was re-elected to her board position.



Dr. Thau



Dr. Horn

◆ **Shannon Steinhäuser, OD**, of Phoenix, was the recipient of the President's Award at the 2014 Arizona Optometric Association's (AZOA) Spring Congress.



Dr. Steinhäuser



Dr. Schmitt

**Cheryl Schmitt, OD**, of Tucson and Douglas, became president of the AZOA, and **Lilien Vogl, OD**, of Avondale, became president-elect.



Dr. Vogl



Dr. Baker

◆ **Cynthia Baker, OD**, of Denham Springs, became president-elect of the Optometry Association of Louisiana.

◆ At the 2014 Annual Conference for the Georgia Optometric Association, **Nhung Brandenburg, OD**, of Atlanta, became secretary, and **Glenda Brown, OD**, of Atlanta, became immediate past president.



Dr. Brandenburg Dr. Brown

◆ Several women ODs were recognized as Docs of Distinction in the fourth annual Optometric Business Innovators report, a special collaborative project between *Vision Monday* and Review of Optometric Business: **Maria Sampalis, OD**, of Warwick, R.I., and **Jeri Schneebeck, OD, PC**, of Aurora, Colo., for Patient Experience; **Gwen Gnadt, OD, MPH**, FFAO, of Lake Ronkonkoma, N.Y., and **Thuy-Lan Nguyen, OD**, of Pembroke Pines, Fla., for Business Management; and **Maria Higgins, OD**, of Frederick, Md., and **Aleksandra Wianicka, OD**, of Babylon, N.Y., for Digital Media and Marketing.



Dr. Sampalis Dr. Schneebeck



Dr. Gnadt Dr. Nguyen



Dr. Higgins Dr. Wianicka

◆ ASCO has elected Pacific University College of Optometry dean, **Jennifer Coyle, OD, MS** (formerly Smythe) as president for a second term. ASCO also elected several officers to the board of directors including **Elizabeth Hoppe, OD, MPH**, DrPH, founding dean, Western University of Health Sciences, and welcomed many new directors including **Lori Grover, OD**, FFAO, dean, Salus University Pennsylvania College of Optometry, and **Kelly Nichols, OD, MPH, PhD, FFAO**, dean, University of Alabama at Birmingham. **WO**



Dr. Coyle



Dr. Nichols



Dr. Hoppe

◆ **Elizabeth Hoppe, OD, MPH**, DrPH, founding dean, Western University of Health Sciences, and welcomed many new directors including **Lori Grover, OD**, FFAO, dean, Salus University Pennsylvania College of Optometry, and **Kelly Nichols, OD, MPH, PhD, FFAO**, dean, University of Alabama at Birmingham. **WO**

# Promote the Benefits of the Recommendations You Make

Then make those purchases more accessible

Making eye care accessible has been a goal of **Jewell E. Ginter, OD**, since 1982 when she opened Ginter Eye Care in Lubbock, Texas. “We like to offer every avenue we can for our patients,”



Dr. Ginter and her husband, Job Fitz, who serves as the practice's general manager

explains **Sarah McKinnon**, who is the practice's billing and human resources manager and oversees the front desk. Whether that's medical eye care, vision therapy, laser refractive surgery or the best ophthalmic products on the market, Dr. Ginter, her four associates—three of whom are women—and the staff want their patients to be able to take advantage of their high-quality recommendations.

It starts in the exam room, and the doctors talk about eyeglasses specific for each patient's lifestyle. “The doctors always highly recommend a second pair of eyeglasses,” McKinnon says. That often includes sunglasses for both eyeglass and contact lens wearers,

as well as a backup pair for emergencies or to give their eyes a break from contact lens wear.

These essential purchases are explained with an emphasis on the benefits for ocular health, such as protection from harmful light or glare. Dr. Ginter and her associates often talk about antireflective treatments that offer bluelight-blocking technology, which can reduce glare outside and indoors when using tablets, smartphones and computers. “When the doctor mentions these products, it comes across to the patient as what he or she needs,” McKinnon says, as opposed to a hard sale when the patient first hears the options from the optical staff.

Ginter Eye Care offers a variety of payment options to make its accessible eye care more affordable. “We accept all credit cards, or cash or checks. The CareCredit credit card was another step,” McKinnon says of the partnership that began more than eight years ago, before she came to the practice. The practice incorporated CareCredit as a payment option back then to provide another option for patients.

The staff might bring up this additional method of payment in the optical as the patient is selecting eyewear, especially if he or she cannot decide between two frames. “If a patient is hesitant, the optician might say,

‘Have you heard of CareCredit?’” McKinnon says. With special financing for six months with monthly payments on purchases of \$200 or more, approved patients often decide to get both pairs because they know they can afford to pay off the purchase in that amount of time. “It doesn't end up hurting their pocketbook.”

