

## DIAGNOSTIC INSTRUMENTATION

# The Technology that Changed How Efficiently & Effectively We Educate Patients

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By Jacob R.  
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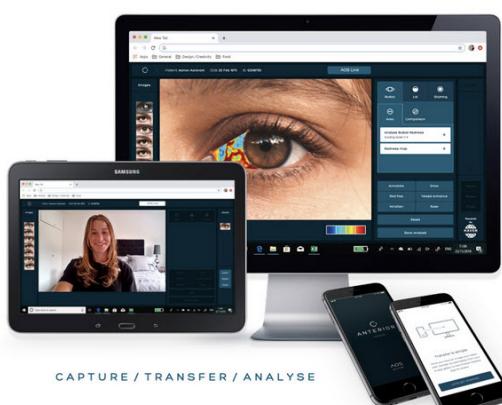
Impressing upon patients the importance of treatment for dry eye and other conditions can be challenging. With patients exposed to so much health information online and elsewhere, it's sometimes hard to get them to remember and absorb the information you present.

Fortunately, our practice invested in transformative digital eyecare technology from **Advanced Ophthalmic Systems (AOS)**. It allows us to quickly and easily take photos of patients' eyes. These images make such a strong impression on patients that they almost always sign on for the full treatment plan we prescribed.

The ability for the technology to quickly capture that kind of information makes all the difference during a busy time like the back-to-school season, when we strive to keep patient flow moving while delivering advanced eyecare.

## High-Quality Images Efficiently Captured

I see around 35 patients per day on average. During back-to-school season, that number hovers closer to 40, or a little more. We are typically 100 percent booked late July through the beginning of September with children returning to school needing care, as well as young adults who want to get in for an eye exam before heading back to college out of town. Our practice



Technology from **Advanced Ophthalmic Systems (AOS)** allows Dr. Lang and his colleagues to deliver efficient, high-quality exams.

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includes nine optometrists and eight ophthalmologists, so saying we're usually completely booked this time of year is no small thing.

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The high volume of patients we see in late summer/early fall doesn't mean we are willing to sacrifice exam quality. We want to carefully screen our patients for both sight-threatening and quality-of-life threatening conditions, like dry eye. That's where the technology we invested in from AOS a few years ago comes in.

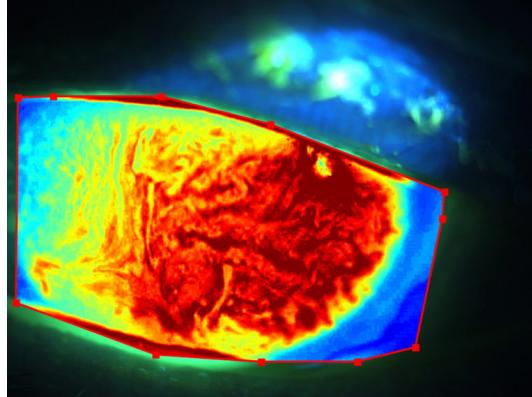
### Show Both the Need & Impact of Treatment

When you can show in-depth, clear photos of a patient's eyes that first show exactly what's happening in a patient's meibomian glands, for example, and then show after treatment, how that same aspect of the patient's eyes look, you have an invaluable patient compliance tool.

The best part is I don't find that the capturing of these high-quality photos negatively impacts our patient flow. The technology is simple to use, so that our support staff could easily capture the photos, leaving the doctor to interpret the results. I currently take the photos myself. However, the staff can easily capture photos with the technology, which my colleagues and I could then interpret and provide recommendations on afterwards. This possibility offers us a chance to extend the opportunity to efficiently deliver a high level of care in a fast-paced environment.

We get a lot of "wows" from patients, who have been told for years that they have dry eye, but before seeing these photos, never understood what that really meant, why the condition is negatively impacting their vision and comfort, and why and how treatment will help.

The technology is able to provide objective analysis that shows output in tenths, so patients can see incremental progress, even if it's small, which validates that they are on the right treatment plan. This is helpful in dry eye especially, with in-office treatments that may take 2-3 visits to show major progress.



