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NOVEMBER 2018

WO

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NOVEMBER 2018
WOMEN IN OPTOMETRY®
DEDICATED TO THE INTERESTS OF WOMEN ODs

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Honoring EXCELLENCE

2018 Theia Award winners recognized for their contributions and influence

THEIA AWARDS of Excellence

The annual Theia Awards of Excellence are a highlight of the year at *Women In Optometry* (*WO*). While ultimately a handful of ODs are selected, the *WO* professional advisory panel and editors spend some anxious time deliberating—as well more than 100 nominations came in, many of them with personal and heartfelt testimonials about the impact that an OD makes in her community. Here are the 2018 winners.

THE *Editorial* Pages

Marjolijn Bijlefeld, Managing Editor

LEADERSHIP

Glenda B. Secor, OD, FAAO
Huntington Beach, California

What a nominator said: "She is one of the truly outstanding colleagues whom I have admired over the years because of her unique leadership skills and her willingness to give of her many talents to help move the profession forward."

INNOVATION

Debby Feinberg, OD, FAAO
Bloomfield Hills, Michigan

What a nominator said: "In her persistence and passion, she has brought to life the new optometric specialty of neurovisual medicine so that the millions of people suffering from any form of subtle vision misalignment can receive the life-changing care they need."

INNOVATION

Whitney Hargrove Hauser, OD
Memphis, Tennessee

What a nominator said: "Her passion for treating patients is palpable...She has become a respected teacher and mentor, recognized for her efforts at spreading the gospel of dry eye disease awareness and motivating people to recognize and appropriately treat this disease."

MENTORING

Pamela A. Lowe, OD, FAAO
Chicago, Illinois

What a nominator said: "She has mentored many young and more seasoned practitioners on medical model eye care before it was more commonplace. She has been very valuable in supporting legislative issues in optometry, lecturing around the country, and she balances it all with kindness and grace."

MENTORING

Laurie Sorrenson, OD, FAAO
Austin, Texas

What a nominator said: "With humor and a passion for business success, she lectures and consults on staff management, practice efficiencies, keratoconus and contact lenses."

EDUCATION

Jenny Coyle, OD, MS, FAAO
Dean, Pacific University College of Optometry

What a nominator said: "She's a wonderful colleague with unique education and leadership skills and a willingness to give of her many talents to help advance her students, the college and the profession."

YOUNG OD

Rachael A. Wruble, OD, FAAO
Charlotte, North Carolina

What a nominator said: "Locally, we joke that Dr. Wruble is a part of everything and we wonder when she sleeps. Her many roles have given her knowledge to help optometrists dream big and shoot for goals in their future." WO

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The BEST REWARDS

Women In Optometry *asked advisory panel members about the best rewards they've given or received.*

WOMEN IN OPTOMETRY®
Advisory Panel

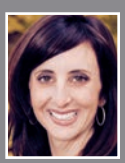
Melissa Barnett, OD, FAAO, FSLS, FBCLA
Sacramento, California

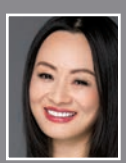
Nhung Brandenburg, OD, FAAO, Dipl.
Atlanta, Georgia

Mario Gutierrez, OD, FAAO
San Antonio, Texas

Tonyatta Hairston, OD
Jackson, Mississippi

Barbara Horn, OD
Myrtle Beach, South Carolina

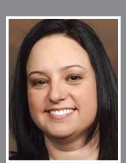

Dawn Kaplan, OD
Chicago, Illinois


Bridgitte Shen Lee, OD
Houston, Texas

Mary Anne Murphy, OD
Broomfield, Colorado

Kelly Nichols, OD, MPH, PhD, FAAO
Birmingham, Alabama

Carey Patrick, OD
Allen, Texas


Maria Sampalis, OD
Warwick, Rhode Island

Melissa Zaleski, OD, MPH
Tampa, Florida

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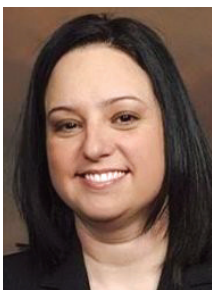
Dr. Lee

● **Bridgitte Shen Lee, OD**, appreciates the honors that her colleagues, the business community and the patient community have shown her. She's one of eight U.S.-based practitioners who was selected to be a TFOS DEWS II Global Ambassador, and she recently received the honor of being named one of the "50 Houston Most Influential Women."


Dr. Sampalis

● For **Maria Sampalis, OD**, knowing that she helped a colleague is a buzz. "When I get a call/text or message saying that something I did or wrote has helped, it's the best recognition I can get. Knowing that something I did has helped others is the best feeling!"

Dr. Nichols

● **Kelly Nichols, OD, MPH, PhD, FAAO**, says that a personal touch makes all the difference. "In today's electronic world, a handwritten thank-you note is always appreciated. Also, remembering the small things a person likes is thoughtful (e.g., hot chocolate vs. coffee, dark chocolate or a mystery book). I handwrite birthday cards to all faculty, staff and students. I often get thank-you notes for the cards from the students—some of whom likely do not often receive a real card."

Dr. Horn

● **Barbara Horn, OD**, says the best recognition that she has ever received was hearing one employee tell another employee that "because of me, she strives to be a better person (and employee/friend/mother). I expect a lot out of people—to always do their best—but I never get angry. Rather, I try to help them in the way *they* need the help. Any way that it's done = encouraging."

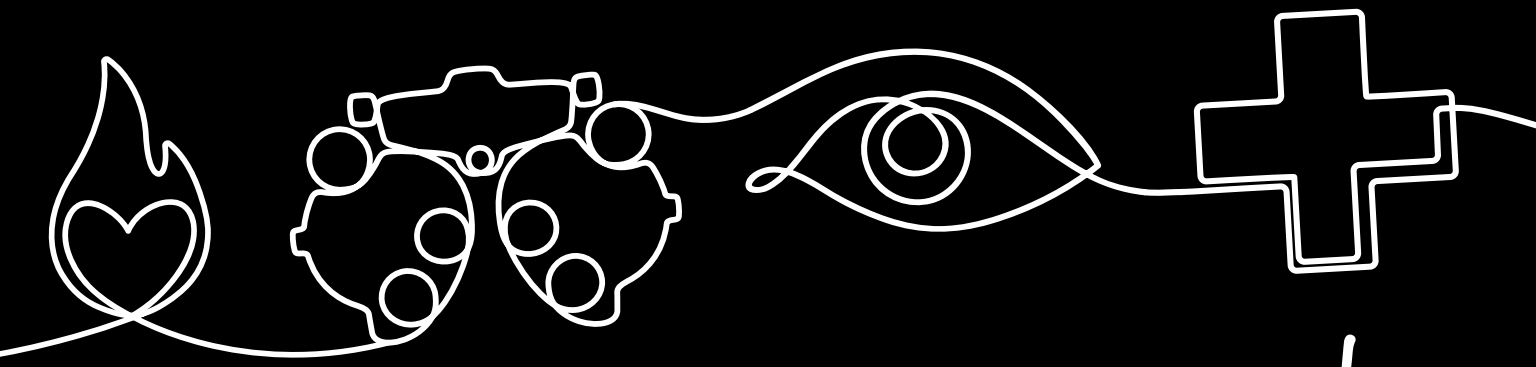
Dr. Barnett

● **Melissa Barnett, OD, FAAO, FSLS, FBCLA**, says that the professional recognitions that she has received have motivated her to be an advocate for the profession, continue to learn and teach and inspire others to incorporate new methods to improve the lives of their patients and their practices. Receiving acknowledgment is terrific, but she also likes to give appreciation. "Thanking my staff daily helps motivate them to be their best selves, which in turn helps patients and the practice. Recognition improves employee satisfaction and enjoyment of work, improves productivity when the positive behavior is reinforced and creates loyalty in the practice. Recognition improves employee retention, reducing turnover. Thanking my staff creates a positive team environment and makes work more enjoyable."

Dr. Murphy

● **Mary Anne Murphy, OD**, also finds that the very best way to be recognized is a simple, handwritten thank you delivered face-to-face. "Staff members seem to prefer a thank-you note with a gift card for something personal; if I know they like candy, I will pick up a specific candy bar or sweet treat. If I know they are hosting family for the holidays, I will get a gift card for a grocery store. If I know they have a pet, a pet store gift card is always appreciated," she says.

The practice name abbreviated is FREA, so Dr. Murphy offers "FREA"- glee. "Anyone can submit a compliment for another employee, and those are read aloud at a staff meeting and put into a drawing for one $10 coffee gift card. Mostly, they are very positive, but sometimes, they are funny. ('Thanks for wearing those green socks on St. Patty's Day. They really got me in the mood!')" | WO |



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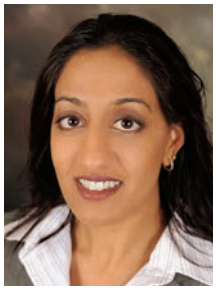
What Do the People Who Know CONTACT LENSES CHOOSE to WEAR?



Dr. Shah

In Santa Monica, California, many of the patients who come to Elander Eye Care are very interested in preventive medicine. They want to know what they should be doing to protect their vision and eye health. That's often when **Arti S. Shah, OD, FAAO**, tells them that she and most of the other eye care professionals she knows choose silicone hydrogel one-day contact lenses for themselves and their families. For all the reasons that this modality appeals to eye care providers—comfort, convenience, crisp vision and a high-Dk—it should appeal to patients just as much. "If it's something that we as professionals appreciate or value, it means we have higher regard for that modality," she says.

> "My patients come back for a follow-up with the most positive feedback."

She has made ACUVUE® OASYS Brand Contact Lenses 1-Day with HydraLuxe™ Technology one of her go-to lenses for a variety of patient-centered and practice management reasons. "Patients love the comfort of ACUVUE OASYS Brand 1-Day with HydraLuxe Technology. The lens has a silky, soft feel, and patients experience sharp, crisp vision. Those are important aspects to patients, and for me, I know that they're wearing a healthy, high-Dk lens," she says.

There's a great deal to love about this lens, she says. It has a large optic zone, which helps cover larger pupils in low-light situations, and the comfort is fantastic, she says. "It has a high Dk/t without the thick feel that some lenses have. HydraLuxe Technology is an enhanced network of tear-like molecules that mimic mucins and provide a smooth tear-like refractive surface that integrates with the patients' tear film," she says. In addition, ACUVUE® is an internationally trusted name that is known for comfort in a one-day modality. "The majority of my patients come back for a follow-up with the most positive feedback, saying the lenses feel extremely comfortable and that they don't feel the urgency to remove their lenses at the end of the day. Patients routinely tell me, 'Thank you for getting me back into contacts; you've changed my life.'"

These factors have led this to become one of her favorite lenses. "I fit the one-day sphere and the one-day toric on a daily basis," she says. Indeed, she loves that the ACUVUE® OASYS Brand Contact Lenses 1-Day are available in the toric design because it allows her to prescribe the most customized fit for patients who need just one toric lens or need to move from spherical to toric. They are able to maintain the comfort and wearing schedule they have come to love.

She says that about 90 percent of her contact lens patients wear one-day lenses, a huge shift from when she started in the practice 10 years ago and only 7 percent wore single-use contact lenses. For new contact lens wearers, it's an ideal option because of health, hygiene and convenience. "Women who wear makeup love the idea that they can throw away their lenses if they get some mascara or concealer on the surface," she says. Parents of younger patients appreciate the value in an annual supply: if the child rips or loses a contact lens, it's the most modest inconvenience to replace it.

Because silicone hydrogel one-day lenses are so often the preferred modality of eye care professionals, Dr. Shah feels that it should be the first option presented to contact lens candidates. Some doctors may choose to hold back on that recommendation because they presume that the patient might not be willing to pay for a premium lens. In her experience, she's found that the value outweighs the cost differential. She says the value of the one-day option increases when patients realize the benefits they can gain for so little more. "They're not looking at a significant difference for a lens that many people find so comfortable." | WO |

ACUVUE® Brand Contact Lenses are indicated for vision correction. As with any contact lens, eye problems, including corneal ulcers, can develop. Some wearers may experience mild irritation, itching or discomfort. Lenses should not be prescribed if patients have an eye infection, or experience eye discomfort, excessive tearing, vision changes, redness or other eye problems. Consult the package insert for complete information. Complete information is also available by visiting jnjvisionpro.com, or by calling 1-800-843-2020.

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START WITH THE OCULAR SURFACE

Melissa Barnett, OD, FAAO, FSLS, FBCLA, is passionate about the importance of eyelid hygiene and how ocular surface disease and dry eyes can impact vision and the quality of life. "We are all on digital devices and are not blinking enough, which causes our eyes to become more dry," says Dr. Barnett, principal optometrist at the University of California, Davis, Eye Center. Contact lens wear, similar to dry eye, is intrinsically inflammatory and may lead to dryness. Additionally, meibomian gland dysfunction (MGD) is highly prevalent and is often not diagnosed or treated. Patients with diabetes, diets low in omega fatty acids, autoimmune disease or those experiencing hormonal changes may also be affected with symptoms of dry, irritable eyes.

Dr. Barnett

Ask patients questions about blurry vision and how contact lenses feel at the middle and end of the day. Sometimes treatment of the eyelids, lashes and ocular surface can help eliminate fluctuating vision, so it's important to address the problem at its root. "I treat the ocular surface, including the eyelids and lashes, and attempt to get it in pristine condition to prepare for the sharpest vision with eyeglasses and an optimal contact lens-wearing experience," Dr. Barnett says.

She recommends a care and treatment plan, often including the OCuSOFT® Lid Scrub Original foam. "There are many products from OCuSOFT that have helped my patients with dry eye, ocular surface disease and Sjögren's syndrome," she says. "These products have improved the symptoms of burning or dryness and have helped keep contact lens wearers more comfortable and able to stay in their contact lenses."

