



President's Message

Would you like some cheese to go with that whine?

No thank you, is what I hear from the majority of SC OD's. That attitude of not whining about things, but going out and making things happen is what makes it such a pleasure to serve SCOPA and give back.

Without a doubt this is the most exciting time to be practicing optometry in the past 3 decades. We have the new Federal Health Care Law and a looming financial crisis that are going to collide. We have Third Party Payors looking at how to cut costs (including cutting services to optometrists) while around the corner they will be mandated to treat us equal. SC is near the front of the list of states going to expanded scope beyond just Rx writing, instead of being 39th or 40th.

Third Party Payors are looking for ways to quantify/certify the value of care given by providers. The new Health Care Law also states that providers of care receiving payment will need to be Certified on an ongoing basis.

It has been decided that Board Certification through the ABMS model will be the standard.

As SCOPA President and AOA volunteer I have read a ton about Board Certification. This week I read an email from Clarke Newman, OD in Texas. In 3 pages, it explains how Board Certification came about. If we are going to participate in BC and thrive in the process it is important to understand the following 3 pages. With minimal editing from myself here goes:

First, let me say I am not a "booster" of anything other than what is in the best interest of our patients. I do not have a dog in any other fight. I do believe, strongly, I might add, that the best way forward for all non-residency trained optometrists is the ABO process.

Second, yes, I would like to think that Diplomate status would be meaningful to the payor community, but it isn't because they have no standard by which to judge this type of certification.

The need for BC is not now, nor has it ever been, driven by optometry. The meaning of BC is not now, nor has it ever been, a referendum on what optometry thinks of itself or how we view our qualifications. The meaning of BC is not now, nor has it ever been, a reflection of our "specialty" status.

The need for BC is not now, nor has it ever been, based on some need to reflect to the public some certification.

How the public perceives optometry and the meaning of whatever certification process an individual optometrist undertakes, or chooses not to undertake, is a totally separate discussion from the need for BC relative to the medical professions and the various payors. It is vitally important that everyone participating in the BC discussion understand and accept this fact.

Over the last decade, the public and private payor communities have searched for ways to increase the quality of patient care, decrease the cost of care, standardize the delivery of care, and create accountability for doctor competence. They have done so in various ways. This effort has become known as, the "Value Driven, Patient Care Initiative." It is in this Initiative that the need for the optometric community to have BC was created.

First, they revisited the medical home concept. I will not here rehearse the in's and out's of medical home. We do not have enough time for that very complex discussion. Suffice it to say that medical home is a significant part of the public and private payor community's effort to accomplish the aforementioned Initiative.

Second, they banded together in the Patient Centered Primary Care Collaborative (PCPCC) (www.pcpcc.net). This group of EVERY private insurance company and 600 of the biggest employers (like Wal-Mart) and advocacy groups (like AARP) in America sought to establish a set of Joint Principles around medical home. By banding together, this large group holds tremendous power in shaping changes in the health care delivery system in this country.

One of those Joint Principles was the principle of "Quality."

In the "Quality" Principle is the requirement for "continued competence demonstration," meaning the demonstration of initial competence through a qualified Board Certification program and the demonstration of a Maintenance of Certification program.

We would like to think that our successful passage of national boards would satisfy the payor community. We would like to think that successful completion of a Diplomate program would satisfy the payor community, but it does not. We would like to think that 20 hours a year of CE would satisfy the payor community, but it does not.

Debating whether or not we are qualified, or what demonstrates those qualifications, is absolutely meaningless, pointless, and counter-productive. We do not get to set the terms of what demonstration of competence means—the payor community gets to do this, and has already done so.

They have, for a long variety of reasons decided that a Board Certification and a Maintenance of Certification program that comports with the standards of the American Board of Medical Specialty (ABMS) and the National Quality Forum (NQF) is what is needed. We do not get a vote.

Honestly, the concept that a test we took twenty-four years ago (as in my case), or how long ago in your case(?), demonstrates to anyone that we are competent to provide care to anyone in 2010 is intellectually dishonest. The payor community doesn't believe that, so they want all doctors to demonstrate, in the here and now, how qualified

they are. Do you want your next commercial pilot to be someone who was trained in commercial flying in 1983 and no testing of training since 1983?

