

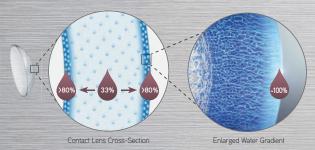


UNIQUE WATER GRADIENT

THIS IS WHY contact lenses have reached a new era in comfort.

DAILIES TOTAL1® Water Gradient Contact Lenses feature an increase from 33% to over 80% water content from core to surface* for the highest oxygen transmissibility, and lasting lubricity for exceptional end-of-day comfort. 1, 2, 3

The First And Only Water Gradient Contact Lens



UNIQUE WATER GRADIENT LASTING LUBRICITY

Features different surface and core water contents. optimizing both surface and core properties²

Ultrasoft, hydrophilic surface gel approaches 100% water at the outermost surface for

OUTSTANDING COMFORT

END-OF-DAY COMFORT

exceptional comfort from beginning to end of day3

exceptional lubricity4

Let your customers experience the DAILIES TOTAL1® contact lens difference today.

Lasting lubricity for



PERFORMANCE DRIVEN BY SCIENCE™



WATER CONTENT (%)



^{*}In vitro measurement of unworn lenses.

1. Based on the ratio of lens oxygen transmissibilities among daily disposable contact lenses. Alcon data on file, 2010.

2. Based on critical coefficient of friction measured by inclined plate method; significance demonstrated at the 0.05 level. Alcon data on file, 2011.

3. In a randomized, subject-masked clinical study, n=40. Alcon data on file, 2011.

4. Angelini TE, Nixon RM, Dunn AC, et al. Viscoelasticity and mesh-size at the surface of hydrogels characterized with microrheology. ARVO 2013;E-abstract 500, B0137.

See product instructions for complete wear, care and safety information. © 2013 Novartis 04/13 DAL13097JAD

Shout **Out**

The Cycle of New Beginnings

or every ending, there's a new beginning. That seems like an appropriate thought as you turn the pages of this issue of Women In Optometry (WO) magazine, particularly when you see the smiling



Marjolijn Bijlefeld

faces of the top graduates. Most of these members of the class of 2013 are putting away their books and tackling the lessons that come with being a professional optometrist—in whatever setting they've chosen.

The column next to this shows another new beginning, too. Since **Dr. Dori Carlson** was elected to the American Optometric Association Board of Trustees in 2004, the future of the profession has been a major focus for her. Her term expires this month, and WO would like to thank her for her dedication and wish her luck in filling up all that found time.

The new beginnings represented in this issue are exciting. The cover story with Dr. Laura Armstrong shows what enthusiasm, research and energy can do to help a practice start strong. Others have shared their stories with us, whether they are starting up, starting over or simply finding new ways to thrive in today's environment.

WO is unveiling its own cyclical change with our revised design. Let us know what you think.

Marjolyn Bylfeld

Marjolijn Bijlefeld, Director of Custom Publications Practice Advancement Associates mbijlefeld@jobson.com

Leaving a Legacy Beyond an Asterisk

By Dori M. Carlson, OD*

s I come to the close of my time on the American Optometric Association (AOA) Board of Trustees, I cannot help but look back and ask, "Did I make a difference?" Being the first woman to serve as president of the association is a legacy attained purely by gender. However, I wasn't content for that to be my only legacy.

In 2005, I was in New York City when we launched InfantSEE® on the Today Show with President Jimmy Carter. It was a very proud day to be an optometrist and dream of the difference we were going to make for children's vision initiatives. In those days, health care reform wasn't even on the radar. A few vears later. I was instrumental in hosting a Children's Vision Summit that brought together 32 national children's health and education organizations and large employers to sign a statement supporting a comprehensive eye exam as a foundation for children's eye care. Fast forward to my year as president and the many times I was in Washington, D.C., educating policy makers about the difference between an eye exam and a screening. In the end, AOA was successful in securing an eve exam for kids as a covered essential health benefit in all health plans in and out of the exchanges. Because

of those efforts, millions of children will have access to care when they didn't have access before.

And then there was the Dori 20/20 School Tour. I



Dr. Carlson appeared on the June 2011 WO cover.

visited all 20 optometry schools in 20 months to motivate students to be active in our profession. I encouraged them to transition from a student member of AOA to an active member upon graduation. I met so many incredible students—future colleagues-on my travels that I am quite confident that the future of our profession is in good hands.

So to those who elected me to the AOA Board, I thank you. Thank you for putting your trust in me over the past decade. I like to think I lived up to the challenge I've issued to students over the past two years: leave optometry a little better than how you find it. WO

*Dr. Carlson became the first woman president in the 113-year history of the American Optometric Association in June 2011.



JUNE 2013

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Address advertising inquiries to Scott Tobin, advertising production manager, Jobson Professional Publications Group, 11 Campus Blvd., Suite 100, Newtown Square, PA 19073, at stobin@jobson.com or call 610-492-1011.

Publisher: Al Greco

Executive Editor: Roger Mummert

Director of Custom Publications. Practice Advancement Associates: Marioliin Biilefeld Associate Editor: Maggie Biunno

Creative Director: Stephanie Kloos Donoghue

Graphic Designer: Barbara W. Gallois

Comments on Women In Optometry can be sent to mbijlefeld@jobson.com 540-899-1761 or fax 540-242-3438

Advisory Panel



Naheed Ahmad, OD



Ann M. Hoscheit, OD Gastonia, N.C.



Elise Brisco, OD, Los Angeles, Calif.



Louise Sclafani, OD, Chicago, III.



Kimberly K. Friedman, Moorestown, N.J.



Charlotte Tlachac OD, FAAO Alameda, Calif.

Congratulations Class of 2013

ach year, WO acknowledges those ODs who graduate with the highest academic ranking. This year, 16 women earned top honors from North America's 22 optometry schools and colleges.