HELP PREVENT TEAR EVAPORATION

Bridgitte Shen Lee, OD, of Houston, Texas, believes that the first step in dry eye treatment are healthy lids and clean lashes. "Dry eye and blepharitis are big growth areas," she says. "There is not a 'one thing or one treatment' that takes care of the dry eye. You have to look at the whole picture."

Dr. Lee

For patients with evaporative dry eye (EDE) symptoms, OCuSOFT's Retaine® MGD tear supplement works well. "Patients with MGD and EDE do well with the tear supplement because Retaine MGD has a positive charge, and the patient's dry eye surface is negatively charged. When neutralized, it forms an effective barrier against tear evaporation," she explains. "We encourage all of our contact lens patients, especially the ones who show signs of MGD, to use Retaine MGD." Dr. Shen Lee's practice, Vision Optique, performs meibography on all patients over age 18 and many younger contact lens patients who have dry eye symptoms. By taking the time to educate patients on what they can do to prevent symptoms or complications and protect their eyes for a lifetime, she and her practice partner have built high patient loyalty.

OFFER BEAUTY PRODUCTS THAT PATIENTS WANT

Stephanie Frankel, OD, works at Hollywood Eye Institute, an ophthalmology group in Fort Lauderdale, Florida, that specializes in beauty procedures, from blepharoplasty to Botox and more. "People want to maintain their youthful appearance," she says, so it's not a surprise that patients are interested in these services—both women and men. "Women start the conversation with me. But I initiate the conversation with men. I'll say something like, 'Have you recognized that your eyelids are beginning to droop?' Or, 'Do the bags/dark circles under your eyes bother you? These are things that we repair for patients like you all the time.' They're often very receptive."

Dr. Frankel

Dr. Frankel often turns to the OCuSOFT products that the practice carries to help resolve a series of cosmetic issues, from redness and irritation that is a factor with dry eye disease for some patients to under-eye cream, makeup removers and ZORIA® Lash Boosting Serum or mascara products to stimulate lash growth. Many of the products available, such as the serum and ZORIA® under eye cream, are used before bed, so patients are less self-conscious about using them, she says. WO

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Leverage Your EXPERIENCES, SKILLS and TECHNOLOGY to MAXIMIZE GROWTH

After Tessa Sokol, OD, graduated from Illinois College of Optometry, she joined a private practice in Georgia. "I obtained a lot of business and clinical experience" in that setting, she says. But several years later, she returned to her native state, Wisconsin, where she was approached to take on a LensCrafters lease in Madison. That was eight years ago.

Dr. Sokol

> "I'm not passive about growth."

The switch from a private practice to a corporate-affiliated one made sense to her. "It's a sublease model, the company's values aligned with mine in terms of patient care, and I knew that I could manage it as my own location," she says. A previous doctor had been there for 20 years, although it was not his primary location. So she was taking on an established location, but she had the opportunity to put her own touches on Sokol Advanced EyeCare.

For example, she saw the demand to bring more medical eye care services in. "I have an Optos Daytona, and that has a huge wow factor with patients. That was my first acquisition," she says. She soon added a Cirrus OCT unit so that she is able to make medical decisions about retinal lesions, macular degeneration, glaucoma and optic nerve assessments more confidently.

GREATER CONVENIENCE

She has the patient base to support these investments. While there's a large healthy population that keeps the refractive business humming, she's also seeing a lot of patients who are coming to her outside of their HMO network. "Even though the HMO has medical and ophthalmology clinics, because I have the OCT and Optos, I can care for these patients at the same level—without the wait time."

Seeing that patients will go where it's convenient reinforces her decisions to invest in the practice. She's now planning on adding an anterior segment camera and will be offering amniotic membrane tissue transplants and scleral lenses for an even wider range of services.

It's important to keep things fresh and new, she says. So two-and-a-half years ago, when a restaurant in the mall absorbed her space, the practice and store moved. While the new layout mirrored the old—with two exam lanes, two pretesting rooms and a special advanced testing room—"the look is very modern. The LensCrafters store has a modern, open look with an outdoor entrance, welcoming windows and bright colors."

MASTER OD PROGRAM

Dr. Sokol's success is replicable, she says. In fact, she's part of the Master OD program, called Connect to Grow, where ODs who have had proven success in some area of practice now collaborate and share their information and strategies to help others grow their businesses, as well. "The areas I'm presenting are on patient acquisition, advertising and community outreach," she says. The group has presented its first teleconferences to pilot audiences, and Dr. Sokol is excited to not only speak at some of these but also learn from others who are successful in areas where she is trying to grow.

"I'm not passive about growth. I'm keenly aware of the fact that I'm piggybacking off of the multi-million dollar advertising budget that LensCrafters has. It's not enough to wait passively for those patients to walk in here. I know the opportunity is there, so I'm going to figure out how to attract them and do it right."

PATIENT EDUCATION

That means educating patients—something she's been doing all her years in practice. As chair of the communications committee for the Wisconsin Optometric Association—and the association's treasurer this year—she has been interviewed for several news segments. The topics range from toy safety, children's vision, the solar eclipse and more.

Being involved in the state organization was ingrained already as a student in optometry school. "There's a lot of work that goes into advocacy for the profession. Optometrists need to do it," she says. So she was eager to jump in. If the traditional executive committee cycles go as planned, Dr. Sokol will be the association's president in three years. "Association presidents do not have to be in the traditional private practice model. The fact that I have a corporate affiliation isn't a factor at all." It simply enriches her perspective. WO

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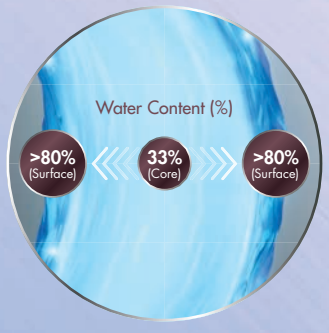

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References: 1. Angelini TE, Nixon RM, Dunn AC, et al. Viscoelasticity and mesh-size at the surface of hydrogels characterized with microrheology. *Invest Ophthalmol Vis Sci.* 2013;54:E-abstract 500. **2.** Pitt WG, Jack DR, Zhao Y, et al. Transport of phospholipid in silicone hydrogel contact lenses. *J Biomater Sci Polym Ed.* 2012;23(1-4):527-541. **3.** Greiner JV, Glonek T, Korb DR, et al. Phospholipids in meibomian gland secretion. *Ophthalmic Res.* 1996;28(1):44-49. **4.** Shine WE, McCulley JP. Polar lipids in human meibomian gland secretions. *Curr Eyes.* 2003;26(2):89-94. **5.** Michaud L, Forcier P. Comparing two different daily disposable lenses for improving discomfort related to contact lens wear. *Cont Lens Anterior Eye.* 2016;39(3):203-209.

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Dr. Asano

Dr. Asano says her Marco TRS-5100 system was a great investment when she opened.

> "[Patients] say, 'I can't believe you're not going to ask me about one and two.'"

When **Kaori Asano, OD**, opened her practice cold nearly three years ago, she got some very important advice from her consultants. "You can buy used equipment for just about everything, but not your automated refraction system," they told her. Just a little west of downtown Chicago, in the city's former meat-packing district, her office is across the street from Google's Midwestern headquarters. The neighborhood is transitioning into a tech and corporate hub, with McDonald's global headquarters, Dyson, GE Medical and others nearby.

"These are people who want to be wowed. There are also lots of millennials in the area, and they want things yesterday," she says. She knew Eyes on Fulton would not survive there if she underwhelmed her patients with a manual refraction, she says.

So she started with the instrumentation and equipment that she needed. That included the high-tech Marco TRS-5100 and an edger so that the office could finish some jobs quickly. "It motivates people to buy from us when they know that they can have the finished eyewear soon," she says.

WOW ALL PATIENTS

She has other high-tech instrumentation for testing, but she loves having the Marco system because all patients interact with it. "So many patients comment about how high-tech it is. They say, 'I can't believe you're not going to ask me about one and two.' Once patients don't have to make that decision about which is clearer, they really enjoy the experience of the exam."

Patients also feel assured about the results. "They're confident that they didn't make a mistake in answering. The toggle switch that allows me to show patients their current refractive correction and the new one helps with that, too," she says. "I so often hear them say, 'Oh, that's such a big difference,'" even if she might not have presented it that way based on the refractive change.

IMPROVED PATIENT FLOW

Using the Marco technology also helps streamline the patient flow. It's set up in her one exam lane, and she does the refractions herself. "It's so fast and simple, and I can begin the discussion with patients about their eye health," she says.

She also finds that her time with patients is spent in more comprehensive and uninterrupted conversation. "Before, when I was doing manual refractions, I would have to stop to write notes," she says. The process didn't lend itself well to having a conversation with patients. But now, "nothing is lost in the translation. I don't have to stop to transcribe, and there is no wasted time. As the refraction process is going on, I can update other notes quickly if I need to."

MAXIMIZE EFFICIENCY

With only one exam lane equipped right now, it's important that she's efficient. She needs to make good use of the time that she spends with the patient, so starting off with a fast and accurate refraction helps. Then she can spend the time talking about multiple pairs of eyewear, upgraded lens options, contact lenses and more before turning the patient over to her optician.

As growth continues, Dr. Asano will be able to expand into a second lane. She also knows that if she needs to hand the refraction process over to a pretester so that she can see more patients, she would feel confident with that choice because of the Marco technology that she has. | WO |

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When Your CAREER Becomes Your CALLING

One OD is making a name for herself by influencing optometrists to do more to prevent AMD-related vision loss

Dr. Lee

Amanda Lee, OD, has achieved an array of career goals in the years since she graduated from Pennsylvania College of Optometry in the 1990s. But despite—or due to—the diversity of her accomplishments, Dr. Lee's professional trajectory has been strikingly direct. Here, she talks to *Women In Optometry* about how defining her "why" helped her steer her choices, leading her to her current "dream job."

WHY DID YOU CHOOSE OPTOMETRY?

I wanted to become an optometrist so that I could help people by optimizing, preserving and protecting their vision. That is the one core principle that has guided me every day.

WHAT POSITIONS HAVE YOU HELD SINCE GRADUATING FROM OPTOMETRY SCHOOL?

I've been a practicing clinician for more than 20 years and a Vision Source administrator for more than 10 years. During that time, I've co-owned two practices and have served as a consultant and speaker for several eye care companies. As of a few months ago, I became the director of professional relations at MacuLogix, serving as a clinical partner to our customers, eye care professionals and industry partners.

HOW HAS SPEAKING AND CONSULTING HELPED YOU DEVELOP PROFESSIONALLY?

Since I traveled out of our office quite a bit, I was exposed to more eye care offices than is typical. This opened my eyes to new technologies and standards of care that I was able to take back to my own practice. It also exposed me to some true optometric thought leaders who were pushing our industry to do more and be better—and inspired me to step up! I always felt that as a speaker and consultant, I learned more from my audience than I imparted.

NAME THE BIGGEST DISCOVERY YOU MADE AS A RESULT OF BEING AT THE FOREFRONT OF OPTOMETRIC EDUCATION.

I learned that eye care professionals of every kind are missing age-related macular degeneration (AMD) in at least one-out-of-four patients; and three-out-of-four AMD patients are self-diagnosing only after one of their eyes has an acute decline in vision.[1,2] At that point, it's most often too late, and damage to the retina is not repairable. That means that there are a few hundred patients walking out of our practice each year without either of us (patients or the doctors) knowing if they have early stages of AMD that we could be treating today.

WAS THERE ANYTHING YOU COULD DO IN YOUR PRACTICE TO IMPROVE THESE AMD STATISTICS?

We weren't sure at first, but I was definitely committed to trying. That's why, in 2017, my business partner and I starting using the AdaptDx dark adaptometer in our clinic. The AdaptDx promised to help us find patients with subclinical AMD up to three years before we can see it in the retina.

HAS THE TECHNOLOGY WORKED AS WELL AS YOU HOPED?

Better. I was suddenly detecting a lot of new cases of AMD. With the first few patients, I was worried they wouldn't like hearing the news of an early AMD diagnosis. But the patients proved me wrong. While surprised, they were thankful that we had the technology to diagnose the disease and the knowledge to help them understand it. Some were even relieved as they could finally make sense of why they were having so much difficulty seeing at night. Overall, things were going very well for our patients and for our practice once we integrated dark adaptometry.

IF THINGS WERE GOING SO WELL, WHY WOULD YOU CHOOSE TO LEAVE PRIVATE PRACTICE FOR A CORPORATE ROLE?

Helping people by preserving and protecting their vision was my "why," but I still wavered a bit with my "how." I was making a big difference in the few thousand patients I was seeing per year in my own practice, but I wanted to do more. I know in my heart that optometrists have the ability to change outcomes in AMD. They already have the knowledge and the technology; they just need to be shown how to put those into practice. This was the same way that we were shown—by our colleagues. By taking this position in industry, I could be an agent of change and make a real dent in outcomes nationwide, rather than exclusively in our own backyard.

IT SOUNDS LIKE YOU FOUND YOUR LIFE'S CALLING.

I don't know if it's a calling or a crusade; in either case, I want to leave people better off than I found them—especially now since AMD is becoming more prevalent with our aging population. AMD (9.2M) is more prevalent than diabetic retinopathy (4.9M) and glaucoma (2.7M) combined[3], and that AMD number will double in the next 20 years. The more we understand how tools like the AdaptDx can offer early diagnosis, the less our patients will needlessly lose their sight. It's so simple, but this can make such a tremendous impact for so many millions of people. And for me personally, this is a fantastic reason to get up in the morning! I wish I could shout it from the rooftop to all my optometry colleagues: please, join me in my mission to eliminate avoidable blindness caused by AMD. | WO |

You can reach Dr. Lee at alee@maculogix.com.