The changes facing optometry are the same changes facing every branch of medicine. These changes are not about us—they most certainly include us—but they are not about us. Yet, the group with the most angst over this demand is optometry because we are the only licensed profession that does not already have in place the system that is being required of us.

Maybe since 99% of reimbursement goes to MD's, they already have BC in place, they sit at table with insurance companies, and lack of BC by the ABMS model is the big argument by medicine for not allowing expansion of scope to other provider groups, all have something to do with the BC/MOC model being the one that is being put in place.

It is a simple and obvious reality that the knowledge base, the diagnostic methods, the treatment modalities, and thus, the standards of care have changed the practice of medicine and optometry in a fundamental way that renders whatever value those tests had in 1986, 1978, and 400 BC, respectively, completely irrelevant.

We waited and watched the federal health care debate until the Patient Protection and Affordable Care Act of 2009 (PPACA) became law. There is no debate that the PPACA is law. There is also no debate that contained in several sections dealing with Value Driven Initiatives that "MOC in accordance with the ABMS guidelines" is demanded. The ABMS guidelines clearly stipulate BC with initial testing followed by an MOC program. There is no debate about that. It is not subject to question.

The most immediate problem is not the governmental payors—it is the private payors. While we watched the federal government haggle over this issue for months, BC/BS and CIGNA turned on a dime to put these changes into effect.

It is true that one does not have to do any of this. The government will just pay you less. Actually, as with all things new in Medicare/Medicaid, at first, there is a carrot—you get paid more. In time, there is a stick—you get paid less or you get cut out. They did this with e-prescribing, they did it with EHR, they are doing it with these initiatives in the PPACA.

My next comment will probably sting a bit, but it is absolutely true. While the demand for BC/MOC is voluntary, the benefits in payments and physician rankings by public and private payors will be so significant that only a lazy or stupid optometrist (or other physician, for that matter) would elect not to do it in this current health care climate. The only exception would be someone near retirement who does not need to sell their practice to retire. In this case it was a good ride and the rest of us are happy for you.

It is the duty of the AOA, as the trade association of the Optometric Profession, to revisit many different

SCOPA NEWS

Catawba Society

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Coastal Society

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Low Country Society

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Midlands Society

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All Members are encouraged to attend Local Society Meetings. You may attend your society meeting as well as any other society meeting. Please check the website for dates and locations.

Important Dates

- May 20-22, 2010 Laser Therapy for the Anterior Seg. - Charleston, SC
- June 16- 20, 2010 Optometry's Meeting - Orlando, FL
- August 6, 2010 SC Mission 2010 - Greenville, SC
- August 26-29, 2010 SCOPA103rd Annual Meeting - Myrtle Beach, SC
- March 2-6, 2011 SECO - Atlanta GA - DATE CHANGE
- August 25-28, 2011 SCOPA 104th Annual Meeting - Myrtle Beach, SC

Member Announcements

The 2010-2011 American Optometric Association appoints SCOPA Members to the following committees:

- Lori Donovan, OD Member of the Communications Group Executive Committee
Member of the State Government Relations Center Committee
- David Hamill, OD Chair of the Communications Group Executive Committee
Member of the Optometry's Image Coordinating Committee
Member of the Optometry Awareness and Public Affairs Committee
- James Vaught, OD Chair of the Federal Legislative Action Keyperson Committee
Member of the Advocacy Group Executive Committee
Member of the Legislative Action Response Committee
- Timothy Stafford, OD Member of the Practice Advancement Committee
- Edward Lemon, OD Member of the Third Party Center Executive Committee

SECO Announces Dr. Neil Draisin as President-Elect

Seco International - one of the largest optometry meetings in the world and most comprehensive sources of continuing education for eye care professionals - has announced Neil W. Draisin, O.D., as President-Elect. Dr. Draisin, of Charleston, SC, was elected as part of the new slate of officers during SECO's annual House of Delegates meeting at the 2010 SECO International meeting held in Atlanta, Feb. 10-14. The new officers include: Ron M. Bannister, O.D., President, of Thomasville, GA; Neil Draisin, O.D., F.C.O.V.D., President-Elect, of Charleston, SC; Ronald Foreman, O.D., Vice President, of Lake City FL; Darby Chiasson, Treasurer, of Cut Off, LA; James Herman, Secretary, of Hurricane, West Virginia; and Jonathan Shrewsbury, O.D., Immediate Past President, of Beaver Dam, KY.