AOS fluorescein analysis of corneal limbal stem cell deficiency helps Dr. Lang's patient understand the diagnosis better. The image shows the fluorescein pattern in 2D, highlighting the effect the condition has on the corneal surface.

### Create More Efficient Follow-Up Appointments

The photos taken with AOS technology lay a foundation of knowledge so that we don't have to start from the beginning in patient education at the next appointment. The patient, after seeing these images, and having the doctor explain what they are seeing, usually fully understands what is going to happen at their next appointment(s).

The time we take on the front end to educate patients, with help from these photos, creates patient knowledge that we can build on in subsequent visits. That higher level of patient understanding allows the doctor to almost immediately commence treatment at follow-up visits, rather than taking an additional 5-10 minutes at each follow-up to explain again what's

happening. This time saving adds up quickly, especially on a busy day of seeing back-to-back patients.



### Optimizing Next-Generation Anterior Segment Analysis

AOS technology incorporates advanced objective analysis that highlights and brings attention to areas of concern in the photos captured. More than that, the system grades and quantifies corneal findings. For example, we can quantify ocular redness and vascularity. The technology highlights fluorescein patterns and elevations, or thickness, across the cornea.

Along with dry eye, this technology is a great help in diagnosing contact lens-related complications like keratitis and the irregularities to the cornea, which some patients experience after refractive surgery. It also assists us in measuring corneal lesions, abrasions, nevi and other benign pigmented lesions and potential melanomas on the eye.

As we move forward, we will be exploring the possibility of having our support staff handling contact lens follow-up appointments remotely, using AOS technology, rather than coming into the office. Having virtual progress checks will allow us to use chair time more effectively. Patients can send images via the AOS App, which can be reviewed and analyzed ahead of a video call. There's also the contact lens tool, which allows us to assess for centration and rotation.

In addition to the added efficiency of having a remote contact lens follow-up, practices in a recent AOS-sponsored study saw an average of 23 percent increase in trial-to-purchase conversion rates when following a hybrid care protocol. Ninety-three percent of patients responded that they were satisfied with having video calls with their eyecare provider and 93 percent said they would like to have future remote appointments. These stats prove that making changes like these will improve the patient experience and make good business sense.

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### Management

I frequently use the images captured with our AOS system at educational lectures I give to my colleagues. Showing clinical findings to other healthcare providers, and discussing proper diagnoses and treatment plans, becomes easier and more interesting with these high-level photos.

When I co-manage patients with other doctors, I can use these photos to work as a team to decide how to best help a patient. The photos are easily imported into our electronic health record to be shared via HIPAA-secure connections with other offices, through their own EHR systems.

A system that takes photos that are so helpful in educating both healthcare colleagues and the patients themselves is a priceless tool for a busy office that needs to ensure thorough, reliable care is delivered, no matter how busy it gets.

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# The Dry Eye Technology Suite Transforming Patient Education & Growing Annual Exams By 30%

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By Jordan Jones, OD

July 13, 2022

Dry eye disease causes great discomfort and adversely impacts vision. Nearly 16 million Americans now have dry eye, according to the National Eye Institute.



The VX 120 + Dry Eye from Visionix in Dr. Jones' office. He says the technology takes dry eye care to the next level and boosts profitability.

Fortunately, the technology and treatments for this condition are rapidly advancing. In my practice, I have the **VX 120 + Dry Eye** from **Visionix**, which makes all the difference in how well I can diagnose and treat my dry eye patients.

## Show Patients You Invest In the Best Technologies

We implemented the multi-modal VX 120+ with Dry Eye screening in our practice in July 2019. We had been working with Visionix since 2015 and found that their technology options allowed us to stay on the leading edge of optometric care. Our patients expect us to have the "latest and greatest," and are extremely loyal after seeing the level of care we can provide with these technological advancements.