Chelsea Richards, OD, was honored as valedictorian at Ferris State University

Michigan College of Optometry with a 4.0 GPA. From Lake Orion. Mich., Dr. Richards will become an associate optometrist at the Eye Center of Lenawee in Adrian, Mich.



Illinois College Dr. Richards of Optometry's top graduate in the class of 2013 was Ashlev Roehl, OD, of Algonquin, III. Dr. Roehl plans to practice primary care optometry in the Chicagoland area after graduation.



Dr. Roehl

Stephanie Ramdass, OD, of Toronto, Ontario, graduated at the top of the class at Inter American University of Puerto Rico School of Optometry. Dr. Ramdass will spend the next year in a cornea and contact lens residency.



Dr. Ramdass

🖈 Erika Anderson, OD, of Wyndmere, N.D., was named the top graduate of Midwestern University Arizona College of Optometry's first graduating class. Dr. Anderson will work in Chinle, Ariz., providing eye care with Indian Health Services.



Dr. Anderson

The New England College of Optometry Class of 2013 valedictorian was Sharlette Liezl So Saldana, OD. Dr. Saldana, of Los Angeles, will complete a residency at

the San Francisco VA Medical Center following graduation.

Northeastern State University Oklahoma College of Optometry's top graduate. Megan N. Kirkpatrick, **OD**, of Tulsa, Okla., will fulfill her residency training at Child and Family Eye Care Clinic in Wichita, Kan.



Dr. Kirkpatrick

At Southern California College of Optometry, **Mallori** Aschenbrenner, OD. of Minot, N.D., graduated at the top of her class. She is joining her sister in her Denver practice, where Dr. Aschenbrenner eventually plans to become a partner. She'll also work elsewhere.

Southern

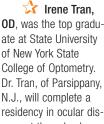
College of Optometry



Dr. Aschenbrenner

recognized Ashley Lynn Helton, OD, of luka,

Miss., as its 2013 valedictorian. Dr. Helton looks forward to a career in pediatric optometry.





Dr. Helton

of New York State College of Optometry. Dr. Tran, of Parsippany, N.J., will complete a residency in ocular disease at the school. At University



Dr. Tran

of California, Berkelev. School of Optometry, Desiree Cadiz, OD, was named the Class of 2013 Beta Sigma Kappa (BSK) Silver Medalist, an honor which recognizes a graduate who demonstrates outstanding academic achievement, excellence in and enthusiasm for clinical care and dedication to



Dr. Cadiz

BSK, the school and the profession of optometry. Dr. Cadiz, of Ventura, Calif., will focus on primary care and low vision during a residency

Women In Optometry would also like to recognize the men who graduated at the top of their optometry school's class of 2013.

Indiana University School of Optometry-Michael Klein, OD

Nova Southeastern University College of Optometry—Andrew Valenti, OD

The Ohio State University College of Optometry—Matthew Cody Kidd, OD

Pacific University College of Optometry—Christopher Lowe, OD

Pennsylvania College of Optometry at Salus University—Joseph Edward Ellwood, OD

University of Alabama at Birmingham School of Optometry-Matthew James Davis, OD

at the VA Palo Alto Health Care System.

Samantha S. Rieger, OD, of Basking Ridge, N.J., was named valedictorian of her class at the Rosenberg School of Optometry, University of the Incarnate Word. Dr. Rieger has recommissioned as a captain in the U.S. Army and is looking forward to providing eve care for service members and their families while proudly serving her country.



Dr. Rieger



Dr. Perry

Courtney Danae Perry, OD, of Ballinger, Texas, was head of the class of 2013 at the University of Houston College of Optometry. Dr. Perry will join a Plano, Texas, practice as an associate, specializing in pediatrics.

University of Missouri, St. Louis, College of Optometry's top graduate, Caryn La Buda, OD, of Joliet, Ill., will take a residency position at the Marion VA.

At the
University of Montreal
School of Optometry,
Noémie Jean-Louis,
OD, of Montreal,
Québec, graduated at
the top of her class
and held the role of
class president. She
plans to complete a
residency in rehabilitation of the visually
impaired.

Jessica Marie Witzel, OD, of Saskatoon, Saskatchewan, received the honor of being the valedictorian at University of Waterloo School of Optometry. Dr. Witzel plans to work in a full-scope private practice in the prairie provinces, focusing on her interests in interprofessional communication and ocular disease with systemic association.



Dr. La Buda



Dr. Jean-Louis



Dr. Witze

Western University of Health Sciences' College of Optometry's top

graduate Monique Nadine Kenien, OD, plans to return to her hometown of Los Angeles to practice in the area. In a few years, she plans to join forces with her father, a dental surgeon, to create a one-stop eye and dental practice. WO



Dr. Kenien

Newest Groups of Graduates

he three newest optometry schools celebrated their inaugural graduating classes this year. Midwestern University Arizona College of Optometry; Rosenberg School of Optometry, University of the Incarnate Word; and Western University of Health Sciences' College of Optometry each had a female OD as their top graduate of 2013. WO

Allergan and Women of Vision Invite You to Afternoon Tea

Energy Management: Bringing Your Full and Best Self to Your Patients, Family, Friends, and Colleagues

Learn how to achieve higher performance across all facets of your life through spiritual alignment, mental focus, emotional connection, and physical energy.

Presenter:

Marty Babbington, Certified Trainer, Human Performance Institute

Featured Panelists:

Millicent L. Knight, OD • Margie R. Recalde, OD • Glenda B. Secor, OD, FAAO • Jennifer L. Smythe, OD, MS, FAAO

June 27, 2013, 3:00-4:30 PM, San Diego Marriott Marquis & Marina, Marina Ballroom D

Program content intended for women.

Register online at: www.OptometrysMeeting.org (Event Code 0175)







Focus

on Outcomes

By JeanMarie Davis, OD, FAAO

Sometimes New Means Really, Truly New

Water-gradient lens material combines the benefits of oxygen transmissibility and comfort

DAILIES TOTAL(1)

enry Ford is quoted as having said, "If I asked my customers what they wanted, they would have asked for a faster horse." That's because they couldn't imagine an automobile. "A faster horse" has come to represent the rather unimaginative improvements in a manufacturing process or products. But faster-horse thinking doesn't lead to technological breakthroughs, such as space shuttles and tablet computers. It takes out-of-the-box engineering and research to achieve these kinds of developments.