For member announcements contact the SCOPA Office at (803)799-6721 or 1-877-799-6721 or info@sceyedoctors.com

Help Still Needed In Haiti

For 30 years Columbia Optometrist, and long member of the SCOPA, Dr. Bud Antley, has been doing missions in Haiti and has been instrumental in establishing a medical, dental & vision clinic in Jeremie, Haiti. Fortunately, the clinic did not sustain any damage as a result of the earthquakes, but they do need our help in order to continue to treat those in need and deliver quality eye care.

There are several ways YOU can help:

1. Donate old equipment such as fundus cameras, auto-refractors, slit lamps, phoropters, etc.

2. Donate topical antibiotics, glaucoma meds, articial tears (up to 1 year of expiration)
3. Donate your time.

Dr. Antley will make arrangements with you for the pick-up of any equipment and/or supplies you can contribute. Please contact him on his cell by calling 803-603-5067.

Thank you Dr. Antley for all the time you have given to missions and for your current role and efforts helping the Haitians in need. SCOPA members, let's all do what we can to help those in Haiti.

2010 Board of Directors

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issues from time to time. Doing so does not mean that they "were going to do it no matter what," or any of that kind of nonsense. It means that the question stayed the same, but the answer changed.

At the beginning of the renewed debate over BC in 2007, through the ramp up to the vote in June of 2009, there were two groups of people talking about this issue.

One group, which included some of the best minds in optometry from all of the stakeholders decided to do two years of due diligence on three items. First on what board certification means to the payor community.

Second, fully vet the reasons on whether it was a good idea to proceed with BC now when it wasn't in the past. And Third to create a recommendation for the difficult process forward for the profession to begin BC/MOC.

Was is a perfect process? No. Can we look back 3 years later and see things we could have made a better decision on? Yes. These same answers apply to all of us in most aspects of our lives.

The decisions were made with the best intentions with the information available at the time. I think if the AOA leadership had it to do over again, they would have tweaked the process a bit in hindsight, but I think they would stand by their decision, and rightly so, to move this issue forward in the manner that they did, and along the same timeline.

However, we must move on. So, I say to all of my colleagues on both sides of this issue, that we need to set aside things said and done, and reunite under a common banner. However well intentioned, having a second trade association for the profession will be a tremendous liability rather than the asset it is intended to be. Those of us from Texas who have lived the two association nightmare can clearly attest to that fact.

Times, they are a changin'. We either embrace that change together, or we will most certainly be left behind, alone.

As for here in SC, you can be proud that there are relatively few whining and asking for someone to bring more cheese. We know that continued education of ourselves and continued education of the people who write the laws in SC is the solution to making the best of the situation.

We need to continue to provide the best care and communicate the care we provide to every diabetic patients we see to the patient's primary care provider.

Even if I study for and take the ABO test but do not pass it, I may just be a better optometrist and the patients I see will be better served. If I buy a Board Certification Certificate without any test will it make me a better optometrist or help those patients in my office? Will the Third Party Payors accept a BC Certificate that I all I have to do is pay for it (when I graduated in 1983 and the law that I started practice under did not even allow me to dilate patients eyes)?

Yes there is a lot of anxiety about preparing for and taking a big test after 29 years of practice. Yes, there is a lot of anxiety about the amount of work to be one of first 25 states to update Practice Act to level of current training.

Yes, there is a lot of anxiety about reduced payments and increased demands from Third Party Payors.

Yes, there is a lot of anxiety about getting reimbursed less than MD's for the same procedure.

Yes, there is a lot of anxiety about not-being allowed to participate because we are OD's.

If we answer the 5 yes's with hard work, persistence, and an attitude that we will prevail for our patients, the anxiety will be a lot less. Many doors have opened for optometry in the past year and we just need to be vigilant in our efforts to make sure the good parts of the Health Care Law not repealed and are either implemented by the regulators in the coming years. We also need to continue to educate and train ourselves so we can provide the best eyecare available in SC to our patients. No thank you, we do not need any cheese right now.

