

Optometry DistList
Instance 2016: 32
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Today's subjects

- How Your Contact Lenses Could Talk to Your Phone
- Olympic Cyclists are Training with These Smart Glasses...and So Can You
- 7 Things ODs Can Learn from Super Bowl
- ZEISS Digital Refraction Technology Integrates with Leading EMR Software Systems
- Everest Calling
- All Visual Exams Are Not Created Equal
- IVI Optometry Wizard of the Year 2016

Date: 18 August, 2016
From: Tejpal Sohal (tejpal04@gmail.com)
Subject: **How Your Contact Lenses Could Talk to Your Phone**

Your contact lenses or a sensor implanted in your brain could someday send health updates to your smart phone and even your doctor. A new technology called Inter-scatter Communication that's being developed at the University of Washington would allow small devices, such as contact lenses, implantable sensors and credit cards, to communicate with devices like smart phones and smart watches.

"Wireless connectivity for implanted devices can transform how we manage chronic diseases," said UW researcher Vikram Iyer, in a statement. "For example, a contact lens could monitor a diabetic's blood sugar level in tears and send notifications to the phone when the blood sugar level goes down."

The research is funded by the National Science Foundation and Google Faculty Research Awards. Google has shown particular interest in the technology and was conducting its own research into smart contact lenses that can test diabetics' blood glucose levels two years ago.

Using wireless chips and miniaturized glucose sensors embedded between two layers of soft contact lens material, the smart lenses were being designed to test blood sugar levels in the user's tears.

Aside from the medical applications, the UW researchers said that inter-scatter communications could also be used to enable smart credit cards to communicate with each other.

For the complete article, please visit:

<http://www.computerworld.com/article/3109492/emerging-technology/how-your-contact-lenses-could-talk-to-your-phone.html>

Date: 19 August, 2016
From: Praveena Jaipal (praveena.jaipal@indiavisioninstitute.org)
Subject: **Olympic Cyclists Are Training with These Smart Glasses...and So Can You**

As if cycling gear didn't look sci-fi enough already, enter the Solos Smart Cycling Glasses - a high tech pair of smart glasses currently in the hands of pros and on its way to the public.

Designed exclusively for biking, the smart glasses are assisting the US Olympics Cycling Team as they prepare for the upcoming 2016 Summer Games in Rio. However, it's not just Olympians getting in on the smart shades - the device is also undergoing a crowd funding campaign on Kickstarter, with an expected release this October.

Reminiscent of Google Glass, Solos use an optics display to overlay information over the cyclist's vision as they ride - such as their heart rate, speed, distance, and elevation. The glasses can also track data on a dedicated smart phone app, as well as sync with other programs like MapMyRide, Strava and TrainingPeak.

Also similar to Google Glass is Solos' price tag. While not as costly as Google's take on eyewear, a pair of Solos will be sold for \$500 - a cost made a little more palatable by a 50% discount for the first 200 backers who sign up on Kickstarter, but still fairly steep for a pair of shades that only function when on a bike.

For the complete article, please visit:
<http://www.in.techradar.com/news/wearables/Olympic-cyclists-are-training-with-these-smart-glasses-and-so-can-you/articleshow/52442108.cms>

Date: 28 August, 2016
From: Anuhya Nalluri (anuhya.nalluri@gmail.com)
Subject: **7 Things ODs Can Learn from Super Bowl**

Super Bowl 50 is in the books, and the Denver Broncos and Peyton Manning are the Super Bowl champions! Not all of our practices will ride off into the sunset with a world championship, but there are many lessons we can learn from the Super Bowl.

1. You are responsible for the game plan

As the owner and coach of your team, you are responsible to have a game plan for your office.

2. You are responsible to assemble the team

If you decided to be a specialty contact lens-oriented practice, then staff should include technicians with interest and training in contact lenses.

3. You have to train the team

Regardless of how good the players are when they start, you must invest in training.

4. You have to know the rules

Just like football is governed by rules, our practices also have rules and regulations. Know the rules! Know the state board regulations and understand how regulatory changes in HIPPA, OSHA, labour laws, and other areas impact you and your practice.

5. Ignore the media—or at least parts of it

Maybe rather than getting on chat boards and complaining about all the ways everyone is out to get us, how about just working on our practices and making them better?

6. Every minute counts

TV time for commercials during the Super Bowl cost \$4.5 million per minute. We may not be able to charge that much for our exams, but our time—and our patients' time—is valuable. Be efficient and purposeful with every minute and every patient.

7. Be a difference maker

You and your staff have an opportunity to be a difference maker to your patients. Go into every day and every exam with the mindset of doing something special for your patients.

For the complete article, please visit:

<http://optometrytimes.modernmedicine.com/optometrytimes/news/7-things-ods-can-learn-super-bowl?page=0.0>

Date: 23 August, 2016

From: Deepa G.K. (deepa.dlite@gmail.com)

Subject: **ZEISS Digital Refraction Technology Integrates with Leading EMR Software Systems**

In a move that allows it to cover nearly all of the market, ZEISS is pleased to announce the wireless integration of its Essential Line of digital refraction instruments with today's leading Electronic Medical Record (EMR) software systems—including Compulink, Crystal, OfficeMate ExamWriter, My Vision Express, OD Link, Practice Director, and RevolutionEHR. For ZEISS customers, this means they can send data wirelessly and seamlessly from the ZEISS Essential Line instruments directly to their compatible EMR software of choice for a more streamlined workflow process.