So it's no surprise that if most contact lens customers were asked what they want, they'd respond similarly. They wouldn't dream up what Alcon is about to offer them—DAILIES TOTAL1® contact lens, an entirely new water-gradient contact lens that features a silicone hydrogel core and a gradient area where the water content of the lens increases the closer it comes to the surface of the contact lens. The silicone hydrogel center is 33 percent water. It provides a 156 Dk/t, the highest oxygen transmissibility of any daily disposable contact lens. But this is much more than a daily disposable silicone

hydrogel contact lens. And it's not even a silicone hydrogel material with a more comfortable coating.

The water-gradient material allows the water content to increase in gradient fashion, moving toward 80 percent at the surface' and

even approaching 100 percent at the very outer surface². In effect, this lens provides the pros—and avoids the cons—of both silicone hydrogel and hydrogel contact lenses.

For contact lens manufacturers, comfort has been the holy grail. That's no small wonder. (Nearly one-in-six contact lens wearers drop out of contact lenses each year.³) Overall, the contact lens-wearing population has not diminished because a large number of new contact lens wearers come into the marketplace each year. Imagine the shift that could occur if the new wearers kept coming—and the current wearers didn't drop out.

Silicone hydrogel has certainly had an impact on the contact lens market, bringing a range of spherical, toric and multifocal contact lenses that provide greater oxygen transmissibility. That breathability represents a major step forward for ocular health. To make the naturally hydrophobic silicone hydrogel material more comfortable, manufacturers have worked with a variety of surface treatments.

But DAILIES TOTAL1® contact lens is not another silicone hydrogel lens. It has attributes, such as the extremely high water content at the surface, unlike those of any previous contact lens.

So how do we communicate this development? The answer depends on the audience. When speaking to other practitioners, it's important to point out that the watergradient technology is not a surface treatment. This is an entirely new material and technology.

With patients, putting these lenses on their eyes becomes the defining moment. Time and again, people who try this lens say they cannot feel it—not upon insertion and not hours later. Telling patients that there's a revolutionary new water-gradient lens available may not mean that much to them. But once a DAILIES TOTAL1® contact lens is on the eye, patients will begin to grasp what this lens can do for them: provide excellent vision and exceptional comfort all day.

Based on the experience with this lens in Europe and early reaction here in the U.S., it's reasonable to think this lens could have an even greater impact on the market than silicone hydrogel lenses did. The demand for this lens in Europe is tremendous, and the defining moment that patients say they

want the lens, is when they've tried it.

To help practitioners navigate the initial launch of DAILIES TOTAL1® contact lenses in their practices, here are some strategies.

First, try the lens yourself and with your key contact lens technicians. It's important for you to experience it so you can share that.

Identify patients whose spherical refractive error matches the launch parameters.

Identify those patients in that group who have had any challenges with discomfort. This group can be highly motivated to find a contact lens that resolves these issues. Expect a considerable portion of these patients to migrate to this water-gradient lens—and be thrilled with it.

But don't relegate the lens to a problem-solving niche. Consider it, too, for your first-time contact lens patients. Your patients really will thank you for it.

¹ Pruitt J, Qiu Y, Thekveli S, Hart R. Surface Characterization of a Water Gradient Silicone Hydrogel Contact Lens. Poster presentation May 10, 2012.

² Angelini TE, Nixon RM, Dunn AC, Unuena JM, Pruitt J, Sawyer WG, Viscoelasticity and mesh-size at the surface of hydrogels characterized with microrheology. MAE, University of Florida, Gainesville FI.

³ Rumpakis JR. New data on contact lens dropouts: An international perspective. *Rev. Optom.* 2010 Jan;147(1):1-4

See product information for complete wear, care and safety instructions. (RX only)



Tip

emind patients that they have to make sure their fingers are dry when removing DAILIES TOTAL1® contact lenses. A wet finger will slide right off a lubricious contact lens.

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

Sponsored by Alcon DAL13206AD

Know Your Patients

Study your demographics to understand what services and products to offer

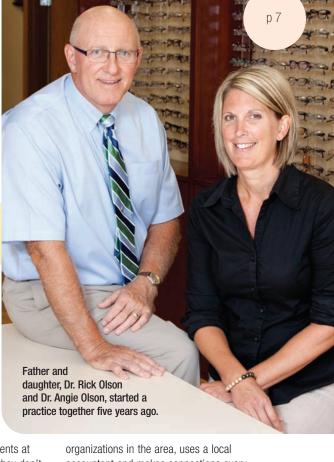
then **Angie Olson, OD**, decided to open a practice with her father Rick Olson, **0D**, in 2008, she was excited but a bit apprehensive. They would be starting cold in a part of Madison, Wis., that was saturated with optometrists who had been there for years. And simultaneously, she planned to take over the Waupun office of a retiring doctor, nearly 70 miles away. Concerns about changes in managed care, competition from other providers and the economy permeated her thoughts. Dr. Angie Olson knew that many of her father's patients from his long-time Shopkoaffiliated practice would follow him to the new Madison office, and the other office had a small established patient base already. But she wanted to make sure she truly understood the two unique communities so she could continue to serve the patients for years to come.

Olson Eye Care's Madison location is in a college town where professors, young professionals

from local software companies and families are frequent patients. Originally, the Waupan office had more of an aging population for medical eye care, yet Dr. Olson changed that demographic a bit by introducing a younger crowd to the practice. "It's balancing out," Dr. Olson says. "Bringing in families and children is important because that's the future of your practice."

Out a bit further into the country, patients at the Waupan location appreciate that they don't have to travel far for high-quality care. "They can get everything done here at a price they can afford, so they feel they can come to the independent practice and support our small business."