James M. Vaught, O.D.
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SC Optometric Physicians Association
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Laser Therapy for the Anterior Segment

May 20th - 22nd, 2010 Embassy Suites Hotel, North Charleston, SC



Registration Fee: \$600 SCOPA Members
\$950 Non-Members

Attention: There will be a review session and written examination for the course administered by NSUOCO on Friday, May 21st following the general lecture sessions. Optometric physicians taking the examination will receive a certificate that will attest to completion of the Laser Therapy for the Anterior Segment course presented by Northeastern State University Oklahoma College of Optometry.

For Reservations Call Embassy Suites Hotel
at 1-843-747-1882 or 1-800-EMBASSY.

visit www.sceyedocors.com for online brochure

Membership

SCOPA Dues Paying Members	336
Non-SCOPA Members (licensed in SC)	122

Please consider inviting your colleagues to join SCOPA. For a list of these non-members, please contact the SCOPA Office.

New Members

Dr. Shemeeka McFadden - new member
 Dr. Sherry Gilmer - new member
 Dr. Nicole Mendola - transfer from CA
 Dr. Lauri Graham - reinstatement
 Bernadine M. Donaldson - student

May Birthdays

Rufus Antley	Ronald Hoyle
James C. Atkison	William Hundley
Michael Baldwin	JoAnn Jeffers
Randall Baughman	Gordon Johnson
Krystal Berthelette	Edward C. Johnson
Charles Cadenhead	Tom MacMillan
Denise Carter	Mike McClay
Sakesha Caston	William Milford
Brent Collins	Vaughn Parfitt
Michelle Cooper	Brent Plaxico
David G. Corcoran	Larry Scheele
Paul Derrick	Justine Siegers
Marvin Efron	Bob Silvers
McKethan R. Gaddy	John Hayes Smith
Steven Haleo	William Spearman
Kristen Harwood	Valerie Urban
Kimberly K. Hinson	Abby Vanderah

On-Line Forum

Chat on line with your SCOPA colleagues. Current topics include State Issues, Third Party Insurance, Contact Lenses, Economics, Optical, and several more. You can find the On Line Forum in the SCOPA members only section of the website. Once logged in look for "On Line Forum" in the top green menu bar. In order to post and/or chat, a password is required. Once you click on "Online Forum" you can request a password.

SCOPA Website

In April, 115 members sign on to the website with 5459 pages viewed.

AOA PAC Contributors

Anderson, Jeremy	Flynn, Philip	Scheele, Larry M
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Derrick, Paul W	Pack, Alva	Wearden, Steven J
Donovan, Lori	Poole, Richard R	West, Caryn M
Donovan, Michele A	Pruitt, Craig B	Zolman, Michael
Draisin, Neil	Richardson, Rhett Hamer	<i>(as of April 30, 2010)</i>
Dubin, Peter	Sawyer, Henry V	

2010 SCOPA PAC Contributors

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Blaettler, Kurt	Forrester, Van	Mills, Michael	Smith, John Hayes
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Carter, Denise	Johnson, David	Parfitt, Vaughn	Turner, Charlie
Caugh, Kurtis	Johnson, Gordon S.	Park, Dorothy J.	VanVeen, Derek
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Colletto, Dr. Brian E.	Jones, Keith A.	Poole, Richard R.	Wallace, Christy
Cooper, Michelle	Kennedy, W. R.	Poston, Jerd W.	Weaver, David E.
Coyle, Daniel D.	Kenney, Marion M.	Randall, John	Weiner, Edward L.
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Dean, Mark T.	Lee, Jason	Russell, Sam III	Yarbrough, James E.
Derrick, Paul	Lippens, Jennifer	Sawyer, H.V. Jr.	Zolman, Michael
Diamond, Jason	Long, Deborah A.	Scheele, Larry M.	<i>(as of April 30, 2010)</i>

SCOPA Dues Amnesty

The Executive Committee of the SC Optometric Physicians Association has voted to grant amnesty for any Optometrist whose membership was inactivated due to nonpayment of dues. Please notify the SCOPA Office no later than June 1, 2010 to take advantage of this one time offer. If you want continuous years of membership in the AOA, then you will have to pay their back portion of dues.

103rd SCOPA Annual Meeting

Board Certification Review

By Jim Thimmons, O.D., F.A.A.O.