ZEISS Essential Line instruments that work together as a digital refraction system and interface with today's leading EMRs include:

- VISULENS 500 Auto Lensmeter
- i.Profiler^{plus} Aberrometer/Topographer
- VISUREF 100 Autorefractor/ Keratometer
- VISUSCREEN 100/500 Acuity Systems
- VISUPHOR 500 Digital Phoropter

“This joining of forces is truly a win-win for the ECP, the dispenser and the patient, and

provides a synergy of service that results in a better all-around exam experience.” said Matthew Wess, Associate Director, Dispensing Tools & Instruments, Carl Zeiss Vision, Inc.

For the complete article, please visit:

<http://www.optiboard.com/forums/showthread.php/64776-ZEISS-Digital-Refraction-Technology-Integrates-with-Leading-EMR-Software-Systems>

Date: 23 August, 2016

From: Apoorva Chauhan (apoorva.chauhan@indiavisioninstitute.org)

Subject: **Everest Calling**

Optometrist and founder of Eyes4Everest, Shaun Chang, speaks about providing eye care to children and adults living near Everest.

Eyes4Everest was officially established in July 2014 to provide primary eye care to people living in the Everest region of Nepal through volunteer sight-testing missions.

I grew up in New Zealand and as a child I was inspired by Sir Edmund Hillary, the first man to reach the peak of Mount Everest, who would visit my school to talk about the Sherpas and his work in the Everest region through the Himalayan Trust. Having always been motivated by the adventurer, in 2013, following an attempt of the famous Gokyo Ri walk, I visited Khunde Hillary Hospital in the heart of Sargamatha National Park, which was founded by Sir Hillary. During my visit, I spoke to the hospital’s director who, on learning that I was an optometrist, showed me its limited eye care equipment. It consisted of bags of donated glasses, an old trial lens set with half of the lenses missing and a Nikon Vertometer that had been donated to the hospital, but no one knew how to use it.

Returning to Nepal as Eyes4Everest, we visited the Khunde Hospital where the hospital director explained how local children particularly were suffering academically due to uncorrected refractive error.

When we are doing the sight tests, we collect the details of those who require a prescription and take the prescriptions back to Kathmandu where the glasses are made up by a local optometrist who expressed a desire to support the charity. It costs us \$20(AUD)/£11 a frame and a Sherpa guide then takes the glasses back to the villages when they are ready.

We would like to continue to run mobile eye clinics in the Everest region, and any profit that we make from the hospital services would help fund this.

For the complete article, please visit:

<https://www.aop.org.uk/ot/industry/charity/2016/08/22/everest-calling>

Date: 26 August, 2016

From: Sandhya Shekar (sandhya.shekar@indiavisioninstitute.org)

Subject: All Visual Exams Are Not Created Equal

Information without education is meaningless. To have visual exam data at hand without an adequate grounding in how to use it – or properly acquire it – is meaningless, dangerous, or merely entertainment.

There is an inherent assumption buried within the nature of the question about automated or technician-based exams that all any examiner needs to satisfy a patient’s visual needs are the right numbers in the LCD display, in the phoropter windows or in the printer output. Will the day come when we have to tolerate vision kiosks in our malls with an optician in the back?

A professional who is overly focused on maximizing traffic and yet minimizing the time spent in patient contact (or as some have said, “...to use the time more wisely”) is not likely to be persuaded to warmly embrace a counter-point argument to the question raised here.

Much of the problem may lie within our own optometric family: we are losing sight of what the goals of optometry are, what defines a patient’s needs, and what the point of a patient exam is. Within that frame of thinking, the examiner must determine his or her own role: as objective data gatherers and data processors, or is there a subjective component to the patient’s responses?

Indeed, patient evaluations in all allied medical fields take on two general forms:

- 1) Problem-focused: The patient brings in a set of symptoms.
 - 2) Health Screening: The patient is assessed for all aspects of healthy performance.
- The doctor (or for purposes of this topic, the refractionist) must be educated enough to make a proper assessment of the patient’s responses. To understand why, we must be willing to consider the human factors.

This brings up an extremely important question: does stress ever manifest itself in the refraction? Do medical conditions ever alter refraction? Will a patient in emotional distress respond in a customary way and render a valid prescription?

Refraction is a road test of the visual system under controlled conditions. Has the visual system the resources to cope (as measured by the duction tests)? Is it distorting due to performance stresses (as reflected by the phorias)? Has it begun to collapse (as in Streff Syndrome)?

Optometry is the only profession capable of bridging visual perceptual processing with the manifestation of any external distortions. AM Skeffington, the father of modern developmental visual science, said many times, refractive error is the last stage of a visual problem and a visual problem is an outer manifestation of an inner problem.

For the complete article, please visit: <https://www.odwire.org/all-visual-exams-are-not-created-equal/>

Date: 25 August, 2016
From: Sony Singh (sony.singh@indiavisioninstitute.org)
Subject: **IVI Optometry Wizard of the Year 2016**

A national quiz organized by India Vision Institute (IVI) for Optometry practitioners, educators and students to test their Optometry knowledge among their peers. The questions will encompass all major disciplines of optometry.

Eligibility: Optometry practitioners, educators and students.
Prize: The prize money the finalists win will be based on the number of correct answers. The maximum prize money will be INR 10,000.

All three finalists will receive a memento from IVI along with a certificate.

For further details, please visit: <http://www.indiavisioninstitute.org/upcoming-programs-view.php?id=69>

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