That's important to Dr. Olson, who tries to work with small businesses in the community whenever she can. She networks with other



organizations in the area, uses a local accountant and makes connections everywhere she goes. She describes the opportunity to have success in both locations as a blessing, one that has been able to support her family and her father.

The dedication to the communities where they practice creates a familial atmosphere. "Patients feel cozy here, and they love coming here to spend time with us," Dr. Olson says. It's important that patients never feel rushed through their exam or browsing in the dispensary, one of Dr. Olson's favorite parts of the business. She loves trying new frame lines, as she forms partnerships with her frame vendor representatives. She appreciates the advice and recommendations these experts bring to the practice. While providing a wide selection of frames can be costly, the process gets easier each time, and Dr. Olson says she is always learning something new about how to improve. "Frame inventory is a challenge that no one trains you for in school. But if you find really good reps, they will help you."

For additional suggestions, Dr. Olson turns to her staff, which has grown from just one individual to eight employees in the past five years. The team members discuss popular styles and brands for eyeglasses and sunglasses during weekly staff meetings. "They are keeping up with trends constantly, and they let me know where we are short and what we need to have," she says. "They are involved with patient care every day, so they know what our patients want." Wo

Father-Daughter Family Business

hough Dr. Angie Olson didn't immediately join her father, Dr. Rick Olson, in practice following optometry school, it was always a part of her plan. "He is the reason I wanted a career in health care," she says. "He always came home with positive things to say about his work." Yet, she wanted to spend a few years on her own learning about other opportunities in optometry, since her father had always practiced in a corporate-affiliated setting. She spent time at an ophthalmologist group and a TLC Laser Eye Center, two wonderful networking opportunities.

When father and daughter came together in 2008, Dr. Angie Olson knew it would work. "I've learned a lot from his demeanor with patients and how he handles situations," she says, adding that it's something she's admired since she was young. "We share the philosophy to treat every patient like family." She expects that her father will be cutting down his hours in the coming years, so she allows him to focus on patient care while she works with her husband on the business and financial side of the practice. Dr. Olson plans to continue growing both offices after her father's retirement, which will mean bringing on an associate doctor in her future. And Dr. Olson hopes that at least one of her two young children may be interested in an optometry career. She would welcome any or all of them to the family business. Will

Mentoring Program Prepares Young ODs for Business

Four participants say the program provided business confidence not learned in classrooms

he Colloquium for Women in Optometry at Indiana University School of Optometry was founded in 2008 by graduates and clinical faculty members Polly Hendricks, OD, and Lilien Vogl. OD, FAAO, with the assistance of professor Jane Ann Grogg, OD, to mentor second- and third-year students. During its meetings and retreats, members of the group have learned more about practice management, business dinner etiquette, marketing, customer service and even how their personality can help them succeed in their specific role in a practice. Four founding members say the program made them more business-savvy.

Joined Practice with More to Offer

Elizabeth Roush, OD, recalls jumping at the chance to join the mentoring program.

"I wanted a better understanding of what it's like to practice optometry," says Dr. Roush, now a thirdgeneration OD, "I wanted to have peers and veterans to network with while in school and now in practice," because she knew that she



Dr. Roush

would need more than her foundation of clinical knowledge to be fully prepared and successful. Dr. Roush became president of the Colloquium for Women in Optometry in its second year, and after graduation, joined the practice started by her grandfather in 1945, Drs. Roush and Will

Plunge in and Learn

r. Elizabeth Roush shares an important lesson she learned from her days with the Colloquium for Women In Optometry: where you begin may not be where you end up. Even if the first job, or even the first few, are not ideal, "every experience is what you make of it and you should always walk away better. You can always learn from each opportunity, even if it's what not to do!" WO

Optometrists, Inc. She practices in its three clinic locations with her father, her husband and another practice partner. Dr. Roush also spends two days a week as a medical optometrist in a surgical center and is very involved with many community organizations and optometric societies. For her, the group empowered her to believe in all that she could accomplish as a woman OD. "With time management and focus, a female can have it all—a successful practice and a family by balancing her needs and wants."

Learned Essential Business Skills

Heather Russ, OD, agrees, "There isn't much on the business side taught in school, and that is when a group like the Colloquium

for Women in Optometry is essential." After graduation, Dr. Russ became an associate doctor at Northside Eyecare's two office locations in Evansville and Oakland City, Ind. In January 2012, when a third location opened in Haubstadt



Dr. Russ

called South Gibson Eyecare, Dr. Russ became an equal partner in the new office.

Developed Understanding of Business Transactions

Jericho Quick. OD, joined a doctor in her small-town practice as an associate, and she hopes to become a partner in the Vincennes,

Ind., practice one day. She frequently refers to the notes she took during meetings of the Colloquium for Women in Optometry. "It was nice to have those conversations early so you know where to start with con-



Dr. Quick

tracts, negotiations, insurance plans and advertising," Dr. Quick says. She is regularly in contact with her former classmates to discuss these types of business transitions.

Crafted Long-term Goals

For Tanya Jones-Greenwood, OD, participating in the program showed her the light at the end of the tunnel past all of the studying, classwork and exams. "I was ready to start thinking about the bigger picture," she says. At

one point, program participants conducted personality trait testing-and Dr. Jones-Greenwood found that her strength was in leadership. After graduation, she became an associate at Prairie Vision Centre, her hometown Dr. Jones-Greenwood optometrist's office in



Wainwright, Alberta. Since then, she has purchased ownership shares in the practice. "The group helped me realize some of the different struggles you can encounter when running a business, so it wasn't a surprise when I took on this business venture," Dr. Jones-Greenwood explains. For example, staff management was a frequently discussed topic and something Dr.

> "It was nice to have those conversations early so you know where to start with contracts. negotiations, insurance plans and advertising." —Dr. Jericho Quick

Jones-Greenwood encountered first-hand in practice ownership. She and her practice partner share those responsibilities, while Dr. Jones-Greenwood is also in charge of the financial accounting and budgeting for the practice. "The notes from school are very applicable to my life now, and I can fall back on those resources or my classmates if I have any questions."