[1] Neely D, Bray K, Huisingh C, Clark M, et al. Prevalence of undiagnosed age-related macular degeneration in primary eye care. *JAMA Ophthalmol*. 2017;135(6):570-5.

[2] Olsen TW, Feng X, Kasper TJ, Rath PP, Steuer, ER. Fluorescein angiographic lesion type frequency in neovascular Age-Related macular degeneration. *Ophthalmology.* 2004; 111(2), 250–255. doi.org/10.1016/j.ophtha.2003.05.030. Accessed May 23, 2018.

[3] American Academy of Ophthalmology. Eye Health Statistics. https://www.aao.org/newsroom/eye-health-statistics. Accessed February 5, 2018.

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VISION IN PRACTICE

Bring on the COLORS

OD finds that promoting color contact lenses increases the options, draw to patients

Mollie Veteto, OD, a 2014 Southern College of Optometry graduate, understands the appeal of color contact lenses. After all, Alcon data has found that an estimated 40 million people are extremely or somewhat interested in color contact lenses.[1] So she was delighted when Alcon introduced AIR OPTIX® COLORS contact lenses. With the same great color design as FreshLook® ColorBlends®, these lenses provide more of what she wants for her patients, namely a color lens with high oxygen transmissibility* and an easy-to-remember monthly replacement schedule. Dr. Veteto works in the Memphis, Tennessee, office of Nashville Regional Eye Care P.C., an independent medical practice affiliated with multiple America's Best Contacts & Eyeglasses stores in Tennessee.

Dr. Veteto

> "It's a great lens, and you're not missing out on any of the great colors."

"A monthly replacement lens option is easier to remember than a two-week option," she says, noting that patients will be more compliant with the replacement schedule as a result. Plus, AIR OPTIX COLORS contact lenses have a high oxygen transmissibility, have the color pattern encapsulated in the lenses and are comfortable and affordable.

"So many of our patients here are currently wearing FreshLook® lenses or have worn them in the past, so it's an easy transition," says Dr. Veteto. She provides these patients with a trial pair of AIR OPTIX® brand contact lenses so they can feel the comfort of a silicone hydrogel, high-Dk lens. "When I go through the comparison, there's really no downside," she says. "It's a monthly replacement lens, and it's comfortable. It's a great lens, and you're not missing out on any of the great colors," she tells patients.

In fact, earlier this year, Alcon introduced three new Gemstone colors to the collection, allowing patients the opportunity to explore 12 color options. Dr. Veteto says that a number of patients have told her how particularly delighted they are to see the return of the Amethyst color.

Because there's no refit required to add AIR OPTIX COLORS lenses to an AIR OPTIX® AQUA prescription, Dr. Veteto fits patients who express any interest in color contact lenses with AIR OPTIX AQUA lenses. "I provide a trial of the clear lens so that patients can experience the vision and comfort. Then patients can also try on the demo AIR OPTIX COLORS plano lenses," she says.

There are promotional materials, including dispensing mats, which display the available colors. Technicians work with patients to identify their two favorite options so that patients can try on one of each. "We want patients to have fun and play with color, but we also want to help them narrow it down," she says. Patients who visit the AIR OPTIX COLORS Color Studio online may already have determined which color(s) they're most eager to try.

When patients are playing with color in the dispensing area, it adds an element of fun to the office. "Our dispensing area is in the middle of the office, so other people walk by and see or hear how much the patient is enjoying the experience. It makes them want to try on color contact lenses, too," she says. "It has even encouraged patients who hadn't considered contact lenses before, even those who need no correction, to try them."

Because Alcon's rebate** on an annual supply of contact lenses allows for a mix-and-match of AIR OPTIX AQUA and AIR OPTIX COLORS contact lenses, it allows patients to get a variety at a great value. | WO |

*Dk/t = 138 @ -3.00D. Other factors may impact eye health.

**Savings via mail-in (or online) rebate in the form of an Alcon VISA® pre-paid card. Valid on an annual supply purchase (four 6-ct boxes) of AIR OPTIX® brand lenses from your eye care professional or participating retailer between 5/1/18 and 12/31/18. An eye exam or lens fitting is required and must occur within 90 days prior to your contact lens purchase. Rebate claim must be submitted within sixty (60) days of your purchase. Additional Restrictions apply. Visit AIROPTIXCHOICE.com for full Terms and Conditions. Questions? Call 1-855-344-6871.

Reference:

[1] Based on a survey of 270 eye care professionals; Alcon data on file, 2016.

Important information for AIR OPTIX® AQUA (lotrafilcon B) contact lenses: For daily wear or extended wear up to 6 nights for near/farsightedness and/or presbyopia. Risk of serious eye problems (i.e., corneal ulcer) is greater for extended wear. In rare cases, loss of vision may result. Side effects like discomfort, mild burning or stinging may occur.

Important information for AIR OPTIX® COLORS (lotrafilcon B) contact lenses: For daily wear only for near/farsightedness. Contact lenses, even if worn for cosmetic reasons, are prescription medical devices that must only be worn under the prescription, direction, and supervision of an eye care professional. Serious eye health problems may occur as a result of sharing contact lenses. Although rare, serious eye problems can develop while wearing contact lenses. Side effects like discomfort, mild burning, or stinging may occur. To help avoid these problems, patients must follow the wear and replacement schedule and the lens care instructions provided by their eye doctor.

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

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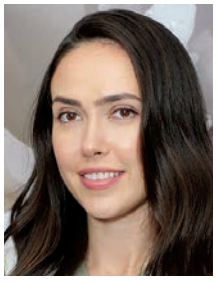

Dr. Lazar

> "I wanted a system that was reliable, fast and accurate."

When **Inna Lazar, OD**, opened her optometric practice, Greenwich Eye Care, in Greenwich, Connecticut, in March 2017, she knew from the start that she wanted to add the Phoroptor® VRx Digital Refraction System by Reichert Technologies.

Dr. Lazar's practice is in a spot next to an optical, so she does not sell eyeglasses herself. "My focus is entirely on contact lenses, orthokeratology and medical services," she says. But obtaining a fast and accurate refraction is still a critical element.

She had experience with Reichert Technologies from other practices where she had worked. "I wanted a system that was reliable, fast and accurate," she says. That, and the company's reputation for excellent service, helped her make her choice.

The results have been great, she says. "The most common feedback I get is the patients' wow-factor reaction. They love how modern the technology is, and even though they may not understand how it works, they enjoy the experience," she says. "I'd say 90 percent of my new patients are unfamiliar with an automated phoropter, so it's a huge differentiator from my competition."

The accuracy is terrific, she says. "It makes my life much easier that patients get a great refraction with such good results." The speed is also important as Dr. Lazar has no technicians doing pretesting. "I prefer to conduct all the testing myself. All the equipment is in my one lane, and I like being a part of the discussion from the very beginning."

She finds that she and the patients develop a trust in each other and the process during that time. "It's a very relaxed, personalized experience," she says. That time with the patient has to be good quality time. It wouldn't be valuable if she were spending the time entering data into the computer or taking notes. "I finish the automated refractor and all of that data goes into the Phoroptor VRx with a push of a button," she says.

Despite the fact that she doesn't sell eyewear herself, she does want patients to know that new eyeglasses can help them. "Using the Phoroptor VRx, I can quickly show the patient how the old refraction compares to the new one. Once the patients compare the two side by side, it makes sense why new eyewear would be a good idea."

ODs who do have optical dispensaries often say that the additional sales from that feature help the return on investment. Dr. Lazar says even without that, she has no doubt the purchase was a smart one.

Finally, Dr. Lazar says that the company's customer support has been terrific. "Any time that I have a problem or if I'm worried that I've pushed the wrong button, I call customer support and that representative will have me FaceTime. We work through it together," she says. That means there's no downtime as she's waiting for a technician. "It's such a great level of customer support." | WO |

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DEMO THE TECHNOLOGY IN YOUR OWN SPACE

Reichert Technologies has introduced its Phoroptor® VRx Virtual Live Demo Experience. The Virtual Live Demo allows a Reichert specialist to conduct a Phoroptor VRx Digital Refraction System demonstration via a live, one-on-one video conferencing feed.

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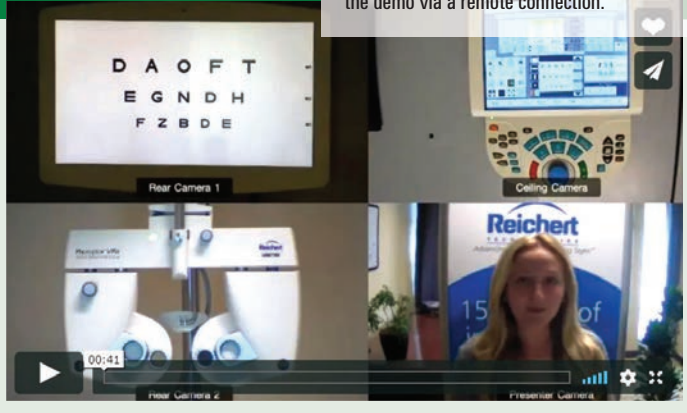

A Reichert Technologies specialist conducts the demo via a remote connection.

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For New Wearers Who Aren't Ready to Go All the Way to **One-Day Lenses**, Take Them **HALFWAY** to **ONE DAY**

Dr. Barnett

> "I want to offer the option of new daily replacement contact lens technology."

Whenever **Melissa Barnett, OD, FAAO, FSLS, FBCLA**, sees a contact lens candidate at the University of California, Davis Eye Center in Sacramento, California, where she's the principal optometrist, her first recommendation is for a daily replacement contact lens. She's a strong advocate for one-day lens wear for every patient if possible, but if patients are unwilling or unable to purchase those, a two-week replacement option provides them with an affordable option that brings them closer to daily replacement in the future.

"I encourage patients to start with daily replacement contact lenses, but if they say that they can't afford them or don't like what they consider the waste of one-day lenses, then a two-week modality is a good option. ACUVUE® OASYS with HYDRACLEAR® PLUS Contact Lenses are so comfortable," she says.

Dr. Barnett first talks about the benefits of daily replacement contact lenses, emphasizing the convenience and comfort of wearing fresh contact lenses each day. "Even with existing contact lens wearers, if patients tell me that they are very happy with their current contact lenses, I want to offer the option of new daily replacement contact lens technology. Perhaps when patients come in the following year, they will feel more comfortable with this option."

She can offer to ease patients into the one-day lens option by suggesting that they can make their two-week lenses their habitual lenses but also purchase some one-day lenses for days when they're camping or doing sports. That kind of an introduction allows a patient to experience the benefits and convenience of one-day lenses without feeling as though that's the only option. "Often, these patients are ready to make the move to one-day lenses the following year, after they've experienced the advantages firsthand," she says.

It's important to plant the seed that one-day lenses are her preferred option but that two-week replacement lenses are an excellent and comfortable alternative. Patients who become accustomed to replacing their contact lenses every two weeks may be more likely to become one-day lens wearers sooner than monthly lens wearers might.

"Many patients feel very comfortable with a two-week contact lens option if they're not interested or unable to get a one-day lens prescription," Dr. Barnett says. ACUVUE® OASYS is a unique brand because of its comfort. The HYDRACLEAR® PLUS technology helps to stabilize the tear film, minimizing contact lens-related dryness and maintaining moisture, which also make them a great option for those who spend so much time on their digital devices[1]. "Having multiple modalities to present is important," she says. She doesn't want to push so hard on one-day contact lenses that patients are tempted to go to another source to get the contact lenses that they want. She would rather that they understand that her strongest recommendation is for one-day contact lenses but that she has excellent options for two-week contact lens wear, too.

If new contact lens wearers aren't going to start out with daily replacement lenses, she'd rather get them halfway to one day with the more frequent replacement of a two-week lens modality. | WO |

[1] JJV Data on file. LACREON, HYDRACLEAR Plus, HYDRACLEAR 1 acting as pseudo-mucin layer.

ACUVUE® Brand Contact Lenses are indicated for vision correction. As with any contact lens, eye problems, including corneal ulcers, can develop. Some wearers may experience mild irritation, itching or discomfort. Lenses should not be prescribed if patients have any eye infection, or experience eye discomfort, excessive tearing, vision changes, redness or other eye problems. Consult the package insert for complete information. Complete information is also available by visiting jnjvisionpro.com, or by calling Johnson & Johnson Vision Care, Inc. at 1-800-843-2020.

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DOCUMENT THE RECOMMENDATION

Dr. Melissa Barnett makes sure that she documents in the patient's chart that she made the recommendation for one-day contact lenses and notes the patient's reaction. That way, she has a starting point for the conversation the following year or if the patient returns with any complaints or questions about the current contact lenses. | WO |

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OD Who Received So Little Encouragement as a Child Now DISPENSES It GENEROUSLY

Dr. Fowler, surrounded by family

Dr. Fowler

For much of her youth, **Veronica Fowler, OD, FAAO**, was homeless. "We lived in shelters, cars and missions, on and off, from the time that I was in first grade," she recalls. And then, when she turned 15, her mother sent her to live on her own, she says.

She stayed at different friends' homes when she could. One constant and stable foundation throughout this time was her job at Kentucky Fried Chicken. "Sometimes I'd live near the school and could go to work immediately after school. Other times, I had to travel about an hour by bus. But, no matter where I was living, the restaurant managers would transfer me to the closest location, and I kept working there all throughout high school," she says.

The U.S. Navy provided Dr. Fowler with direction and support.

> "I like the idea of doctors helping doctors."