The 103rd SCOPA Annual Meeting will be held August 26-29, 2010 at the Myrtle Beach Marriott Resort & Spa at Grande Dunes. Dr. Jim Thimmons will be lecturing on Board Certification Review. The sessions will be clinically relevant topics that we are assuming at this point will be on the board certification test. As the test is developed, ODs that attend the SCOPA Annual Meeting will be provided with a password in order to have access to on line practice tests and study resources.

The following sessions will be offered:

- Pharmacology – two part lecture
- Advances in Anterior Segment - two part lecture
- Glaucoma Therapy 2010
- Clinical Problem Solving: Complex Case Management
- Cataract/Refractive Surgery & Co-Management
- Retina – Systemic Disease
- Retina/Systemic Disease with Low vision
- Clinical Problem Solving/Complex Case Management

To register go to www.sceyedoctors.com

SCOPA/AOA member early bird registration \$395
Early bird registrations must be postmarked by July 9th.

Non Member Early Bird registration \$695
Early bird registrations must be postmarked by July 9th.



InfantSEE®, a public health program, managed by Optometry's Charity™ - The AOA Foundation, is designed to ensure that eye and vision care becomes an integral part of infant wellness care to improve a child's quality of life. Under this program, AOA optometrists provide a comprehensive eye and vision assessments for infants within the first year of life regardless of a family's income or access to insurance coverage.



By Andrea Thau, O.D., F.A.A.O.,
F.C.O.V.D

New in 2010!

The Exhibit Hall will open on Thursday August 26th instead of Friday, giving more networking opportunities between Optometrists and Exhibitors. The exhibit hall and lecture halls will be adjacent.

President's Reception and Club SCOPA will be Friday Night!

Important Announcement

SC Board of Examiners will give you the option of counting CE Hours from the 2010 SCOPA Annual Meeting towards this years renewal or 2012 renewal!

2nd Annual SCOPA PAC Golf Tournament



To Register go to
www.sceyedoctors.com

Date: Saturday August 28th
 Tee Time: Starting at 1:30pm
 Where: Arcadian Shores Golf Club
 Format: Double Tee
 Cost: \$120 per player



News From the AOA

Just like your skin, it's essential to protect your eyes from harmful UV rays.

- Americans tend to take the necessary precautions to protect their skin from the sun, but don't make as much of an effort to protect their eyes from harmful UV rays. According to the American Optometric Association's 2009 American Eye-Q® survey, only one-third (33 percent) of Americans believe UV protection is the most important factor to consider when purchasing sunglasses.
- Parents should also instill proper eye protection habits in their children early in life, such as wearing sunglasses with suitable UV protection.
- According to the AOA's 2009 American Eye-Q® survey, two-thirds (66 percent) of Americans buy sunglasses for their children, but more than one in four parents do not check to make sure the lenses have proper UV protection.

The effects of UV radiation are cumulative and over time can put one at greater risk for developing eye and vision disorders.

- Exposure to both UV-A and UV-B rays can have adverse long- and short-term effects on the eyes and vision.
- It's unclear how much exposure to solar radiation it takes to cause eye damage. For that reason, the SC Optometric Physicians Association recommends protecting the eyes with eyewear that properly absorbs UV radiation and a wide-brimmed hat.
- Improper protection from UV radiation can cause a sunburn of the eye. Symptoms can include blurred vision, irritation, redness, tearing, temporary vision loss and, in some instances, blindness.
- The longer the eyes are exposed to solar radiation, the greater the risk of developing conditions later in life such as cataracts, macular degeneration or, in some cases, skin cancer around the eyes.

UV protection can be achieved by simple and inexpensive safety measures, which can help prevent or limit damage to the eye.

To protect the eyes, be aware of the following tips:

- Wear protective eyewear any time the eyes are exposed to UV rays, even on cloudy days and during the winter.
- Look for quality sunglasses or contact lenses that offer

good protection. Sunglasses or protective contact lenses should block out 99 to 100 percent of UV-A and UV-B radiation and screen out 75 to 90 percent of visible light.