The staff also can recommend this option when contact lens patients debate an annual supply purchase. “The year's supply is always more beneficial,” McKinnon says. It helps patients keep on track with compliant replacement, and there is typically a



Sarah McKinnon

*“If a patient is hesitant, the optician might say, ‘Have you heard of CareCredit?’... It doesn't end up hurting their pocketbook.”*

—Sarah McKinnon

high-value rebate available for annual supply purchases. CareCredit can allow a patient to take advantage of a great value price, encouraging patients to replace contact lenses as instructed. The staff has found that patients also opt for this choice when there is medical testing that is not covered by insurance, and McKinnon says another great use could be to pay for vision therapy.

The staff displays signage around the office, prompting patients to *Ask Us About CareCredit*. If patients want to apply, the staff can help them fill out and process applications right in the office over the phone or Internet. “It's not just a credit card for our office,” the staff explains to patients. “There are many other places you can use it.” Patients are happy to find out that their veterinarian, dentist and even the local laser eye center, where Dr. Ginter is a co-owner, accepts CareCredit as payment. **WO**

## Workforce Study Analyzes Trends

Data from the executive summary of the *Eye Care Workforce Study* prepared for the American Optometric Association and the Association of Schools and Colleges of Optometry illustrates the changing demographics in the profession. The study found that in 2012, just more than 40 percent of the nearly 40,000 practicing ODs in the country were women.

The average age among female ODs was 40.2, while the average age among male ODs was 50.9. The percentage of women who were over age 50 was 17.4 percent; in contrast, 56.4 percent of the men were over age 50.

The report, prepared by the Lewin Group,

concluded that the supply of ODs and ophthalmologists is adequate to address the demand for eye care services through 2025. Computer models estimated that the demand for eye care services will increase with the rise in Type 2 diabetes and the inclusion of children's eye care as an essential benefit under the Patient Protection and Affordable Care Act. The report also found that most ODs reported they were able to accommodate an increased demand for patient care. ODs responding to the study reported being able to accommodate an average of 19.8 additional patients per week, without adding office hours to their current schedule. **WO**

# Day Spa Complements Business Model

Dry eye treatment center was first step in the process

**T**he idea of opening a day spa inside Hefner Eye Care and Optical Center in Oklahoma City came to **Kimberly Hefner, OD**, from her aesthetician. After all, she already



Dr. Hefner

had a spa chair and a steamer that she used for dry eye treatments. "It had begun to look like a spa, and my aesthetician said how much more convenient it would be if I just got my eyelash extensions done in my own office," Dr. Hefner recalls.

Now an aesthetician comes into the office two days a week to offer a full line of spa services. And instead of having eyelash extensions every month, Dr. Hefner has switched to Zoria® Boost™ Lash Intensifying Serum from OCuSOFT. She began using it about two months ago, as has most of her staff. Patients notice those long eyelashes, and they see the marketing pieces from OCuSOFT in the practice.

Dr. Hefner says it fits in perfectly with her practice. "A lot of women have sensitivity to mascara. Some struggle with it anyway and others have stopped using makeup, and they're sad about it. Women in their 50s, whose eyelids have started drooping, want longer lashes to make

their eyes look more open. They often start the conversation," she says.

Many tell her that they've tried eyelash extensions but are sensitive to the glue. Or they ask about prescription products to enhance eyelash growth, and Dr. Hefner will mention that Zoria is available without a prescription and can promote eyelash growth within a week or two. It's applied almost like eyeliner, at the base of the upper lashes at bedtime.

In fact, Dr. Hefner doesn't shy away from talking about any makeup or beauty products with her patients. "I bring up makeup with almost every female. Most women who have early appointments will not put on makeup when they're coming to the eye doctor. And others do a terrible job of removing their eye makeup. I can see mascara on their contact lenses, or it's flaking. So I always ask what they

use for makeup remover," she says.

The practice draws patients of all ages with its regular trunk shows and promotions, but the target market for the dry eye center (and the day spa) is women between 40 and 70. "As a dry eye specialty practice, we're serving that market anyway," she says. The spa offers microdermabrasion, facials, eyebrow shaping, eyelash extensions and more.

Dr. Hefner is a clinician at the Oklahoma Medical Research Foundation's Sjogren's

Clinic, where she provides diagnosis, treatment and clinical assistance in the research of Sjogren's. She says that most of her patients are equally interested in having healthy eyes as well as beautiful eyes. She spends time with each patient discussing protection against UV radiation as well as ocular nutrition.

Dr. Hefner says she has no doubt that adding a line of beauty products and making herself open to discussing beauty products with patients is a positive for her business. Fashion has long been a part of the eyewear industry, and it extends quite naturally into eye care, too, especially with the products patients are using on or near their eyes.

Plus, it's convenient. "I love going to the spa." Now she doesn't need to travel for the services. **WO**

## OCuSOFT Enters Market

**Zoria® Boost™ Lash Intensifying Serum** features a patented polypeptide technology to enhance and support the eyelash growth cycle naturally. It is a clinically proven, drug-free formula that is nonirritating and delivers noticeable results without the potential harsh side effects associated with drug-based, lash-enhancement products.