After graduating, she joined the U.S. Navy and enlisted as an operations specialist. When her enlistment ended, she used her G.I. bill to cover her undergrad expenses and then applied for a military scholarship to earn her optometry degree from New England College of Optometry. Optometry school drew her during her first enlistment. "I knew I wanted to go into health care, so I volunteered at a physical therapy practice and a veterinary practice. Someone mentioned optometry to me, and it made sense. I'd been wearing eyeglasses since I was in kindergarten, and all of my experiences at the eye doctor's office were comfortable." An OD in the office where she worked instilled the confidence needed and gave her the push. "He said, 'If I can do it, you can do it.'"

Dr. Fowler served four years as a Navy OD, stationed in Norfolk, Virginia, but she volunteered "to go wherever the Navy wanted me to go—Spain, Florida, Maine," she says. She also started an externship program at the medical clinic and she served as the program's director. "I enjoyed teaching a lot," she says.

After resigning her commission as a lieutenant, she signed up for two years as an Army Reserve OD, but also worked in a variety of practice settings, including an ophthalmology practice, a vision therapy practice and a pediatric office. "I worked in one location where my job was to travel to nursing homes two days a week to see patients on site," she says.

One of the practices where she was working was acquired by MyEyeDr. in August of 2016. She attended a meeting where the acquisition was announced, and the MyEyeDr. leadership team explained what that would mean. "I was impressed by the model and excited about the opportunities this would present both in terms of patient care and for my career," she says.

She heard that a clinical skills field manager position would become available, "and I started lobbying for it," she says. "I have always been interested in administrative and management roles, starting in my military career and afterward. I like the idea of doctors helping doctors so that they can make sure their focus is on helping patients."

On Jan. 1, 2018, Dr. Fowler became MyEyeDr. clinical field manager. Four days a week, she works in the Newport News practice and one day each week, she travels to other MyEyeDr. locations. "It's a perfect fit, and I like to inspire people," she says, simply. "I was not a kid who was encouraged to achieve. I wasn't encouraged to go to college or ever told that I could achieve anything I wanted."

Now she's adamant that people she works with understand their value and their potential. "Once I became a part of MyEyeDr., I felt that the company was really focused on its people. So when I visit an office, I'm there for the doctor, the associates and the patients. I want people to be excited to see me and know that I'm going to look out for them. They trust that I'm going to find a way to work through any issues or concerns that they have," she says.

"I think I'm meant to inspire people. We can always succeed as long as we stay vigilant, stay focused on our goals and accept help when we need it," she says. It's a formula that brought her a long, long way from where she grew up. | WO |

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See more about Trusted Community Doctors under Growth Strategies on womeninoptometry.com.

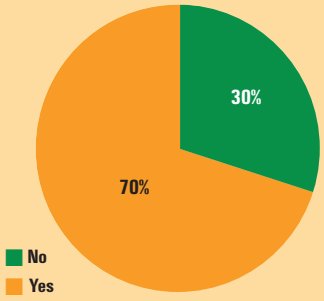
The Benefits of GIVING BACK

There are four major benefits for businesses that give back to the community, according to Entrepreneur.com. These businesses build a reputation within their communities while also making the community a better place to live. Employees want to work for businesses that do good, and research has shown that is even more important with today's millennial employees. Finally, a business's philanthropic efforts generate a network of connections. Charity and philanthropy can be good business, even though those aren't the primary goals of giving. However, the optometrists who shared their passion for giving with *Women In Optometry (WO)* will say that they gain much more than they give.

Seventy percent of the respondents to a recent *WO* Pop-up Poll said that they designate some of the practice revenue to philanthropic causes. These amounts typically vary from year to year, but for about half of the practices, it becomes a team effort, with staff participating in some way.

Donations are not only monetary, but many respondents said that they also

Do you earmark some of your practice revenues for cash donations to philanthropic causes?



Source: *Women In Optometry* Pop-up Polls, 2018.

SEVEN TIMES A SANTA

Dr. Thornhill

'Twas the Sight Before Christmas, when all through the store, patients will be stirring much earlier than the norm. For her 7th annual toy drive benefiting Toys for Tots, **Shauna Thornhill, OD**, will open the doors to her office at 6 a.m. on Saturday, Nov. 17. Dr. Thornhill and her associate **Carson Gee, OD**, will provide eye exams in exchange for toy donations all day until 10 p.m.

The event previously took place at both of Dr. Thornhill's office locations inside the two Walmart stores in Amarillo, Texas, but this year they are consolidating the effort for the fundraiser, which has grown each year since its start. In 2017, the doctors saw 220 patients and collected 8,046 donated toys. "At an average of $18 per toy, that is more than $144,828 in toys," Dr. Thornhill says, and they performed $19,800 worth of free eye exams.

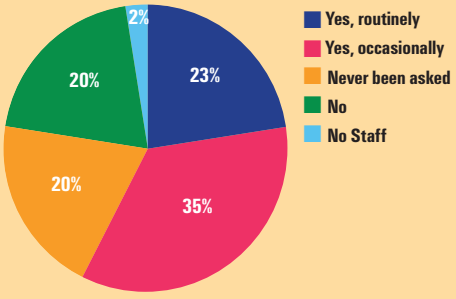
This year, Dr. Thornhill will welcome back local high school students to advertise the fundraiser with giant sidewalk art murals, and entertainment will be provided by local singers, Miss Latinas, a dance academy and a caroler group. Other special guests will be from the local fire department; the Chic-Fil-A cow; the Marines, including a recently discharged Purple Heart recipient; and of course, Santa Claus, who will do a story hour each hour for the children.

Dr. Thornhill's Toys for Tots donation drive gets more attention every year.

The cause has a special place in Dr. Thornhill's heart, who grew up in Amarillo in poverty. Her parents often had to choose between spending money for rent or groceries or buying Christmas presents. The efforts of her team help many families from having to make that choice.

Leading up to the big day, her practice team is developing a creative video in hopes of grabbing the attention of TV host Ellen DeGeneres and generating national attention for her cause. Dr. Thornhill and her staff also look forward to assisting in the toy distribution this December. WO

Does your staff participate in the practice of philanthropic efforts?



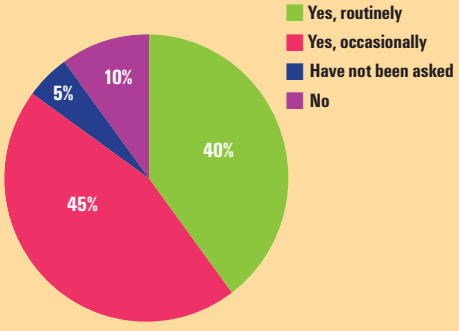
Source: *Women In Optometry* Pop-up Polls, 2018.

donate professional services, with 40 percent of respondents whose offices participate in philanthropic efforts saying that they do so routinely and another 45 percent saying they do so occasionally. Five percent of respondents said that they have not been asked to do so.

How these contributions are determined vary, with the vast majority of respondents (81 percent) saying that the practice donates different amounts as needed, although 10 percent of respondents earmark a specific percentage of practice revenue for philanthropic causes. Seven percent designate a percentage of revenue from a specific event or time period, and 3 percent said

Continued on page 29

Do you donate your professional services?



Source: *Women In Optometry* Pop-up Polls, 2018.

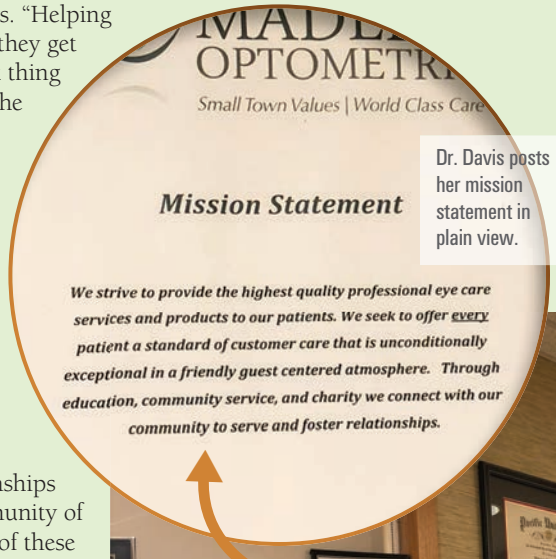
EVERY EFFORT COUNTS

Dr. Davis

When **Viktoria Davis, OD**, was hired to open a satellite office in 1999, she says that she knew from the start that volunteering in the rural community of Madelia, Minnesota, would be an important component of her business. "Community service has always been a cornerstone of my life ever since I was a child," she says. "It was something my parents really believed in and instilled in my brother and me." She adds that the relationships fostered over time bring great fulfillment and success to her personally and the practice.

Giving back is embedded in the practice mission statement: *Through education, community service, and charity we connect with our community to serve and foster relationships.* The full mission statement is displayed in every room of the office, and monthly staff meetings are started by reading it aloud. "It's not just something on a piece of paper that we shove in the back. We really try to live our mission statement because it exemplifies who we are and what we do." She encourages her staff to give back personally or professionally, and patients frequently comment on the signage they see around the office. "They say to me, 'You really believe in this, and we can tell.'"

Dr. Davis focused on building relationships with the local schools and helping the young members of her town start their education with a foundation of great vision. "It's not something I do specifically to build my practice," she says. "Helping people and making sure that they get the care they need is the right thing to do." Every year, she visits the elementary school with her main technician to provide vision screenings. She's connected with an area college, and nursing students also join them. "The nursing students get more exposure to the eyes than they would in a classroom, and the elementary kids get really good vision screenings."



Dr. Davis posts her mission statement in plain view.

Over the years, Dr. Davis has developed special relationships with many in the small community of 2,400 residents. When some of these residents have passed away, the office has made a contribution to Optometry Giving Sight in their honor. "It's a token that shows the family that those patients are meaningful to us, and their eyes were important to them because they chose to come here."

Giving to your community doesn't have to break the bank or consume all of your time. Dr. Davis says that every effort matters. "For practice owners, being charitable doesn't preclude that this is a business and our livelihood," she says. "You can really make a difference for people and their lives by giving a little bit." | WO |

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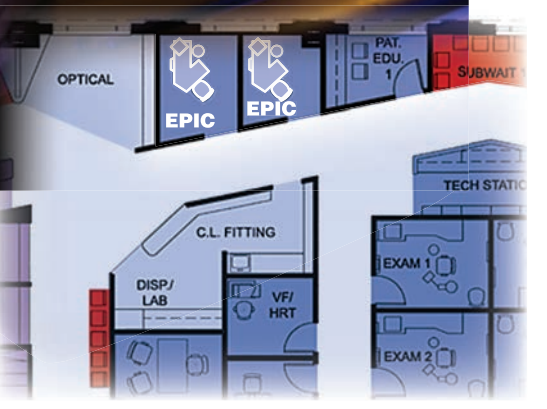

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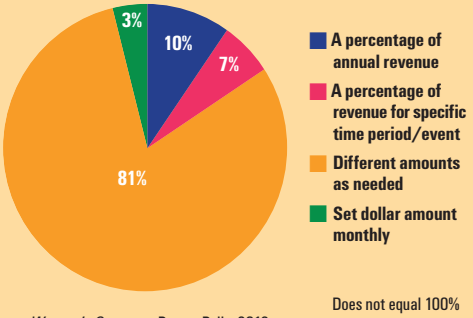
Is this value set at a percentage of some other sliding scale?



Source: *Women In Optometry* Pop-up Polls, 2018.

Does not equal 100% due to rounding.

that they budget an amount each month.

While 56 percent of practitioners say that patients have no direct role in contributing or voting for charities to support, 41 percent note that patients are welcome to make contributions to the practice's charities of choice, and nearly 8 percent said that patients can nominate or request support for specific organizations.

While many practices support more than one cause, contributing to community events or service organizations is at the top of the list, with 68 percent of respondents saying that at least some of their money goes there. Local schools were the recipients for about 41 percent of the respondents, and community food banks were listed by 24 percent. These

Continued on page 31

41%

involve patients with charity events.

GET PATIENTS INVOLVED

You can't miss the dedication to giving back at Myoptic Optometry in Portland, Oregon. Printed on the glass windows and on the wall in each of her three locations, practice owner **Summy To, OD**, has displayed her mission: *See the world better®. Founded on a principle of contribution and community, Myoptic gives a portion of our profits to a charity that you help choose*. And visitors to the practice website's Giving Back tab should be prepared to be blown away. The page displays a ticker tracking donations made to a number of local charities since she opened in 2010—totaling more than $50,000. "I've always had a nonprofit, business philosophy and wanted to give back to the community," Dr. To says.

Dr. To

She started getting patients involved even before she had her own practice, while she was leasing a space to provide eye exams.