These ODs all say that they consider the program participants and mentors as friends and advisers. In fact, two of them-Dr. Roush and Dr. Russ—have become mentors themselves. W0

hen Laura Armstrong, OD, was in her second year at Pacific University College of Optometry, a trip to the American Academy of Optometry in San Francisco redirected her focus. "I had big plans for being a specialist," she says. "I was going to focus on research, do a residency in retinal ocular diseases and then work at a LASIK or cataract surgery center of some renown."

Prior to optometry school, she

had worked in several optometric practices as an optician, technician and doing some medical billing. "I knew what the independent practice side was like, so I really wanted to find out what the medical side was about." It intrigued her, but as she took in the CE and classes at that Academy meeting,



Dr. Armstrong's playful personality shines through along with her business acumen.

says, looking back on the process. The couple found a location on Portland's Alberta Street, a pedestrian-friendly hub of an ecology-minded community. The city of Portland is comprised of many tight-knit neighborhoods, creating a

small-town feel within the city. "Most people around here walk or ride their bikes to work. They don't want to use their cars after work, either," she says. While there was one optometric practice just two miles away, neighborhood residents often tell her how happy they are that there's an option for them in the area.

The practice fits right in with its small carbon footprint. Even before the practice opened, it had a booth at local street fair events, handing out infused water and children's sunglasses. She and her husband have participated in Earth Day cleanup events in the community. And in this

area, it was easy to find contractors who understand green building principles, such as incorporating energy efficient lighting and reclaimed wood in the display cabinetry in the optical. Not surprisingly, it opened as an all-paperless practice.

Dr. Armstrong, from her experience as an optician, understands the importance of merchandising and customer service in the optical. In nice weather, as customers line the street for a neighboring ice cream shop, the sunwear and eyeglasses displays draw them into Alberta Eye Care. "My opticians are wonderful about informing customers that it's important to have an updated prescription." Adult patients are offered a glass of wine or a beer after they've had their eyes examined and are looking for eyewear. They're encouraged to bring a spouse or a friend to make the

Continued on page 10



LED lighting and reclaimed wood are part of the small environmental footprint in Dr. Armstrong's new practice.

Dr. Armstrong suddenly realized that she wanted a work with patients on a more personal level. "What I really wanted to do was help people stay healthy, rather than work with them after damage occurred."

She phoned her husband, **James**, who holds an MBA, and told him, "I want to open my own practice. I want to do it in Portland, and I want to do it differently." His response: "I'll start writing the business plan." In fact, he did more than that. He joined the Alberta Main Street organization as a board member, helping him understand the demographics and the community needs even better.

On January 14, Alberta Eye Care opened its doors. The path was relatively easy, she

Changing Direction

hen Dr. Laura Armstrong decided to pursue primary care instead of specialty care, it didn't really change her course of classes too much. "I tried to do my rotations in more medical settings. I completed an internship at a VA clinic where I saw a lot of disease, and I worked with cataract and LASIK providers. I wanted to make sure I was fully prepared to provide the best primary care. It made me embrace every minute of learning," she says.

Three-year Commitment Turns into Career Choice

ine days after her graduation from Pennsylvania College of Optometry at Salus University in 2007, Syreeta Lawrence, OD, FAAO. became a commissioned officer with the U.S. Air Force. Now she's a major in her third year of serving as the sole eye care provider at Joint Base Charleston, a South Carolina base comprised of a merged Air Force base and U.S. Navy support center with about 20,000 people connected to the base.

As the only optometrist on the base, she sees active duty and retired airmen and their dependents. In a way, it's much like any community-based primary care practice—except that her community is the base. She provides refractive eye care, diabetes monitoring and urgent care, typically seeing about 14 patients a day.

The optometry clinic is part of a larger clinic, with primary care medicine, an immunization clinic and a pharmacy. Dr. Lawrence says that Air Force ODs are a close group. "It's easy to start working with someone else. I have a network," she says, noting that if she has questions, she can turn to either other Air Force ODs she has met or to the Navy

Dr. Lawrence juggles duties as

an Air Force major, military eye care provider and wife and

> ophthalmologist or Navy OD at the Joint Base.

It's exciting. too, that each base

offers a different experience. At Langley Air Force Base in Hampton, Va., where she went immediately after graduation, she worked in more of a hospital setting. "Military optometry is all I know. My father was in the military, so I grew up as part of the military health care system," she says. "You can't miss what you don't know," she says. And right now, she feels no longing to explore the civilian world of optometry. "I'm driven to help the people who are in the military who make so many sacrifices. This is a way to give back."

Air Force orders typically last about three or four years, so she expects that she'll be given new orders fairly soon. "I wish I knew where I was going," she says, laughing. She'd

> like to do an overseas assignment or a residency through the VA. But she also must consider the needs her husband, Shawn Lawrence, OD, a civilian OD working for National Vision, Inc., and their 4-year-old son. "I can't just choose anywhere in the world, so it's a give-and-take."

Dr. Lawrence's original commitment to the Air Force, as the recipient of a health professionals schol-

arship, was for three years of active duty service. That was six years ago. With her recent promotion in rank and the opportunities to participate in humanitarian missions—something that's difficult to do when she's the only Air Force OD on base—she's fairly certain she'll commit to a career in the military. Wo

COVER STORY

An Idea Takes Shape Continued from page 9

shopping experience more fun. The practice showcases artwork from local artists and stays open late on Thursday evenings for art exhibits.

While the optical needs to be retail-oriented and fun—a place people want to be—the exam area needs to be very professional. That's one reason Dr. Armstrong makes patient education a priority. "I want to help patients take better care of their own health so that when we see them every year for their annual eye exam, we can confirm that they're compliant with the things they need to do to keep their eyes healthy." Dr. Armstrong also holds a Master's in Education with an emphasis in vision and functional learning.