OCuSOFT also offers Zoria® Boost™ mascara with lash-intensifying serum, Zoria® Mascara for Sensitive Eyes, as well as makeup removers.

OCuSOFT also offers its eyelid cleansers, Lid Scrub® Original and Lid Scrub® Plus products. **WO**



Zoria® Boost™ serum



A spa chair and steamer for dry eye treatments soon led to additional spa treatments.

## In Beauty, the Eyes Have It

**T**he NPD Group, a marketing information company, reported that 2013 sales of prestige eye makeup products in the U.S. grew 9 percent over 2012 to \$1.1 billion. Sales in mascara saw a 7 percent jump, as did eye shadow and eye liner. Eyebrow category products rose at 29 percent.

"U.S. consumers are embracing the art of eye makeup with the addition of products that go beyond the usual staples to their beauty tool boxes," says **Karen Grant**, vice president and senior global industry analyst for The NPD Group.

"Definition that lasts is important to today's beauty consumers looking to enhance their eyes with minimal repeat application, and they are willing to pay more to get it," says Grant. "It has long been said that 'our eyes have the ability to make a statement without saying a word'—eye defining makeup just turns up the volume." **WO**

# Voices Voices Voices Voices Voices

## Optometry's Interconnectedness Moves It Forward

By Denise Whittam, OD, New York, N.Y.

Being involved with the New York State Optometric Association, my regional chapter, my alma mater's Alumni Association and the Children's Vision Coalition allows me to see a connection that exists from the legislative processes to the local associations and on the state and national levels. As a result, I can be proactive and help the profession move forward.

Optometry would not have made the advances it has if it didn't have a cohesive group of doctors who volunteered their time with advocacy for the profession. I encourage students and graduates of the State University of New York State College of Optometry to take advantage of all opportunities to network and explore all of the avenues optometry has to offer. These organizations can help you expand your practice and your rights and protect your license for



Dr. Whittam

the future. I feel that you also practice to a higher level when you are with an elite group of colleagues.

As a former English teacher, I feel that my role with the Children's Vision Coalition holds an important purpose and is the focus of my future advocacy plans. In the 1980s, I often saw children mislabeled if they were having difficulty learning. Adding children's comprehensive eye exams as an essential benefit of the Patient Protection and Affordable Care Act is a step in the right direction. But teachers and parents need education, too, on why binocularity and ocular tracking are essential. We need to show parents why eye exams should

start during infancy and continue on through childhood to monitor visual perception and how it can relate to academic performance and social skills. It's up to us as professionals to get the message out there, be the best that we can be and follow the changes in the industry so that we can keep the public informed. [WO](#)

## A 40-year Retrospective: Optometry Then and Now

By Beth Workman, OD, Avon Lake, Ohio

In my 40th year of practice, I find myself reflecting on all the changes that have occurred in optometry since I began practicing. In 1971, when I became a student at The Ohio State University College of Optometry, there were only five women in a student body of 200. Now, more than 50 percent of students are women. Our ability to be excellent clinicians and make valuable contributions to optometry is no longer questioned.

My first 12 years in practice, I worked in the Department of Ophthalmology at the Cleveland Clinic. At the time, there were very few optometrists practicing with ophthalmologists. Now it is well-accepted and widely acknowledged that the two professions can complement each other and create an environment for optimal patient care.

For the next 19 years, I was a partner with a classmate in private practice. Now, for the past eight years, I have worked in several different practice settings with a variety of professionals. I have learned different lessons from each practice and have seen, first-hand, alternative ways to deliver care. Insurance companies and government agencies undoubtedly are playing a more significant role in the type and quality



Dr. Workman

of eye care than ever before. Some of these influences have been good, but many have not. We are now pressured to see more patients in less time and with lower reimbursements. It has become a difficult balancing act to continue to offer quality care and still be financially sound.

Patient care, then and now, remains a priority and yet is also a concern. When I began practice, optometrists could not even prescribe pharmaceutical drugs. We fought hard to get the right to dilate patients. With pressure to see patients more efficiently, dilation may be one diagnostic step that is sacrificed. Technological advances now allow us to see more and to see it earlier. Though imaging and diagnostic technology are valuable assets, they are not intended to replace dilation, but to complement it.

Efficiency has also dictated that we now delegate more of the data-collecting to our staff. Communication with our patients is, however, still vital to the diagnosis and treatment of our patients. Listening to our patients and taking the time to educate them only serves to increase their compliance and establish a rapport that will ultimately build our practices.

Optometry is both an art and a science. Don't lose touch with the art by relying too heavily on the science. [WO](#)

## What's on Your Mind?

**The Voices page in Women In Optometry is offered as a space where women ODs can discuss a topic of interest to them. It can be about your practice, your career choices, an eye care-related cause or challenges you've faced. If you're interested in having your voice heard, please email [mbijlefeld@jobson.com](mailto:mbijlefeld@jobson.com).**



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