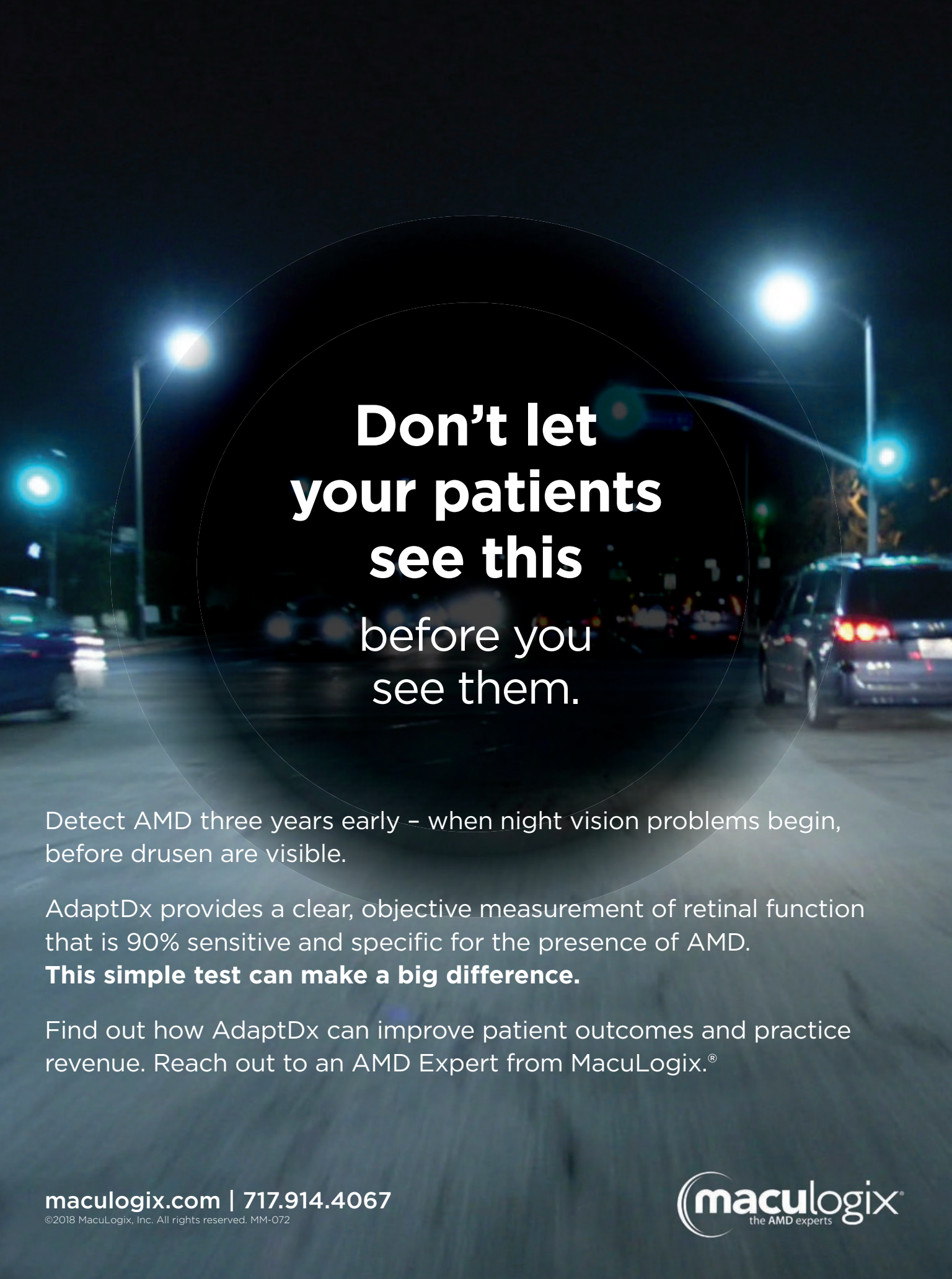
A focus on helping others brings people together.

Dr. To's mission is incorporated into the practice design in her three offices.

"Patients could choose from one of four nonprofits, and we would give a portion of the proceeds to the organization they chose." Now at Myoptic, patients also can designate at checkout where they would like their exam's donation to go.

Dr. To has a few criteria when selecting charities to support. She looks for Portland-based organizations with high ratings for their ethics, as well as a variety of causes in different areas from environmental impact to international aid, hunger and social justice, to name a few. Currently, she's supporting the Oregon Food Bank, Mercy Corps, Oregon Public Broadcasting, The Street Trust and the Pride Foundation. The practice also started a scholarship program a few years ago.

Beyond financial support, Dr. To also provided nearly 700 free eye exams and eyeglasses to people in need. Through connections with a local high school, Dress for Success, Salvation Army and the Pride Foundation, candidates are identified for the exams, and a frame vendor and lab donate frames and lenses for the patients. "It's totally free, and it's nice to have those partnerships with the organizations to help organize our efforts." | WO |



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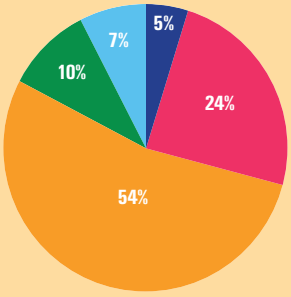
Continued from page 29

organizations were followed by sight-related missions, such as Lion's Clubs (32 percent), Optometry Giving Sight (27 percent) and optometry schools (14 percent). Special Olympics was the designee of about 19 percent of the respondents. Nineteen percent of practices also noted that they organize and run community events to drive donations for a local organization.

The majority of practitioners, 54 percent, said that their 2018 giving will be roughly equivalent to their 2017 giving, although 29 percent noted that their giving is likely to be higher this year. Twenty-four percent said it would be somewhat higher (up to 10 percent more) while 5 percent said it would be even higher than that. About 10 percent said that they expect their 2018 giving to be slightly lower than last year, and 7 percent said they don't know. | WO |

In 2018, how will your charitable giving compare to 2017?



- I/this practice will give significantly more than in 2017 (10%+ more)
- I/this practice will give somewhat more than in 2017 (up to about 10% more)
- Giving will be at about the same level as 2017
- I/this practice will give somewhat less than in 2017 (up to about 10% less)
- Don't know

Source: *Women In Optometry* Pop-up Polls, 2018.

SET THE EXAMPLE

Dr. Maier

The Giving Board at Eyes for Life in Spokane, Washington, is a giant bulletin board proudly displayed in the office to highlight the charities where **Heavin Maier, OD**, is currently donating a portion of the practice's profits. The concept for the Giving Board was born while Dr. Maier was working with the Lutheran Community Services, where she was a board member helping to raise awareness and funds toward efforts to end sex trafficking. "It was a way to educate my patients on the causes that were important to me," Dr. Maier says. Currently, the board features information on Doctors Without Borders and Vanessa Behan Crisis Nursery, a local organization that provides safety for children, strengthens families and creates a healthier community in an environment of unconditional love. She has also recently supported Optometry Giving Sight on the Giving Board.

> "Patients can nominate a charity that is important to them."

To spread the wealth, these charities change every year or two, and Dr. Maier also gives patients a chance to provide their input on a charity that they would like Dr. Maier to support. "Patients can nominate a charity that is important to them by putting the name of the organization in a box," which is displayed near the Giving Board, Dr. Maier explains. They submit their name and the charity that they are passionate about, and Dr. Maier supports a unique patient-nominated charity each month with a donation of $300, in addition to her donations for the Giving Board charities.

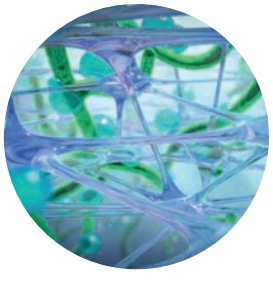
Beyond her monetary contributions, Dr. Maier also helps others in her community by providing eye care services at least every month and a half, along with a rotation of other local ODs in Spokane, at the Union Gospel Mission clinic. Dr. Maier encourages not only her family and staff to be passionate about an organization of their choice, but she encourages that to her patients as well. Many patients who have moved away from Spokane come back to her for their eye care due to her reputation as a thorough, caring doctor and for her values. | WO |

Patients understand that giving back is a driving force in the office.

NEW INFORMATION

Designed for sharper, brighter, clearer vision[1]

ACUVUE OASYS® Brand Contact Lenses 1-Day has Tear-inspired Design



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- Integrates with patient's own tear film every day[2]
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ACUVUE® 1-Day oasys WITH HydraLuxe™ BRAND CONTACT LENSES

1. JJVC data on file 2017. Compared to ACUVUE OASYS® Brand Contact Lenses with HYDRACLEAR® PLUS Technology. Three visit, non-dispensing study conducted in the US, n=35, visual acuity and contrast sensitivity results of current contact lens wearers testing ACUVUE OASYS® 1-Day Brand with Hydraluxe™ Technology (with high optical precision) compared to ACUVUE OASYS® Brand Contact Lenses with HYDRACLEAR® PLUS Technology 2-Weekly reusable contact lenses.
2. JJVC data on file 2015. LACREON®, HYDRACLEAR® Plus, HYDRACLEAR® 1, and Hydraluxe™ Tear Film Technologies. Revision 2.0
3. JJVC data on file 2017. Optical Precision of ACUVUE OASYS® Brand 1-Day Contact Lenses with HydraLuxe™ Technology.

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OA-00082GL-F

Two Halves of a WHOLE

Sisters complement each other

The sisters have exceeded their business plan.

(l-r): Dr. Olivia Carleo and sister Dr. Anita Carleo

The nearly four years since the opening of Vision Veritas has flown by, says **Olivia Carleo, OD**. By 18 months ago, both Dr. Olivia Carleo and her sister **Anita Carleo, OD**, who are partners in the practice, had stopped working in the other practices where they were employed to dedicate their time to the practice they started cold in Dallas, Texas. "We have been beating all our initial goals, and it's been a fun process to watch the business grow over time," Dr. Olivia Carleo says. They budgeted conservatively on their gross revenue, and "we're just knocking that out of the park," she says. They were recognized three years in a row as the best place for eye care, voted by the local community, and their families have grown as well when Dr. Olivia Carleo had her second child, and Dr. Anita Carleo welcomed her first.

Now both of them spend 2.5 days in the office offering five days of coverage, and they can spend the rest of their week home as moms. They also each work one Saturday per month. "It's the perfect balance," Dr. Olivia Carleo says, adding that they are both are thankful to their families and support system that make it possible with all of their young children.

"The complexity now is scaling our growth and not allowing quality to suffer," Dr. Olivia Carleo says. "Our phone is ringing, and people want to come in, but we don't want to book people too far out because then they might look to go somewhere else." They are analyzing how to book their schedule more efficiently and when it may be time to hire more staff or another doctor. "It's scary because you want to make sure that another doctor would have the right personality and fit to take great care of your patients. And from a staffing standpoint, we feel it's better to be slightly overstaffed versus understaffed so patient service doesn't suffer."

Business booms as they provide full-scope care and see a large number of patients for medical eye disease. Many patients who come in for an eye infection often return for their comprehensive care, and their referral network is growing with local ophthalmologists. "We've found that many of these specialty groups need to refer their patients who need to update their eyeglasses," Dr. Olivia Carleo says. "Those referrals for refraction or contact lens fits land in our chair, and those patients can be additional good referral sources when they recommend us to their friends and families."

Their Vision Source® membership has also helped with making new connections in many areas from referring doctors and new patients to colleagues. One nice benefit is the Vision Source member support team laying some of the groundwork to help provide greater access to patients with medical insurance.

Dr. Olivia Carleo says that one of the biggest benefits has been engaging in the Vision Source monthly meetings in the Dallas/Fort Worth area. "I really enjoy the coming together of all of our minds and talking about topics such as changes in the industry, new products and equipment and difficult situations and how we would handle them," she says. "With Vision Source, you also get discounts and rebates, and that's great, but I feel like the camaraderie and meeting on practice management are almost more valuable." That's been particularly helpful as the sisters prepare to launch their myopia control specialty services very soon and as they navigate the more challenging areas of their growth.

The doctors continue to receive comments on the yellow stucco building that they had constructed for Vision Veritas, which features a bell tower and a red-tiled roof. "We get a lot of compliments about the aesthetics and feel," she says. Dr. Olivia Carleo says that she knows it's not always financially possible to make a big statement with your practice, but it is worth the investment. "If you can differentiate yourself just a little bit with something unique, it's a talking point and people really notice." | WO |

> "We feel it's better to be slightly overstaffed versus understaffed so patient service doesn't suffer."

WOnline

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YES, We Offer MYOPIA CONTROL Options Here

Dr. Moheeputh wants Walmart shoppers to have access to the same services as they do in other practices.

Dr. Moheeputh

When **Glenda Aleman Moheeputh, OD**, of Hialeah, Florida, was attending a meeting of orthokeratology practitioners, her colleagues seemed skeptical that she could provide ortho-k services in an independent practice inside a Walmart store. At first, she was, too. But the more she thought about it, the more she liked the idea. Then she began to see that it was a matter of necessity.

"There's no reason why anyone should be deprived of at least knowing about such a great treatment option. Just because these patients shop in Walmart, should they not have that option? That's just not fair," she says.

Dr. Moheeputh's loyalty to Walmart and Vision Center customers and patients runs deep. When she was attending optometry school at Nova Southeastern University College of Optometry, she knew that she wanted to operate an independent practice located inside a Walmart. She began working for the company in 1999 as a sales associate, and then found her way into the Vision Center, where she became a manager and a licensed optician. She kept that job all through optometry school. She went to work in a New York practice that specialized in orthokeratology after her 2017 graduation because she had her New York license immediately. When her Florida license came through, she moved back to Florida.

Dr. Moheeputh and a young orthokeratology patient

"This is a primary care, family practice, but myopia control is one of my priorities and passions. Anytime that I see a patient who has progressive myopia, I'm going to talk about the range of treatment options: soft contact lenses, eyeglasses and orthokeratology. I'll emphasize that orthokeratology is the only one of those options that can slow the advancement of myopia," she says.

> "Even parents with lower incomes are interested in this option."

The effort is working. Within months, she had her first patients, and others were setting up appointments. "Even parents with lower incomes are very interested in this option because they don't want to see their child's myopia progress the way that theirs did," she says. "Even if they choose not to pursue the option this year, I'm introducing it and they may change their mind next year. Almost all of them say that they had never heard that this was an option for their child—and that's not right."

For now, Dr. Moheeputh, a member of the American Academy of Orthokeratology and Myopia Control, and her office manager are working on spreading the news that the practice enjoys seeing children and that vision and learning are distinctly related. "So many children are misdiagnosed as having learning disabilities or behavioral problems, when the issues might be solved through corrective eyewear or vision therapy," she says.