- Check to make sure sunglass lenses are perfectly matched in color and free of distortions or imperfections.
- Purchase gray-colored lenses because they reduce light intensity without altering the color of objects to provide the most natural color vision. Brown or amber-colored lenses may be better for those who are visually impaired because they increase contrast as well as reducing light intensity.
- In addition to following the SCOPA recommendations for UV protection, the SCOPA also advises regular comprehensive eye exams with an eye doctor. According to the SCOPA adults age 60 and under should have a comprehensive eye exam every two years and then annually thereafter.
- The easiest way to find an optometrist is through the doctor locator on the AOA's Web site at AOA.org and/or www.sceyedoctors.com. The AOA's doctor locator allows users to type in their zip code and find an optometrist in their area.

UV Protection and Eye Safety Fast Facts

The following statistics are from the 2009 American Eye-Q® survey:

- One-third (33 percent) of Americans said UV protection was the most important factor when purchasing sunglasses; the other factors respondents said were important included comfort/fit (26 percent), price (18 percent), style (15 percent) or lens color (3 percent).
- 35 percent of adults are unaware of the eye health risks associated with spending too much time in the sun without the proper protection.
- Nearly three out of four (73 percent) survey respondents have worn lenses (contacts lenses or regular eyeglasses) that provide UV protection.
- 38 percent of respondents wear prescription sunglasses.
- Nearly half (42 percent) of respondents do not wear sunglasses during the winter months.
- Two-thirds (66 percent) of Americans buy sunglasses for their children, but more than one in four parents do not check to make sure the lenses have proper UV protection.
- Less than one-third (29 percent) of parents make sure their child always wears sunglasses while outdoors.
- 66 percent of parents do not ensure their children wear sunglasses during winter months.



OMG National, in conjunction with the American Optometric Association, is proud to bring you AOA-TV, a monthly Internet broadcast that is distributed to thousands of AOA members. AOA-TV is a news program for those in the optometry profession— each broadcast contains uplifting and informative coverage of the industry with a focus on topical events, late-breaking stories, association news and benefits. Each episode also features prominent optometrists and owners of optometric businesses. To sign up to receive the monthly broadcast visit <http://www.iwantmyaoatv.com/>.

News From the AOA Foundation

Support Your Foundation

To make an online donation to The AOA Foundation, please visit www.optometrycharity.org.

VISION USA

In every community in the US, there are low-income families in dire need of eye care services. VISION USA is there to help. Please join your colleagues and become a VISION USA provider today by sending an e-mail to visionusa@aoa.org. The eye care donated through VISION USA can be a life-changing experience for a patient.

InfantSEE® Program Update

Over the course of 2009, the media took an increased interest in the InfantSEE® program. From focusing on an infant's visual milestones to coverage of the signs and symptoms of visual impairment, the media sought out and requested news from InfantSEE® with a desire to speak with providers from around the country.

Because of this interest, the program has received national publicity. More than one billion media impressions were secured in 2009 as a result of the 4,000 media placements earned.

In addition, 2009 was a record year for the number of assessments provided.

And just months into 2010, the InfantSEE® program's media interest continues. In January, the program was featured in *American Baby*, and interviews were recently completed with *Babytalk* and *You & Your Family*. Additionally, InfantSEE® has made its grand entrance into the social media sphere by setting up a Facebook fan page and continually making contacts and building relationships with mommy bloggers, one of the most influential Internet-based groups.

You can help promote InfantSEE® too by becoming a fan on Facebook. If you are already on Facebook, please click here to see our page. For those who are new to Facebook visit www.facebook.com and create an account and join the InfantSEE® Fan Club today.

We invite you log on to <http://www.optometrycharity.org/infantsee-news/> to see the top media hits achieved in 2009 and 2010 for the InfantSEE® program. We are also focusing on regional media relations, so if you'd like to promote your practice, one of your infant patients and the InfantSEE® program in local media outlets, please contact Mark Schwartz at (314) 983-4149 or maschwartz@aoa.org to find out more.

SC Eye Care Initiative

Optometrists Agree to Help Midlands Uninsured

Dr. Peter Candela, who was recently named the 2008 South Carolina Optometrist of the Year, was instrumental in the startup and implementation of the South Carolina Eye Care Initiative, a program established to provide quality vision care to low income, uninsured adults 18 years old and older in South Carolina.

With the help of Dr. Candela, the United Way of the Midlands Health Council and Robertson Optical have partnered with the SCOPA to begin the South Carolina Eye Care Initiative. Volunteer optometrists from the South Carolina Optometric Physicians Association perform complete eye exams and, if necessary, offer eyeglasses with single vision or bifocal lenses all for a fee of only \$35.00.