The strategy is paying off. "We're way above target," she says after her first few months in practice. "We seem to be on track to be a half-million-dollar practice in one year," even with construction and other delays that postponed the opening. Dr. Armstrong believes that the couple's presence in community events created interest. "A lot of people waited for us to open." Laying the groundwork and being visible and accessible helped the practice hit the ground running. W



Dr. Armstrong and her husband, James, an MBA, researched the community in planning an office that would reflect the pedestrian-friendly, ecology-minded neighborhood.



Dinner Conversation Launches

A Specialty Career

wenty-seven years ago, **Debby**Feinberg, **OD**, was on a double date
with her husband, her otolaryngologist
brother-in-law and his date. The brother-



Dr. Feinberg

in-law picked up a loose prism he carried to help him see. Dr. Feinberg thought it was unusual, and asked him to come in for an exam. "I thought I could incorporate the prism into his eyeglasses," she says, and she did. Dr.

Feinberg was then in practice with her father, **Paul Feinberg, OD**.

Later, her brother-in-law started referring patients with dizziness to her. "I think you can help them the way you helped me," he told her. He had often felt off balance, uncoordinated and struggled with reading. Dr. Feinberg's prescription relieved all of that.

This was the start of her work in neurovisual optometry, specifically vertical heterophoria (VH), a vertical misalignment of the eyes that can contribute to fatigue, dizziness and more. Patients can have VH congenitally or develop it after a fall or traumatic brain injury (TBI). This new path in her career took off quickly as word spread. Her brother-in-law alone has referred about 1,000 patients to her over the past 18 years, and she now has a network of about 100 referring practitioners. Her husband, **Mark Rosner, MD**, an emergency physician, started sending migraine patients who frequently visited the ER.

In 2004, she opened a specialty prac-

tice, Vision Specialists of Birmingham, which became Vision Specialists of Michigan when she moved it to Bloomfield Hills in 2011. She schedules about eight patients a day, with a typical exam lasting at least an hour or two. Her father, now 87, has joined her as one of her three associates.

In 2005, after the *Detroit*Free Press ran a story on her work, the floodgates opened.

Patients would call, asking "How did you know my secret? I've been suffering from this for

Spreading Knowledge

olored pins on a giant map on the wall at Vision Specialists of Michigan identify patients to the practice from 47 states, Canada, England and France. Dr. Debby Links States

Li

Dr. Feinberg's specialty practice draws patients from far away, as pinpointed on this map on her wall.

Feinberg wishes they didn't have to travel so far. "They should have someone in their hometown to help them." So she is creating an educational institute where she can teach others what she has learned about neurovisual optometry in a four-day course that includes a step-by-step instruction manual. Her student-colleagues will also receive a toolbox of specialized equipment that she and her father developed.

Dr. Feinberg, her husband, her brother-in-law and a traumatic brain injury (TBI) specialist, who once suffered from vertical heterophoria, formed a research team that presented internationally and published its findings. One of their reports, *A Retrospective Analysis of Vertical Heterophoria Treatment and Amelioration of Post-Concussive Disorder Symptoms Utilizing a Multifaceted Assessment Battery,* found that the TBI patients in this study experienced a 72 percent reduction of their persistent post-concussive symptoms (particularly dizziness, headache and anxiety) in the three months following the addition of prisms in their eyeglasses, which ultimately helped them progress faster through occupational and physical therapy. We

10 years." TBI patients began arriving at her practice after Dr. Feinberg diagnosed a TBI specialist with VH. "They responded beautifully to the prisms; some were able to start walking again without using their cane or walker," she says, and their anxieties of falling disappeared when the dizziness did. Dr. Feinberg now also studies the link between VH and anxiety. Her husband presented a case series of 18 patients at the Anxiety Disorders Association of America Annual Meeting in 2012, noting that the patients in the study experienced an 80 percent

reduction of symptoms. Some of these patients were even able to be weaned off anxiety drugs as a result of vision correction.

Dr. Feinberg wanted to reach patients directly by writing a book about VH. She got her wish when by chance her husband sat next to an author, **Sherry Brantley**, on a flight home from the American Optometric Association's 2011 Optometry's Meeting. The three collaborated on *If the Walls of My Exam Room Could Talk: Stories of Triumph Over Vertical Heterophoria*, a collection of personal

stories from Dr. Feinberg's patients published in February. Dr. Feinberg hopes the book will create greater awareness that this unusual combination of symptoms is often misdiagnosed, but easily treated.

Dr. Feinberg held a booksigning event in May, inviting patients, the community and those who shared their stories. She wants to release an audio version of the book, as well as an e-reader friendly version. For more information, visit vsofm.com/book. W0

Searching for a Patient

sually, patients seek out their doctors. Yet a few years ago, when Dr. Debby Feinberg read a story about a soldier who was hurt in a blast injury and was still suffering with headaches and other symptoms, she went looking for her. She found the soldier's father in a White Pages search and asked him to forward the vertical heterophoria symptom questionnaire (VHSQ) on Dr. Feinberg's practice website. After reviewing the results, Dr. Feinberg encouraged the soldier to make the trip from Hershey, Pa., and the persistence paid off. The soldier's new eyeglasses made her headaches go away. Wo

Annette Williamson, **OD**, became the first female optometrist to hold the rank of colonel in the U.S. Air Force. Dr. Williams is the Air Force Surgeon General consult-



ant for optometry, and she serves as optometry flight commander for the 559th Medical Operations Squadron in Texas.

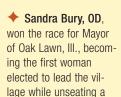


Dr. Hoover

♦ Walmart named Paula Hoover, OD, of Frankfort, Ky., as its Independent Doctor of the Year.

Karen Rosen, OD, of St. Louis, was featured in the

Spring 2013 issue of UMSL Magazine.





Dr. Rosen

two-term incumbent.