While she does not offer vision therapy, she will explain the benefits to patients and provide a referral to eye care providers who offer those services. She is also planning to visit pediatricians' offices, school nurses and parent and teacher organizations in the region. "One of my new patients brought her three children in after I had seen her, and she was so pleased with the quality of the exam that she invited us to host an event at the school where she works," Dr. Moheeputh says.

She's adamant that young patients and their parents are aware of the important connection between learning and seeing clearly. Instead of wondering whether orthokeratology can be offered in an independent doctor's office inside Walmart, she wonders why a practitioner would *not* offer young patients every option to control myopia. | WO |

SEED OF AN IDEA STARTS

Before **Dr. Glenda Aleman Moheeputh** became an optometrist, she was a Vision Center manager at a Walmart in Tampa, Florida. The Vision Center was offering vision screenings to Walmart customers one day. One man's results indicated he should have a full vision exam, and he told her, "'Great; let's go.' He thought I was the doctor, and I explained that I was the [Vision Center] manager. I saw him again later and he asked, 'Why aren't you the doctor?' So that set the idea into motion," she says. | WO |

WOnline

See more stories about Community ODs under Growth Strategies on womeninoptometry.com.

Helping Patients See That DRY EYES ARE MORE THAN A NUISANCE

Dr. Li says patients are eager for natural, effective options for eye care.

There are times when Loretta Li, OD, is working with patients and simply can't achieve good vision during the refraction. She'll stop what she's doing and put in a drop of Natural Ophthalmics Tear Stimulation formula. She'll do the same if she suspects the patient is suffering from symptoms of dryness or dry eye during pretesting. "Many patients don't realize that dry eyes can distort their vision," she says. Once she addresses that immediately, she can gain better results—and better outcomes—from the rest of the exam.

Dr. Li began using Natural Ophthalmics natural eye care products after being introduced to the option in a show exhibit hall. First she tried the Tear Stimulation Forte Dry Eye Drops for herself. Her experience was a good one, so she brought the line into the practice she started in 1988 in Westminster, California.

"Since this is a primary care practice, I had a number of postmenopausal women who were telling me that their eyes felt dry and uncomfortable," she says. "I was desperately looking for something to help them because they can be desperate in their request for help. It's quite painful." She tried several different products before finding Natural Ophthalmics, and most were artificial tears that didn't provide long-lasting relief. Tear stimulation drops are available in Japan, but the Natural Ophthalmics line was the first she heard of here. "It's affordable, and it seems to help people," she says.

> "[Dry eye patients] can be desperate in their request for help."

Now she recommends the Tear Stimulation Drops for a number of patients—male and female, young and old. As women found relief, the men in their lives heard about it, too, and started stopping by to see if the drops would work for them. She also recommends it for students of all ages who spend hours a day staring at computer screens and digital devices.

ORTHO-K PRACTICE BUILDS

Dr. Li has an active orthokeratology practice, particularly with young patients whose parents are eager to help children avoid the progressive myopia that they went through. "When orthokeratology patients' eyes are dry, the procedure doesn't shape the cornea as well. We need a good ocular surface and tears to help the process," she says.

She has found good success by using Natural Ophthalmics' Ortho-K Thin Drops during the day to promote a better tear flow. She encourages children to instill drops when they come home from school, especially if they're about to sit down for more screen time. By optimizing the ocular lens surface, she feels that she has better success, both in terms of the process and the patients' comfort.

Dr. Li often starts a mild to moderate dry eye patient with Tear Stimulation Drops. "There are other tools available—from prescription medications to punctal plugs. But starting with Tear Stimulation Drop can be helpful," she says. She also often pairs that with omega 3 supplementation if she suspects inflammation. She'll follow these patients and decide what the next steps should be.

Dr. Li

ALLERGY OR DRY EYE?

Patients often don't know what the cause of their discomfort is, and they'll often guess that it must be an allergy. "We have to separate allergies from dry eyes from other factors, such as whether a patient is straining because he or she needs refractive correction," she says.

That can sometimes require some additional education. "We have people who walk into our office because they've heard we carry natural eye care products and ask to buy the Allergy Drops or the Tear Stimulations Drops." The staff has been trained to explain that Dr. Li needs to see them first to rule out another condition or refractive error. "I do use Natural Ophthalmics Allergy Desensitization Drops for patients who have a true allergy," she says.

She encourages her patients not to try to self-diagnose because they can spend time and money using products that might not help them. Instead, they can come to her and leave with confidence in the diagnosis and the natural products that they want. | WO |

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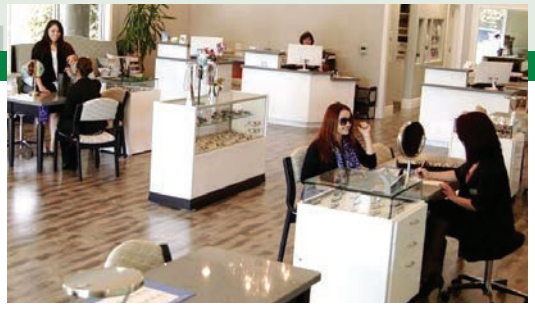
See more stories about Natural Eye Care under Growth Strategies on womeninoptometry.com.

Every PATIENT ENCOUNTER Is a TEACHABLE MOMENT

Dr. Pham-Murphy



Being a VSP Global Premier Program practice brings in patients who come for value and stay for the service.

> "Plant seeds that you can continue to nurture."

Heidi Pham-Murphy, OD, opened her practice Visions Optometry in Sacramento, California, just three freeway stops away from the VSP headquarters. That wasn't on purpose, but the proximity has brought a lot of VSP employees to her practice. In fact, being a VSP Global Premier Program practice has brought many patients in—but whether they return depends on the experience and the care they receive.

When Dr. Pham-Murphy purchased the established practice, she became its third owner and the first woman owner. "It's in an area of highly educated individuals where the first impression needs to match the high expectations. So we have little niceties, such as offering to make patients a cup of coffee and helping them feel comfortable as soon as they walk in the door."

INFLUENCE THROUGH EDUCATION

While those comforts are important, the real opportunity starts with education and influence, she says, which is important to the overall health of each practice but also to the progression of the profession. "The future is really bright. With the aging population comes new areas of opportunity for us to educate patients about the risks and factors in macular degeneration, harmful blue light, diabetes and more." She uses the latest research to educate her patients. "We're on the front line. We have the ability to impact people's choices today that will impact their vision in the future."

She considers her time with patients in the exam room to be where she can create that bond. "I am talking or asking questions the whole time. I want patients to understand my philosophy, learn how to mitigate their risk factors and understand their choices for the clearest vision."

KEEP LEARNING

The patient care successes that she's had over the years inspire her to keep learning, too. For example, she recently saw a new patient who came to her specifically for a dry eye consultation. "She had seen three or four doctors already and said that despite using artificial tears, her eyes hurt every time she tried to read. She told me she felt like her life was over, which is very discouraging." In fact, the patient had resigned herself to a lifetime of discomfort when she heard from a friend about the treatment at Dr. Pham-Murphy's practice. She worked the patient through a dry eye protocol, and the patient called back a week later to say how much better she was feeling. "I saw her a month later, and I almost didn't recognize her. I thought she looked so much younger; she said she was happy. What a difference that made."

There have been so many stories like that—from the Sjogren's patient who said she could finally get out of her car and watch from the sidelines while her daughter played soccer to the people whose whole world expands with their first pair of eyeglasses. "These are the stories that teach and encourage us to take risks in our practice by staying on the leading edge of care," she says.

PATIENTS LOVE VALUE

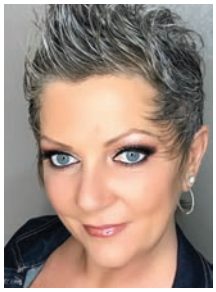
That extends to the products that patients can acquire. Being a Premier Program practice means that Dr. Pham-Murphy can offer her patients a great value on their eyewear. "We have a large collection of eyewear from Marchon—Chloe, Calvin Klein, Flexon, Ferragamo, Calvin Klein Jeans and Longchamp. These are all doing very well, and we make sure that we select distinctive frames from each line so that there's a broad and unique collection."

She is also thrilled with what VSP Global is doing to bring vision development and sports performance into the practice with its investment in RightEye, an eye-tracking technology company. The game-based tests use a sophisticated database to generate an instant report with details about the person's visual speed and accuracy, visual processing, depth perception, dry eye and more. "We will be able to identify those children who have been diagnosed with learning disabilities who may have visual performance problems," she says.

"When you educate patients, you plant seeds that you can continue to nurture, and eventually, those seeds will grow." WO

Driven OD Finds Managing THREE LOCATIONS a FUN CHALLENGE

Business aspect of having three corporate leases is as attractive as patient care



Dr. Galantuomini

> "There's nothing that I did in my private practice that I don't do here, except sell eyeglasses."

When **Gail Galantuomini, OD**, graduated from Southern California College of Optometry, she took what was considered a fairly traditional path: she returned to her hometown—Reno, Nevada—and opened a private practice. A few years later, a colleague in Las Vegas who had a lease arrangement with two Eyeglass World locations asked her if she would help him out there. "Monday through Thursday, I worked in my own Reno practice and then I'd fly to Las Vegas and work for him every Friday, Saturday and Sunday," she says. She kept up that pace for two years.

When that doctor left, she was offered the two leases. "Eventually, I sold my private practice and moved to Las Vegas," she says. "I decided to make these practices my whole commitment from that point forward." In 2007, Eyeglass World opened a third location in town, and she took on the lease for that office, too.

National Vision, Inc., took ownership of the Eyeglass World brand in January 2008, and Dr. Galantuomini says that she has been delighted with the dedication that the company shows to doctors. "A group of representatives came out and took me to dinner recently to celebrate my 20 years with Eyeglass World," she says. That's a small thing, but it reflects the leadership's acknowledgment about the importance of the optometrist, she says.

"There's nothing that I did in my private practice that I don't do here, except sell eyeglasses," she says. "I love this arrangement because I truly enjoy both providing eye care and managing a business." In fact, if the company were to open new stores in the Las Vegas market, she'd be first in line to ask for the leases, she says.

While there are some economies of scale with running three practices, Dr. Galantuomini does look at them as primarily individual—each with its core group of doctors and staff. As part of the lease agreement, National Vision provides the major equipment for the exam lane, but all aspects related to practice management and patient care—from hiring optometrists, the phone systems and electronic health records (EHR) to management of the schedule—fall under her oversight.

Indeed, much of that modernization was her initiative when she took over the leases. "The previous doctor handwrote everything, including HCFA forms. In my private practice, I had used an EHR system, so I brought computerization in right away," she says.

Many of the staff members made the move with her, and she says that their continuity made the transition seamless. "Patients knew me, too; they'd seen me there for the past two years," Dr. Galantuomini says.

What hasn't changed is the accessibility that the Eyeglass World locations provide. Open six days a week, Eyeglass World draws patients in with its convenience, ease and affordability. To make sure that she can see those who come in, she keeps slots open on the daily calendar for walk-ins. "We always fill those slots," she says, and that might be one of the most notable differences between her work here and her private practice.

"We try to accommodate everyone who comes in," she says. That includes a number of patients who are drawn by Eyeglass World's retail promotions and advertising who find that they have an expired prescription or need an eye exam. If they choose to come to her practice for those professional services, she wants to help them get what they need conveniently. "It's a benefit to patients to be able to have their eyes examined and order their contact lenses from my practice or their eyeglasses from Eyeglass World, all in the same visit. While the retail store and my practices are separate businesses, I know that it's good for the store when I can update a patient's prescription. And it's good for my business when Eyeglass World advertising makes people think about their eye care needs. All in all, this lease arrangement with National Vision fulfills all my goals as an optometrist." | WO |

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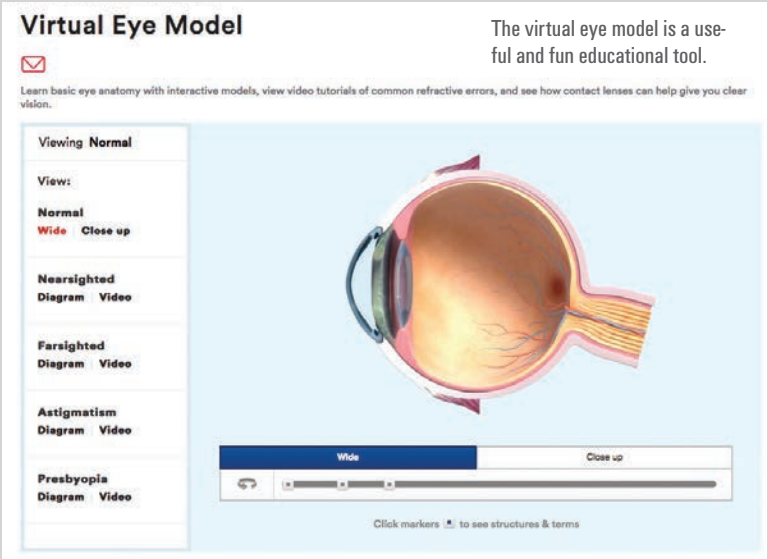
All the ANSWERS in ONE PLACE

New resource tool from Johnson & Johnson Vision helps doctors, staff and patients



Dr. Whittam

> "Staff is more empowered to help educate patients."

Imagine having all the practice management and patient management resources you need at your fingertips. That's how **Denise Whittam, OD**, of New York, New York, feels now that she's using JNJVISIONPRO.com, an online portal to a wealth of resources. "In my practice, cross-training the staff is important so that we can work collaboratively and make sure not one minute is being wasted," she says.

She, the practice staff and even the patients have multiple daily interactions with the new site from Johnson & Johnson Vision.