The program continues to grow, serving residents in: Orangeburg, Calhoun, Dorchester, Fairfield, Lexington, Richland and Newberry Counties.

United Way of The Midlands Presents Awards to SCOPA

United Way of the Midlands presented a Certificate of Appreciation to The SC Optometric Physicians Association in recognition of the valuable contributions as volunteer optometrists to the South Carolina Eye Care Initiative.



Pictured (left to right) Mac Bennett, Dr. Peter Candela, Cheryl Johnson and Dr. Vincent Zeplin.

More participating OD's are needed.

If you're interested in participating, please contact Cheryl Johnson, at the United Way of the Midlands, at 803-733-5414.



South Carolina Optometric Physicians Association
2730 Devine Street
Columbia, SC 29205
(803) 799-6721 1-877-799-6721
www.sceyedocors.com

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Classifieds

Optometrist Needed

Motivated OD looking for partner and/or purchase of existing practice. Please call and leave a message at 843-661-2869.

OD needed 3-5 days a week in the Columbia area at the new EyeMart Express. New graduates are welcome with daily guarantee. Licensed Optician also needed either full or part time. If interested, please call Doug Newsome at 706-339-0429.

Full time OD needed for great practice in Clinton and Laurens. Interest in future ownership is welcome. Please inquire at 864-833-5555.

Part time optometrist needed 3-4 days a week for busy medical practice in Orangeburg, near Columbia and Charleston SC. Competitive profit sharing and guaranteed pay schedule. If interested call Dr. Choe at 843-610-2020.

Practice for Sale in Prime Locale in Myrtle Beach. Professional Setting. All new equipment, interior by design Fashion Optical Display. Priced for Quick Sale. Call Mark Vinson at 843-423-7229.

Two Locations Available:

* Irmo 1500 sq ft

*Charleston Hwy between Piggie Park and Ryans
1300 sq ft

Call SC Properties at 407-6233.

PT opportunity in the Sumter market. A long-time, loyal patient base. 3 days, all equipment and staffing is provided. Please contact Tom Connor at 704-965-9099 if interested.

Professional fill-in for your practice. Have scope and will travel. Dr. Holcombe 843-522-3837.

FT associate position available in a well established practice in Aiken, SC. Please call Dr. Braun at 803-648-8974 or fax resume to 803-648-6418.

Practice for sale in Beaufort. Call Jim 843-476-4647 after 5 pm.

Upstate practice for sale. Great PT income with excellent growth potential. New building and lots of new equipment. Call 864-363-8334 for more info.

FT associate needed for busy private practice in Greenwood, SC. Please fax resume to 864-229-1898.

Office Opportunity. Shared office w/ optical shop West of Ashley in Charleston. Same location twelve years. Take over optical and share space w/ ophthalmologist. One doctor is joining a large group practice and vacating. Easy terms, startup grace period. 843-860-9938.

Equipment for Sale

New Matrix Visual Field Unit. Show price was \$12,000. Sale price \$10,500. Call 864-292-0262.

Chair, Slit Lamp, NCT Projector and Kerometer. Call Leland Boland at 864-366-2020.

AONCTII, Chart Projector, Chair and Stand. All in Excellent Condition. For Details, Call Janice at 864-855-0034.

HRT II like new condition. Purchased last year at SECO. Hardly used. \$16,000. If interested, please call 864-225-0474.

Lots of great equipment for purchase. Some items for sale include a Custom II Chair and Stand, Kerotometer, Vertometer, Complete Lens Finishing Lab, Desk and Office Furniture, & much more. Call E.H. Brown, O.D. at 803-345-6661.

Office equipment for sale. Please contact Dr. Bill Behling if interested at 843-562-2604.

Kerotometer (\$350), A/O Projector (\$250), A/O Custom Chair (\$1,500), and Zeiss Slit Lamp (\$1,000) for sale. Please call Dr. Antley at 803-532-9870 for more information.

7070 Santinelli Tatternless edger, needs a new tracer, was \$30,000 new, any reasonable offer will be considered. If interested, call Dr. Melvin Watsky at 843-425-6798.

BPI six bucket dye unit, asking \$300, was \$900 new. If interested, call Dr. Melvin Watsky at 843-425-6798.