I can't begin to tell you how often we hear comments like, "Wow, this isn't like my last optometry visit at all." As we are a heavy contact lens office, we see our fair share of anterior segment issues and dry eye complaints. Being able to quickly quantify data as it relates to tear break-up time, tear meniscus, pachymetry and corneal topography has been invaluable to our practitioners as we manage cases and implement treatment plans and patient education.

## Technology that Strengthens Practice Growth

In an extremely trying couple of years for everyone, we grew our exams by 30 percent year-over-year. We do not spend significant money on outside marketing, so this growth mainly happens organically via word-of-mouth referrals. I attribute most of this growth to our overall patient experience, which ties directly back to what we can achieve and the quality of care we can provide with our technology.



Dr. Jones can perform refractions with his VX 55 from a distance, another room, or even another location. VX 55 and VX 65 integrate with the VX 120+ Dry Eye screener making it an efficient process.

Access to data you can quickly obtain and subsequently share with patients helps validate that the status quo needs to change. Patients want to be heard and validated.

Simply telling someone to grab a bottle of artificial tears and blink more doesn't do that. Utilizing technology like the VX 120 + Dry Eye, which allows you to show them what's going on, and have the time to explain why we need to change the current paradigm, does.

The conversations facilitated by this technology often enable us to move patients into a higher-quality contact lens that is better for them and more profitable for our practice. It allows us to get a treatment plan in place that will lead to another touch-point to show trends and proof of concept. Primarily, it creates loyalty to our practice.

In addition to dry eye, the VX 120 + Dry Eye helps with a huge range of conditions our patients present with, including corneal abnormalities such as Fuch's, keratoconus, contact lens-related edema, pressure-related issues such as primary open angle glaucoma/ocular hypertension, angle closures and cataracts. Most importantly, being able to educate the patient by reviewing this information with them creates the patient loyalty we all strive for.

Our dry eye patient population continues to grow as we successfully help people with their problems. A patient who has been battling irritation and dryness for years, who finally sees an improvement, is the best advertising you can get. These patients are more than willing to do the marketing for

your practice as they are ambassadors in their daily lives, singing your praises.



The patient who has been wearing glasses at the office for years and suddenly appears wearing contacts again is a conversation starter. That conversation will lead to a few new patients heading your way for their next exam.

### Easy Workflow Integration & Digital Transformation

The VX 120 + Dry Eye connects to the VX 55 digital phoropter and VX 22 visual acuity chart. With our Visionix integrated setup, these devices communicate with each other so we can capture and share all the data seamlessly between the AR/K, pachymetry and topography, to the tablet-driven phoropter, and finally into our EHR. The real-time information we collect and review gives us more time to listen to the patient and address complaints.

We use this multi-modal Visionix screener on every patient—new or established—for comprehensive exams. It has all the essential early detection tests to help us

stay on top of our patients' eye health. We receive a wavefront refractive result, topography, pachymetry, anterior chamber depth and angle measurement, tonometry, anterior segment image and retro illuminated view of the lens all within two minutes. So, why not do it on everyone? The dry eye module is typically used when a more significant complaint of dryness/irritation is elicited via conversation or seen clinically.

Because we have been with Visionix for seven years, we were already using a previous iteration of this instrument, albeit with far fewer features. Therefore, our transition was seamless. I was able to gather even more information in hardly any more time. In fact, I was able to save time by incorporating the NCT portion, which I previously had always performed by Goldmann tonometry.

If you currently have a topographer, an autorefractor and an NCT in a pre-testing room, you will save both space and time with the VX 120 + Dry Eye. As the patient is not forced to move from machine to machine, the overall feel for the patient is also more streamlined.

This technology does as much for patients as it does for our practice. It empowers you to create a more efficient patient flow, provide greater care and significantly boost profitability.