STAFF TRAINING AND PRACTICE RESOURCES

Every staff member needs to know how to answer a patient's question confidently, even if the question isn't typically an area of expertise. It saves the patient time and frustration and projects a higher level of quality and coordination. That applies to practice processes, too, so staff members can use the functionality to reorder contact lenses and use handy account management tools, simplifying that process. The site also offers marketing materials, which simplify that aspect of business-building, too.

CLINICAL DATA

Looking through the intuitive web resources also makes it much easier for Dr. Whittam to determine the best contact lens for a patient. "In the past, I might not have known immediately if the patient's high Rx was out of range. Now I can check the availability instantly without having to thumb through a guide," she says. "I emphasize to patients that I'm going to find a contact lens that works well not only for their best vision but also for their best experience. So a patient with hypoxia or allergies might need to switch to a single use lens, and we can talk about the benefits of ACUVUE® OASYS Brand Contact Lenses 1-Day with HydraLuxe™ Technology, or we'll talk with another patient about how reusable replacement contact lenses such as ACUVUE® OASYS Brand Contact Lenses can help. When we have easy access to the information for ourselves and to share, patients realize that we're providing the best care for them."

PATIENT EDUCATION

Patients have interactions with the website, too. That can even begin in the exam room or before the doctor enters the room, with educational loops of how to insert and remove contact lenses for those who might be considering first-time contact lens wear. "Patients are a little more prepared, and staff is more empowered to help educate patients," she says.

One commonly used tool on the professional site is the virtual eye model. She can use it to show patients basic eye anatomy, as well as help them understand what their visual issue is. The interactive tools can allow her to show quick images that demonstrate vision correction options and how contact lenses can correct for refractive errors as well as astigmatism and presbyopia. She can also show patients a tutorial that explains the visual issue in more detail. "Someone might say, 'I've tried multifocal lenses before and they didn't work for me.' I can respond by saying, 'Let me show you why I think this design will.' I routinely have patients who thank me that they've learned so much during their visit."

Dr. Whittam says that JNJVISIONPRO.com is a demonstration of the collaborative work that Johnson & Johnson Vision has done with doctors and patients. "It's the best tool we have, in my opinion, because it is completely comprehensive in every aspect of ocular health care, contact lens care, scientific technology, advocacy and answering patients' questions," she says. "All of the answers can be found here." | WO |

Dr. Whittam is a professional affairs consultant for Johnson & Johnson Vision.

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WOMEN IN THE *News*

Dr. Deffler

Dr. Miller

Dr. Fitzgerald

Dr. Read

Dr. Moore

Dr. Funk

Dr. Zhuang

Rebecca A. Deffler, OD, of The Ohio State University College of Optometry, is this year's recipient for the Alfred A. Rosenbloom, Jr., Low Vision Residency Award.

Xiaohua Zhuang, PhD, assistant professor at the Illinois College of Optometry, is the 2018 recipient of the Beta Sigma Kappa (BSK) Research Fellowship from the American Academy of Optometry Foundation in collaboration with the BSK International Optometric Honor Society. This award will fund Dr. Zhuang's project, "Flicker Adaptation Probes Detection of Contrast Sensitivity Loss in Early Glaucoma."

Dr. Nogueras

For Eyes Optical, a division of GrandVision N.V., has named **Magda Nogueras, OD**, as its vice president of Professional Services.

Dr. Bishop

Christine Brennan Bishop, OD, of Okeechobee, is the recipient of the 2018 Okeechobee Trailblazer Award, an award celebrating the accomplishments of women in Florida's Treasure Coast region.

Dr. Axelson

Bridget Axelson, OD, from Blaine, is vice president of the Minnesota Optometric Association.

Ann Rae Miller, OD, of Lima, Ohio, was honored with the Lima/Allen County Chamber's Emerging Business of the Year Award.

Dr. Iyer

Dr. Chan

DeAnn Fitzgerald, OD, received the President's Award at the Neuro-Optometric Rehabilitation Association's 27th Annual Conference.

Dr. Burns-LeGros

Margaret Read, OD, director, Special Assistant Health Affairs within the Office of the Secretary of the Navy, was promoted to captain.

Dr. McNeely

Chelsey Moore, OD, of Springfield, was named Young Optometrist of the Year by the Illinois Optometric Association. **Tina Funk, OD**, of Olney, became president-elect.

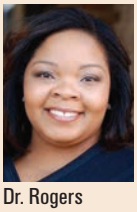
Bhavani Iyer, OD, was promoted to associate professor at the McGovern Medical School in Houston and notes that she's the first optometrist and first woman of color in this role.

Judy Chan, OD, of Vancouver, is the vice president of the Optometric Physicians of Washington.

Denise Burns-LeGros, OD, FAAO, of Melbourne, became president of the Florida Optometric Association.

Sherrol A. Reynolds, OD, FAAO, associate professor at Nova Southeastern University College of Optometry, became president of the National Optometric Association (NOA). **Brittany Rogers, OD**, of Tupelo, Mississippi, is the NOA Optometrist of the Year. **Camille Cohen, OD**, of Brooklyn, New York, was presented with the NOA Service award.

Dr. Reynolds


Dr. Rogers

Dr. Cohen

Several women ODs are recipients of 2018 William C. Ezell Fellowships from the American Academy of Optometry (AAO) Foundation: **Maria Walker, OD, MS, FAAO**, of the University of Houston College of Optometry, for AAO Section on Cornea, Contact Lenses and Refractive Technologies Ezell Fellow; **Katherine Bickle, OD, MS, FAAO**, of The Ohio State University College of Optometry, for Danne Ventura–Essilor Ezell Fellow; **Jasmine S. Junge, OD, FAAO**, of the University of California, Berkeley, School of Optometry, for John N. Schoen Ezell Fellow; **Ann Morrison, OD, MS, FAAO**, of The Ohio State University College of Optometry, for Mike Daley–Essilor Ezell Fellow; **Elise N. Harb, OD, MSc, FAAO**, of the University of California, Berkeley, School of Optometry, for Michael G. Harris Ezell Fellow; **Laura Pardon, OD, MS, FAAO**, of the University of Houston College of Optometry, for Optometric Glaucoma Society Ezell Fellow; and **Kaitlyn Anne Sapoznik, OD**, of the Indiana University School of Optometry, for Vision Impact Institute Ezell Fellow.

Dr. Walker

Dr. Bickle

Dr. Junge

Dr. Morrison

Dr. Harb

Dr. Pardon

Dr. Sapoznik

Johndra McNeely, OD, of Greenville, is the immediate past president of the South Carolina Optometric Physicians Association and was recently honored with the association's Tim Burrell Legislative Award. WO

Natural Elements

Bring the outdoor environment into practice design

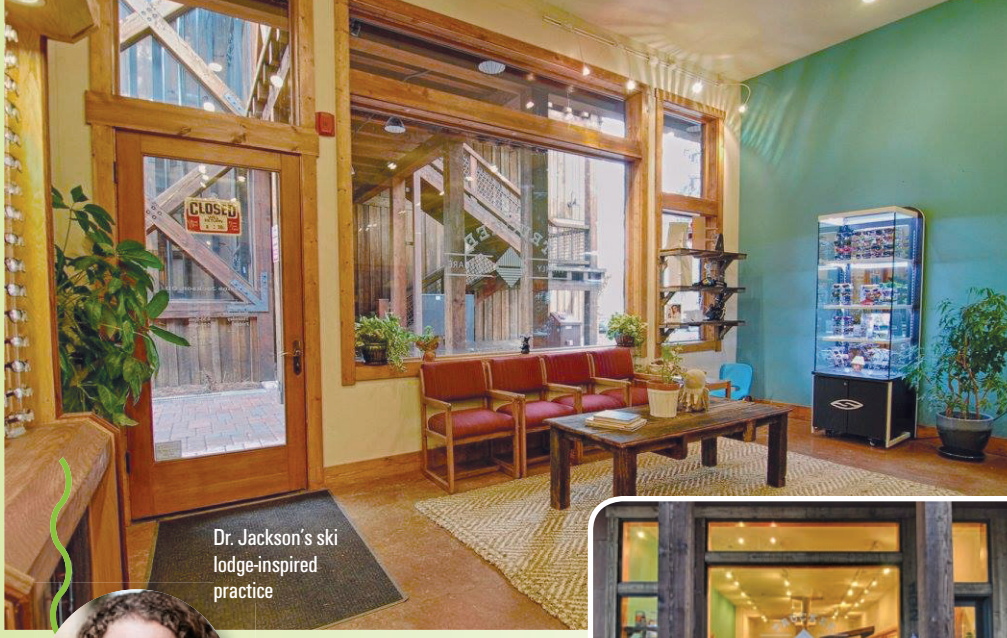
Dr. Monica Ma's use of color pops against the neutrals.

Dr. Belinda Dobson's new location mixes stone, metal and Tuscan style architecture. A fossil from the region is embedded in the structure.

Dr. Ma

BRIGHT AND LIGHT

Monica Ma, OD, and her husband, **Jonathan Reynon, OD**, opened their practice in Cary, North Carolina, in a new shopping center. The huge windows and bright light lends an airiness to the optical. Dr. Ma contrasted the whites and neutrals in the office with green and blue accents. Great lighting is essential to showcasing the frames and an optical experience in trying on frames.



Dr. Jackson's ski lodge-inspired practice

Dr. Jackson

THE GREAT OUTDOORS

Christie Jackson, OD, of Truckee, California, is surrounded by the splendor of Lake Tahoe. Her practice brings in multiple elements of the mountain community in a space that merges ski lodge with medical practice. From the reclaimed barnwood that makes up the front desk and cabinet tops, the timbers framing the large windows, the sliding barn door and the rustic styling, the practice fits into its environs perfectly.

Dr. Tran

WOOD'S WELCOME

Amy Tran, OD, of San Francisco, California, worked with a local craftsman to bring her visions of a welcoming practice to life. Light elm is used in the cabinets and to frame the large windows. Her white oak wood floor actually cost less than the original polished concrete she had in mind.

Unique wooden framing around the cabinets show off frames in Dr. Tran's practice.

Dr. Vargas

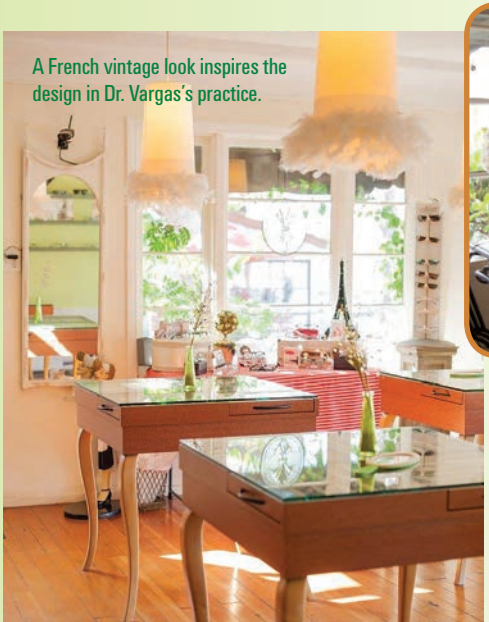
CITY OF LIGHTS INSPIRED DESIGN

Ana Vargas, OD, found the windows in this Sherman Oaks, California, location irresistible—not only for the amount of light that floods in but also for the street appeal they add to the practice. Passersby can see her eclectic décor and frame selection that is inspired by vintage French design.

Dr. Dobson

ROCK SOLID

Belinda Dobson, OD, of College Station, Texas, says that the inspiration for the design of the 5,000-square-foot space came naturally. Since she loves Mediterranean architecture, she chose a Tuscan-style exterior with stucco, rock and a clay tile roof. "I grew up in a ranch in North Texas, so we incorporated some fossils into our rock work outside," she says, "bringing a little bit of my history into the building."



A French vintage look inspires the design in Dr. Vargas's practice.

Read full versions of these stories and other design stories on womeninoptometry.com, under Models of Practice, then The Physical Space. | WO |

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OFFICE *Design*

One Door CLOSED to OPEN Another

After plan A is scuttled, doctor does some quick thinking to develop plan B

Dr. Patel

In June 2017, **Bhumika Patel, OD**, gave her 60-day notice at the office where she had been working as an associate, and she could see the finish line in her venture to practice ownership. She was just days away from signing the final paperwork to purchase a practice when the deal fell through. The seller had changed his mind, and Dr. Patel was left needing to make an immediate decision. "When I found out that we didn't have a practice to buy and I didn't have a job either, I knew I needed to look for a space," she says.

The goal was to stay nearby, so Dr. Patel and her husband looked at three spaces in Fort Mill, South Carolina. The winning location was a building in a brand new construction site in an area undergoing huge development, and Dr. Patel saw great potential in tapping into this new blossoming community, with its coveted school district.

Put fun in your frame displays.

Dr. Patel received the keys to the new office in November 2017, just before Thanksgiving, and the process for permits and inspections began in January 2018. By Feb. 1, the buildout was underway. The space was an empty shell, the kind of blank canvas she wanted for a perfect starting point. Dr. Patel had been saving inspiration for office design on a Pinterest board. "I knew I wanted grey and white with just a little pop of color," she says, and she chose Tiffany blue. One wall in the optical is gray brick wallpaper, and her designer picked out pieces that would bring her Pinterest portfolio to life with beautiful chandeliers, unique shelving to display frames and decorative mirrors.

The optical has an open design, blending into the reception area and encouraging those in the space to browse the frame displays. There's room for two exam rooms, with one equipped for now, and a large lab. Dr. Patel invested in a few important pieces of technology from the start. "My must-have was a topographer, so I could do orthoker-atology and specialty contact lenses," she says. She also added a visual field and purchased her OCT from another optometrist for a great price.