Dr. Bury

 Western University of Health Sciences' College of Optometry Founding Dean Elizabeth Hoppe, OD, DrPH, will be one of nine women to be honored by the YWCA San Gabriel Valley during

its 29th annual Women of Achievement

Awards. This year, the award ceremony recognizes Women of Achievement in the Field of Education: Honoring Passion, Dedication and Achievement.

→ Jamie King, OD, of



Dr. Hoppe

Rockford, III., was recognized for being the Vision Source practice with the largest volume and dollar percentage growth in



Dr. Kina

2012. The practice of Branning Hollis, OD, and Mona Kardani, OD, in Valrico, Fla., was recognized for having the largest volume growth. The awards were presented at The Exchange, the Vision Source annual meeting in April.

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

- In the January issue of Optometry Times, Jane Manly, OD, was recognized for her work as an optometrist, as well as her passion for the Steel City Roller Derby.
- ♦ Victoria Weiss. OD. of Lake Monticello, Va., was featured in a story in The Rural Virginian on her career and her work as vice president of Volunteer Optometric Services to Humanity's Virginia chapter.





Dr. Jayne





ations Squadron, was recently awarded the 2012 Armed Forces Optometric Society Junior Officer of the Year.



also included in the Bellingham Herald's 2012 Ten Who Cared feature, which recognized her dedication to caring for her patients' overall health and not iust their eves.







annual convention, Nancy George, OD, received the William D. Pittman Leadership Award and Pat Segu, OD, was awarded 2013 Educator of the Year.

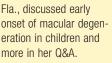


Dr. Hammonds

Lynn Hammonds, **OD**, of Birmingham, Ala., became secretary of

SECO's Council of Officers.

In the Know Your Health Pro section of Florida Today, Anne Gregas, OD, of Viera,







Dr. Gregas

Shalu Pal, OD, of Toronto, Ontario, recently spoke with students at Pennsylvania College of Optometry about soft toric contact lenses. The web-



Dr. Smith Zolman

site optometrystudents.com caught up with Dr.



Dr. Pal

Pal after the presentation to share her best contact lens tips with this group of future optometrists. W0

Have an accomplishment you'd like to share? Send announcements to mbijlefeld@jobson.com.

Social Media Efforts

Pack a Punch

t least once a day, **Shani Elwood, OD**, hears a patient tell her that he or she heard about the Renton, Wash., practice where she works, looked it up on Yelp! or ZocDoc and made an appointment, either online or by making a phone call. She estimates there are five or six new patients coming to Eyes on the Landing every day as a result of the practice's presence on social media.

For her, that's a huge impact because she joined the practice as a part-time associate just nine months ago, shortly after her 2012 graduation from Pacific University College of Optometry. The practice is growing quickly, and she attributes much of that growth to the practice's social media presence. "We have the ideal demographic," she says, noting that the Seattle area is home to Amazon, Microsoft, Expedia and other tech companies. "People look online for information. And that's the direction where everyone's



Dr. Elwood

going. It's not just in Seattle."

The nice thing about the social media efforts is that they produce results without too much attention. The office manager reviews postings on Yelp! just in case a reviewer writes about a negative experience. In that case, the reviewer can be contacted and the situation resolved.

The practice also maintains an active Facebook

page, and another primary outreach is through ZocDoc. Setting up the account was easy; a photographer shot photos of the doctors and office, and each doctor identifies a few blocks of time each day or week when she is available for appointments made through ZocDoc. When a patient requests an appointment time, a window pops up on the receptionist's computer screen so that it can be confirmed. Even existing patients use the system sometimes because it's so convenient. If a

At least one new patient a day comes in as a result of an online search

patient calls in and asks for that particular slot, it can be removed from the list of available times.

"We know that it works," says Dr. Elwood. "I'm amazed by how many people say they've either found us through Yelp! or ZocDoc or used that to learned more about us. It's important that we're out there and easy to find." WO



Dr. Elwood says social media outreach, such as her ZocDoc page, help her build the practice.



Take Control of

n 2011, **Rhiannon Maggiore, OD**, found herself at a crossroads. She'd spent the first three years after her 2006 graduation from Nova Southeastern University College of Optometry practicing 45 minutes away from



Dr. Maggiore

home. But the commute became more challenging after the birth of Dr. Maggiore's first daughter. "During my maternity leave, my goal was to find a job closer to home," she says.

And she did.

In fact, she found three openings right in Port Charlotte, Fla., and she worked at these offices simultaneously, hoping one would blossom into a full-time position. As time ticked on, and no offer for full-time

work arose, Dr. Maggiore realized she would have to take the situation into her own hands by opening her own practice.

The concept for Maggiore Family
Eye Care was born, and a year later, Dr.
Maggiore opened her doors in October
2012. After pursuing four different locations, she finally found what she was looking
for right in her hometown. "We wanted to find

Baby on Board

ust two months after opening the doors on to her practice, Dr. Rhiannon Maggiore's second daughter was born. She turned one of her open exam rooms into a space for her babysitter to use during the three days Dr. Maggiore is in the office.

Your Future

> a location that wasn't saturated or tucked behind something else," she says. "When you are new, you need to be visible."

The office had once been an optometry office, so Dr. Maggiore didn't have much to do to fix the space for her practice. Her husband, a contractor, and her father, an electrician, were able to do much of the work themselves, as they

painted and installed new instrumentation for the office. She only needed to hire someone to complete the carpeting. The renovations took just two weeks.

Yet Dr. Maggiore is thankful she allocated a year for planning and preparation. There were staff members to hire—one she knew from a previous employer, the other she trained—and she needed to learn the ins and outs of being a business owner instead of an independent contractor. Another doctor in Florida suggested that Dr. Maggiore join the Vision Source network. She says it was a smart choice to make shortly after she signed her lease, as she asked other doctors in the network for their recommendations for products and companies. She secured purchases at great deals, and Dr. Maggiore looks forward to that benefit and connecting with other local doctors as her membership continues.