**Jordan Jones, OD**, is the owner of **Wear Eyewear**, with two locations in the Chicago metropolitan area. To contact him: [jordanjones@weareyewear.com](mailto:jordanjones@weareyewear.com)

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DRY EYE

# Having a Frank Discussion with Patients On Cost of Treating Dry Eye

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By Vin Dang, OD, FAAO



All dry eye therapies have a cost. In-office microblepharoplasty procedures, such as BlephEx or ZEST (Zocular Eyelid System Technology), can range from \$160-\$350 per treatment depending on the office. Thermal treatment costs vary as well, and are typically even higher.

Most dry eye treatment procedures are not currently covered by insurance, and are considered a shared cost. Patients usually assume insurance will automatically cover these services because you have diagnosed them with dry eye, which is a medical condition, but that is often not the case. Yet these are important procedures for a patient diagnosed with dry eye.

### Patients Have More than One Way to Access Treatment

Patients have the freedom, depending on their insurance selection, to use financial instruments such as a flex spending account (FSA) or a health savings account (HSA) to pay for their treatments. These financial instruments enable medical procedures to be paid in full with banked pre-tax dollars. Usually these plans require some form of itemized documentation detailing the procedure and cost to allow for reimbursement.

It is important to impress upon your patient the benefits of treating early in the disease process and potential for repeated in-office procedures in order to plant the seeds for financial-planning purposes. By taking a proactive approach, these procedures are more effective and will minimize the risk of long-term damage, which would cost significantly more to treat.

Another option for patients in participating practices, who qualify, is spacing payments for the procedure out over time with patient financing through the **CareCredit** credit card. This is an option we give patients in our office that has done wonders for making essential dry eye treatments viable for many more patients.

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### Don't Shy Away from the Cost Conversation

I discuss the cost of the procedure with my patient at the end of the examination. I do not shy away from telling them the prescribed procedure is what is best for treating their condition. Similar to when we prescribe polarized sunglasses or blue light blocking lenses for digital device use, I recommend what is best for the patient and allow them the ability to make a shared medical decision.

Invariably, after discussing treatment options, I find a patient will ask me what they should do. At that point, you have earned your patient's trust and they will likely follow your recommendations.

For example, keeping affordability in mind, I might suggest that Intense Pulsed Light (IPL) can be broken down into a pay schedule per treatment or a total amount for all recommended sessions. If they do pay upfront, they can qualify for a discount per treatment, which helps reduce the overall cost to the patient. The typical out-of-pocket cost for each IPL treatment is \$300-\$500.

IPL treatment usually involves a series of 4-8 treatments. The total cost could be prohibitive to some patients. However, patient financing options can help make these treatments easier and more affordable.

### Dry Eye Is a Medically Important Procedure—Cost Should Never Be a Deterrent to Treatment

After I have educated my patient on the treatments required to manage their condition, I walk them over to our patient coordinator. I hand the patient 1-2 pamphlets about the recommended procedures while we walk. Physically having something in-hand solidifies that what they have is important enough to provide documentation that can be reviewed at their leisure from the comfort of their own home.

At our practice, our patient coordinator arranges payment and scheduling along with answering any remaining questions. The coordinator goes over the estimated out-of-pocket cost for each of the different procedures. The patient coordinator also reiterates what the doctor prescribed.

The science indicates that for a person to act on a message they hear, they must hear it 14 times. This is called effective frequency. I try to express the gravity of the patient's situation multiple times to engage them in their care.

Use of the CareCredit credit card in our office enables many patients to follow my dry eye treatment plan. It can be used for out-of-pocket expenses not covered by medical insurance to help patients receive the treatment they need with the added benefit of special financing options, allowing the patient to pay over time for treatment. If the patient still declines, schedule a one-month follow-up appointment with the doctor to continue treatment, check on progress, and make sure the patient is not lost to follow-up.

When patients both fully understand the need for treatment, and have tools like financing options, they are hard pressed to say no to a treatment that can change their life for the better.

### Learn More

Click [HERE](#), or the image below, to learn how Dr. Dang ensures treatment compliance and commitment from patients he has diagnosed with dry eye



**Vin Dang, OD, FAAO**, practices at Empire Eye & Laser Center in Bakersfield, Calif.

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