Tiffany blue accents pop against the brick-look wallpaper.

Dr. Patel opened up her doors to Redstone Family Vision on July 9. She says that she's grateful to her former employer, who let her work as an independent contractor a few days per week as she was getting her office up and running, and to her consultants at iCareAdvisors who guided her through the whole process and also recommended her interior and logo designers.

Dr. Patel didn't have patients following her from the office where she previously worked, which was 15 miles away, so she started from scratch. The number of patients she sees per day has been increasing in the few months since she opened, and Dr. Patel says that there are some big community outreach initiatives in the works as soon as the rest of the construction in the shopping center is completed. Restaurants and boutiques will be open soon, and a primary care doctor recently started seeing patients. The center held its official grand opening event, and Dr. Patel also recently sponsored a few events held by the Parent Teacher Organization to support the school system, including a bonfire for the high school and a back-to-school bash for the middle school. She says that she's looking forward to the potential growth she expects to see as the area continues to develop. WO

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See more stories on practice designs under Models of Practice, The Physical Space, on womeninoptometry.com.

OFFICE *Design*

Make Room for FAMILY

Dr. Schafer wanted a modern, calming atmosphere in the new space.

When **Lindsay Schafer, OD**, graduated from Nova Southeastern University College of Optometry in 2010, she moved back home to Goldsboro, North Carolina, and joined her stepfather, **Gibson Blackman, OD**, in practice. Dr. Blackman founded Atlantic Eye Center Optometric Services in the early 1990s after having worked in other locations in the area for years. By the time Dr. Schafer joined him in his thriving business, it had been in its location for about a decade.

A family affair: Dr. Schafer, center, with her stepfather, Dr. Blackman, and her husband, Dr. Statsick, with their staff

Yet space was an issue for two ODs and a growing volume of patients. Dr. Schafer planned to address the issue when she would buy the practice, which was the goal. She wanted a practice that would accommodate two doctors, as her future husband, **Ken Statsick, OD**, was working in a Target Optical in Clearwater, Florida.

Even before the purchase went through, however, she started looking and first viewed the practice's future home, a large property with a building of about 9,000 square feet, in 2014. The building had been vacant for years after a plan to renovate it was put on hold when the economy dipped in 2007. "The asking price was a little wild," Dr. Schafer recalls.

Dr. Schafer and Dr. Statsick bought the practice from Dr. Blackman in 2015, and welcomed their first child two months later. They looked at the vacant building again, which was just 500 yards from their existing office and would allow them to stay along the main streets of town. After a proposal to turn the building into a 911 call center fell through, the doctors closed on the space in April 2016. "The stars aligned with this building around the corner," Dr. Schafer says.

Over the next five months, Dr. Schafer and Dr. Statsick scoured over the details and fine-tuned their plans for demolition and renovation. They determined that 5,000 square feet was plenty, and the remaining space has been turned into two office rentals. "The objective is to bring a lot of commodities that Goldsboro needs to the area," Dr. Schafer says.

Dr. Schafer's top goal in her new office design was improving office flow. "After practicing in a small office, you learn where a lot of your bottlenecks and inefficiencies can come from. That impacts patient care and the bottom line." They also wanted six exam lanes, rather than the three that were in the earlier office and areas for pretesting and special testing, which were combined in the former location. The open floor plan creates an inviting environment, with the exam rooms off a hallway for privacy. Dr. Schafer says, "It's open and airy, and you don't feel boxed in."

Dr. Schafer perfected her vision for the style and design of the office during the months leading to the start of construction in August. "The luxury of having time was that I could find décor that would be cohesive throughout the space," she says. "I wanted to bring something very fresh to the area in terms of style; it's a certain look that this area didn't have." The office is modern in décor and motif, yet also very serene and relaxing. Flooring in sandy shades and walls in white, light blue and deep teal create this tranquil environment and also pay homage to the Atlantic Ocean and the practice's name. The optical has the feel of a high-end boutique and jewelry store, a nod to the roots of opticianry, with sparkling chandeliers dangling from the ceiling.

In January 2017, the doctors opened the doors to the new home to Atlantic Eye Center Optometric Services. "When we purchased the business, the space gave the impression that we were practicing on a smaller scale," Dr. Schafer says. Now they feel their office represents the quality of care they aim to provide. And with this project behind them, Dr. Statsick and Dr. Schafer moved on to the next—as they welcomed the arrival of their second child in June 2017. WO

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See more stories on practice designs under Models of Practice, The Physical Space, on womeninoptometry.com.

Voices

KEEP EYES BEAUTIFUL:

IMPACT OF MAKEUP ON THE OCULAR SURFACE AND DRY EYE DISEASE

By Tamara Petrosyan, OD, of New York, New York

Dr. Petrosyan

Dry eyes are becoming a part of people's lives more and more frequently. It is estimated that one in every eight adults, or 33 million people, suffer from dry eye disease (DED) in the U.S. Patients suffering from DED will report discomfort, eye pain, a feeling of something in the eye, eye fatigue, red eyes, itchy eyes, excessive tearing, light sensitivity, swollen eyes and a change in their vision, and symptoms range from intermittent to constant and chronic. Left untreated, DED damage can be more than a simple nuisance, possibly resulting in corneal damage and vision loss in very severe cases.

According to the U.S. Census Bureau, Americans spend around $10 billion a year on cosmetics, beauty supplies and perfume. Up to 90 percent of females use cosmetics beyond the expiration date, and some chronic conditions such as blepharitis may be caused by contaminated cosmetics. Eye makeup can cause or aggravate an already dry eye. When eye cosmetics migrate on the ocular surface and into the tear film, and as makeup thins out the outermost oily layer of the tear film, natural tears evaporate faster.

A study published by scientists at the University of Waterloo was first to officially show that makeup migration happened more quickly and was greater when eyeliner was put on the inner lid margin. Researchers found that within five minutes of applying eyeliner to the inside of the lash line compared to out of it, 15 percent to 30 percent more particles moved into the eye's tear film.

A recent study titled "Impact of Eye Cosmetics on the Eye, Adnexa, and Ocular Surface" reviews the potential ocular complications of ocular cosmetics.

INCREASED RISK OF INFECTION

- Sources for potential contamination may arise during manufacturing or during use of the product with *Pseudomonas aeruginosa, Staphylococcus aureus* and *Candida albicans* being the main potential pathogens.
- Use of eye cosmetics by multiple users versus one user leads to high levels of bacteria.
- Buildup of moisture, sebum, dead skin cells and Demodex mites accumulate on the makeup applicator over time and can contaminate the product.

RISK OF MECHANICAL TRAUMA

- Corneal trauma with a mascara wand or other products gives microbes such as *P. aeruginosa* an immediate entry route into the cornea.

TOXICITY

- Cadmium, a heavy metal found in eyeliner, causes corneal endothelial cell damage and mitochondrial degeneration leading to disruption of endothelial pump.

ALLERGY

- Allergens in cosmetics include preservatives, antioxidants, resins, pearlescent additives, emollients, fragrances and nickel, as well as surfactants in waterproof makeup remover.
- Eyelash cosmetics tend to cause a band of dermatitis along the lash line, while eyelid cosmetics, tend to affect the whole eyelid.

CHANGE IN PIGMENTATION OF SKIN AND CONJUNCTIVA

- Conjunctival pigmentation can occur due to punctate deposits in the conjunctival fornices and cul de sac.

MASSES IN LACRIMAL SYSTEM

- Heavy or prolonged mascara use can cause obstruction within the lacrimal drainage system.

CHANGE IN LIPID LAYER OF TEAR FILM

- The lipid layer of the tear film can be destabilized by cosmetics and preservatives such as BAK.

CHANGE IN TEAR STABILITY

- Eye cosmetic remover applied to closed eyes still affects tear film stability due to migration into the eye, and cosmetics that get in the eye increase tear evaporation and decrease tear stability.

CHANGES IN OCULAR COMFORT AND CONTACT LENS WEAR

- Cosmetics are prone to binding to the surface of contact lenses.

> "Eye makeup can cause or aggravate an already dry eye."

ODs must be aware of how these products affect the ocular surface and adnexa. We can offer insight on their use, especially in patients suffering from dry eye disease. | WO |

Dr. Petrosyan offers tips to share with patients for makeup use, which will help to avoid contributing to a dry eye problem, on the Women In Optometry *website: goo.gl/RKFLZc.*

Voices

WHERE THE ARTS AND SCIENCES MEET

Dr. Khatkur

By Sareya Khatkur, OD, of Brantford, Ontario

My entire way through school, I teetered back and forth between my love of health sciences and the visual arts. When I came across the concept of a career in optometry—in the health sciences, but also dealing with vision—it seemed like a perfect match. As a visual artist, I'm very passionate about the importance of vision and being able to help people see and appreciate their world. Also, my knowledge of the visual sciences gives me a unique understanding of how our eyes perceive light, color and shapes and how our eyes perceive the world around them. The two fields truly play off of each other.

The year 2010 was crazy as I began to merge my two careers. I graduated from the University of Waterloo School of Optometry in June, was married in July and opened my first private practice in Hamilton, Ontario, by the end of the year. My husband left his job and joined me, bringing his business background to managing the office. I did custom art work on the side on evenings and weekends.

A vision-focused practice should be visually appealing.

We committed to this new journey together. All of my interests came together, and the business was growing and doing well, and in 2011, we also found success in a different model: opening non-dispensing optometry offices alongside successful independent optical shops. We found the first optical through one of my staff members who then worked in my private practice. I was told it was a high-quality location in Brantford, Ontario, with great people who didn't have a doctor. I approached the owners of the next two opticals I worked with in Toronto and Mississauga. They looked like fun places to work that were full of positive energy, and I could bring eye care services to their customers under the same roof.

Then, in 2014, an interesting opportunity presented itself to sell my private practice to another optometrist in town. I found myself considering it, and I went back and forth about what to do. I had realized by that point I wasn't incredibly passionate about dispensing and eyeglasses. My husband and I believe in going with the flow and seeing where life takes us, so I decided that this would be an interesting way to close this chapter and see what else is ahead for us.

The results of that decision are overwhelmingly positive. Business has been great, and our Brantford patient base has grown so much that I have leased my own space right nearby the optical where I started that location.

Dr. Khatkur brings her own artistic touches to practice décor.

So, while working under the same roof as an optical store may not seem as glamorous as a full-scope private practice, it could be the perfect fit for some optometrists and should not be overlooked. In a nondispensing practice, there is often less time required for administrative work (selecting frames, meeting with frame reps and suppliers, etc.), and this has allowed me to focus on my interests: eye care, excluding eyeglasses and dispensing, and working on projects in the visual arts. It also gave me the opportunity to grow a loyal patient base with little cost. And now I have the chance to open my own nondispensing practice in a large power center not far from where I live. | WO |

Want to share your views? Email wovoicesonline@gmail.com to be part of this or our WO *Voices podcast series.*

Her understanding of light and perception make her a better artist, she says.

Percentage of Women in Class of 2022 Rises to 69%

The percentage of women entering North American schools and colleges of optometry this fall has increased to 69 percent, compared to last year's 66 percent. Across all schools, overall enrollment in the class of 2022 is 40 fewer students than enrolled in the fall of 2017. | WO |

School		2018 total	# of women	% of women
ICO	Illinois College of Optometry	161	117	73%
Indiana University	Indiana University School of Optometry	65	48	74%
	Inter American University of Puerto Rico School of Optometry	45	29	64%
MCPHS University	MCPHS University School of Optometry	59	37	63%
Ferris State University Michigan College of Optometry	Michigan College of Optometry, Ferris State University	38	19	50%
	Midwestern University Arizona College of Optometry	56	26	46%
	Midwestern University Chicago College of Optometry	60	43	72%
New England College of Optometry	New England College of Optometry	129	103	80%
NSU OCO	Northeastern State University Oklahoma College of Optometry	28	20	71%
NSU Nova Southeastern University College of Optometry	Nova Southeastern University College of Optometry	105	69	66%
The Ohio State University College of Optometry	The Ohio State University College of Optometry	69	47	68%
Pacific University of Oregon	Pacific University College of Optometry	93	56	60%
Salus University Pennsylvania College of Optometry	Salus University Pennsylvania College of Optometry*	145	105	72%
Marshall B. Ketchum University	Southern California College of Optometry at Marshall B. Ketchum University	104	65	63%
Southern College of Optometry	Southern College of Optometry	133	78	59%
State University of New York College of Optometry	State University of New York College of Optometry	100	73	73%
UAB School of Optometry The University of Alabama at Birmingham	University of Alabama at Birmingham School of Optometry	42	33	79%
Berkeley School of Optometry	University of California, Berkeley, School of Optometry	65	53	82%
University of Houston College of Optometry	University of Houston College of Optometry	101	73	72%
University of the Incarnate Word Rosenberg School of Optometry	University of the Incarnate Word Rosenberg School of Optometry	67	46	69%
UMSL Optometry University of Missouri–St. Louis	University of Missouri, St. Louis, College of Optometry	42	23	55%
Université de Montréal École d'optométrie	University of Montreal School of Optometry	46	42	91%
University of Pikeville Kentucky College of Optometry	University of Pikeville-Kentucky College of Optometry	63	41	65%
University of Waterloo Faculty of Science School of Optometry & Vision Science	University of Waterloo School of Optometry	90	63	70%
Western University College of Optometry	Western University of Health Sciences' College of Optometry	85	67	79%
	TOTAL:	1,991	1,376	69%

*Salus PCO Accelerated Scholars Optometry Program (class of 2021) Total class size: 14. Male: 3, Female: 11 (not included in the count above)

Source: North American schools and colleges of optometry as of September 2018

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