

# Thomas A. Oetting, MS, MD

Dr. Oetting reflects on how his training in the Air Force and his father's example influence his approach to academic medicine.



## How has your training as an engineer shaped your approach to ophthalmology and medical practice?

Engineering school is great preparation for medical school, especially for the clinical years, but it is difficult to directly map my electrical engineering skills to

my day-to-day work as an ophthalmologist. Engineering taught me how to delve into details and think about a whole system. I have a solid understanding of physics, optics, and system integration due to that early foundation. Ironically, I recently cleaned out some old engineering books, and the symbols and equations looked Greek to me!

## What were the challenges and rewards of serving in the Air Force?

My years in the United States Air Force (USAF) inspired tremendous personal growth. I joined the USAF to fulfill a commitment from a Reserve Officers' Training Corps scholarship. I would have preferred to pursue hands-on engineering, but the USAF wanted me to lead a team of civilian engineers in building a jam-resistant radio for planes. I had hated team projects in college and avoided them whenever possible. From my experience in the USAF, I quickly learned how to run meetings, manage projects, and coordinate teams. I gave many briefings and prepared position papers for senior officers, which taught me how to be sensitive to an audience's needs. These skills have come in handy in academic medicine.

## In what ways did your father's involvement in educational programs for the Air Force inspire your interest in education and shape you as an educator?

My father recently passed away, so I have been thinking about this subject quite a bit. He was a career USAF officer who received a doctorate in education and developed many educational courses. After my father retired from the USAF, he was the director of medical education for the Alabama Medical Association. He instilled in me a respect for teaching as a profession, and most importantly, he taught me how to be a better teacher.

I was impressed with the Air Force's approach to education. It was methodical and involved realistic expectations that were tied to an assessment. There was no mysterious agenda, as I often encountered in medical school. Old tests (if you were well connected enough to get them) served as a sort of ad hoc set of standards when I was a medical student. There was very little respect for students' time.

As an educator, I strive to communicate my expectations to students, develop resources to allow them to meet those expectations, and assess their progress based on the same expectations. In addition to my father, I am fortunate to have had the guidance of educational leaders at the University of Iowa such as Wallace Lee M. Alward, MD; Andrew Lee, MD; and Keith Carter, MD. The lesson I take from the USAF and educational professionals like my father is that there is nothing wrong with telling people what you want and seeing if they do it.

## You and several coauthors recently researched the place of extracapsular cataract surgery in residency programs. What were the key findings of the study?

Bonnie An Henderson, MD, led the survey-based study that we published last year in *Ophthalmology*.<sup>1</sup> Our goal was to determine if residency programs teach extracapsular cataract surgery (ECCE) and whether leaders in residency education view ECCE as an important surgical procedure. Our findings were not surprising. One-third of programs require ECCE training compared to about three-fourths reported in a similar survey 10 years ago. There does seem, however, to be increasing interest in teaching small-incision ECCE (especially for mission work) in residency programs.

## What do you consider to be your greatest personal achievement outside of your profession?

I am very proud of my three children, Drew (22), Lilli (20), and Blake (16). Most of the credit for their successes should go to my wife, Marguerite. She is unlikely to read this, though, so why not take some of the credit for myself? ■

1. Henderson BA, Oetting TA, Yang EB, et al. Teaching manual cataract extraction. *Ophthalmology*. 2012;119(10):2191.