Dr. Maggiore is now focused on building up the business in the practice so that she can work in the office full-time and drop her parttime position by expanding her hours from three days a week. She has connected with the community by posting ads in the local newspaper's health section, frequently attending business card exchanges and by inviting the local Chamber of Commerce to attend her grand opening ribbon cutting. She's targeting surround ZIP codes with postcards, and by joining the panels of a large variety of vision plans, she's generating a patient base. "We've joined everything to get people in the door, because you can always go back and make cuts later," she says. W0

Serve Your Community

anielle Simpson, OD, may be a new OD, but she's already leaving a mark on her community. After graduating from Pacific University College of Optometry, she settled back near her hometown of Olympia, Wash., and became an associate doctor at Tumwater Eye Center in Tumwater. And at least once a month outside of her normal business day, Dr. Simpson can be found at the Vision Clinic at Olympia Union Gospel Mission.

The Olympia Union Gospel Mission strives to help those who are homeless get back on their feet by providing daily meals and hot showers, as well as health care and monthly haircut services. Dr. Simpson knows how important vision care can be to people's career success. "It can be a barrier to do their job if they can't afford vision care," she says. The Vision Clinic there is open Monday and Tuesday evenings, and Dr. Simpson rotates with more than 20 other health care professionals including other optometrists, dentists and primary care physicians to provide care for the homeless community. The Olympia Union Gospel Mission seeks health care professionals to volunteer their services, and Dr. Simpson learned about the opportunity during her interview at Tumwater Eye Center.

Most of those who receive services through Olympia Union Gospel Mission are homeless and provide proof of unemployment to



Dr. Simpson

receive care. Eye exams and eyeglasses are given for no cost to those who qualify, and the mission receives donations of ophthalmic lenses from the local Lions Club and frames directly from manufacturers.

Each time Dr. Simpson volunteers at the clinic, she is reminded of why the work is so rewarding. With a high no-show rate at the clinic, the schedule is frequently doublebooked, but sometimes all of the patients do show up. She remembers one patient who had to wait for quite a while one evening. "I kept apologizing, but he said, 'No, thank you so much,'" Dr. Simpson recalls. "Everyone is so grateful and goes out of his or her way to say thank you." The mission encourages patients to write a personal thank you card for the doctor. "It might be a long message or it might be a short one, but either way it's really nice," she says. "I grew up in this community, so it feels great to be able to give back." W0

Incorporate Integrative Health Care into Optometric Care

By Elise Brisco, OD, FAAO, FCOVD

raditional medicine is wonderful when a patient is sick or has a condition that needs care. But there isn't enough focus on keeping a patient well

between visits. To work toward that goal, the patient's doctors have to listen to the patient and consider the patient as a whole—not just the part of the body that is being treated.

My interest in integrative health care started with my work on staff at the Cedars Sinai Medical Center, where I co-founded the Rehabilitative Vision Clinic. We visu-

ally rehabilitate brain injured patients who have suffered from acquired and traumatic brain injuries such as strokes, motor vehicle accidents and brain tumors. I am part of a team of occupational therapists, physiatrists (rehabilitation physicians), neurologists and more. When we manage patients together, we learn from each other—and it is very exciting. I had some background on alternative medicine from personal experience, so I began to learn with my mentors, and read and study everything I could about integrative care and a multidisciplinary approach that included Eastern medicine such as acupuncture and homeopathy. I then founded an integrative, multidisciplinary wellness clinic, of which my practice is a part. Our center currently includes acupuncture, naturopathic medicine, Chinese medicine and ophthalmology.

It's important to remember that integrative medicine is not exclusionary. It doesn't need to be traditional Western medicine or ancient Chinese arts. It can be both. The best integrative approach combines options, finding the course of therapy that works best for each patient.

There's a role for optometrists in this approach. For example, in dry eye treatments, the traditional Western approach has been replacement tears, antibiotics and punctal plugs. But none of those approaches helps

> patients stimulate their own tears—a liquid that no man-made product can reproduce. But homeopathic tear-stimulation drops trigger the tearing response. I recommend these drops regularly, and with women whose dry eye symptoms are exacerbated by hormonal changes, I use them in conjunction with Omega-3 fatty acids.

The approach to treating allergies can benefit from a more integrative approach. Most allergy treatments are aimed at immunosuppression, working to suppress the release of histamines. An integrative approach



Dr. Brisco

Learn More

r. Elise Brisco will be presenting a lecture, Integrating Holistic Care and Homeopathy into the Optometric Practice, at the American Academy of Optometry in Seattle. She has also been asked to produce a training video about using homeopathy in vision care for other professionals.

The Ocular Nutrition Society (ocularnutritionsociety.org) also focuses on the role of nutrition and eve health. Wo



would be to desensitize the body to allergens through allergy shots and homeopathic allergy drops to train one's body not to overreact to the allergens. It's an immunosupportiverather than immunosuppressive—approach. As optometrists, we can determine a lot about a patient's health through his or her eyes. As primary health care providers, optometrists are poised to discuss eye and systemic health issues with our patients.

It's OK to dip your toes in the water. I'm studying to become a clinical homeopath, a process that will result in certification. I comanage a variety of conditions, and I can charge accordingly for my services. But you don't have to go that far to see the impact an integrative solution can have for your patients.

Make sure you're talking about eye health and nutrition. Discuss preventive strategies with your patients. Talk about stress management and whether recurring conditions, such as recurrent blepharitis, might be an indication of a weakness in the immune system. Be proactive about wellness care between annual exams.

Chances are high that your patients are already using some kind of integrative approach in their own health care. Maybe they're gargling with salt water when they have a sore throat. Maybe they drink chamomile tea or take nutritional supplements. Extending this approach to their eye care will not seem unusual to them. Patients want to partner with us to stay healthy. Integrative and complementary care is the fastest growing segment in health care. Incorporating holistic principles into your practice gives you more tools to treat more conditions. Wo

Dr. Elise Brisco's practice, Hollywood Vision Center, is in Los Angeles.

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