

# WHEN YOUR OD PARTNER BECOMES THE SURGERY PATIENT



Is there a better seal of approval?

AN INTERVIEW WITH BLAKE K. WILLIAMSON, MD, MPH, MS;  
ANN H. SHAW, OD, MS; AND ROGER F. SHAW III, OD

**W**hy is having a close and respectful connection with optometrists both within and outside your organization important? According to Blake K. Williamson, MD, MPH, MS, of Williamson Eye Center in Baton Rouge, Louisiana, it's because "comanagement and the collaborative care model are the future of surgical eye care." Optometry is moving toward the integrated care model—whether that's ODs and MDs working in combined practices or ODs and MDs comanaging most (if not all) refractive and cataract surgery patients. For this reason, Dr. Williamson says, "strong relationships between ODs and MDs working together are crucial in providing the best possible care to our patients."

From Dr. Williamson's perspective, if ever there was an indicator of a strong relationship with mutual trust and

respect between an OD and an MD, it's when an OD chooses their MD partner to perform surgery on their own eyes.

Dr. Williamson joined two of his OD colleagues in Louisiana, Roger F. Shaw III, OD, and Ann H. Shaw, OD, a father and daughter who were both operated on at Williamson Eye—Dr. Roger Shaw by Dr. Williamson (Figure)—to discuss the value of trusting collaborative care partners with their own visual needs. All three individuals agree that it demonstrates to the primary care patients of comanaging ODs that their optometrist believes not only in a given procedure but also in the practice they are being referred to for surgery. "Optometrists are often patients' primary source of information and advice regarding whatever operation they may need, so being able to speak to the firsthand



Figure. Dr. Shaw and Dr. Williamson at Williamson Eye.

experience in that referral practice can enhance trust," Dr. Roger Shaw noted. "It allows more candid conversations about what patients can expect."

## CHOOSING YOUR MD PARTNER

"Having had the opportunity to see the surgical outcomes that Dr. Williamson, and Williamson Eye Center in general, was achieving for our patients made it easy to select him as my own surgeon. I saw firsthand Dr. Williamson's

## OD EXPERIENCE WITH CATARACT SURGERY AT WILLIAMSON EYE CENTER

By Roger F. Shaw III, OD

The only way I can describe cataract surgery now, having had it, is that it was incredibly easy. There was nothing to it—I was in and out, had no pain, no discomfort. And my vision is fantastic; I'm very pleased with the outcome. It was nice to have the so-called *white-glove service* that Dr. Williamson referenced, but I know that the patients we refer are going to receive the same care I had, and I can speak to that when discussing cataract surgery with them. I can share my personal experience, and in doing so help calm any anxieties patients may have. It was amazing to see all the modern technology like the femtosecond laser; cataract surgery has changed quite a bit over the 40 years I've been in practice.

## OD EXPERIENCE WITH LASIK AT WILLIAMSON EYE CENTER

By Ann H. Shaw, OD, MS

I underwent LASIK at Williamson Eye Center, and everything went perfectly. Admittedly, I was probably the worst patient! I was worried in general and asked tons of questions. Each one was answered thoughtfully, and my anxieties were addressed. My experience having undergone LASIK is something that I discuss with my patients who are considering refractive surgery. I can speak directly to what they can expect to experience postoperatively and what to look out for. I tell them that, after the first day, your eyes will feel a little dry, and you may have issues driving at night, but that this gets better in time. Having had LASIK personally is a lovely way for me to relate to my patients who are considering the procedure for themselves. I always tell them that it is one of the best things I ever did for myself.

commitment and attention to detail concerning visual outcomes and the patient experience,” Dr. Roger Shaw said. (For more information on his surgery experience, see *OD Experience With Cataract Surgery at Williamson Eye Center.*)

Dr. Ann Shaw had LASIK at Williamson Eye Center. “I think the reasoning behind my motivation to undergo LASIK at Williamson Eye was based on the fact that I knew that’s where I’d be sending my patients who wanted laser vision correction. Having gone through the experience myself, I’m better prepared to educate my patients on what to expect in their surgical journey.” (For more information on Dr. Ann Shaw’s surgery experience, see *OD Experience With LASIK at Williamson Eye Center.*)

### OPERATING ON COLLEAGUES

When you’re treating a colleague—who has trusted you with their own eyes and sight—it’s natural to focus on ensuring that surgery goes perfectly. But the patient experience is also top of mind for Dr. Williamson. “When you have someone on your clinic schedule like Dr. Roger Shaw or Dr. Ann Shaw, members of a respected optometric family in our community for 40 years, of course you want to be sure the staff knows they are coming and that your team does the simple things such as making sure they don’t have to wait in the waiting room on arrival and are greeted at the door and walked directly into a private exam suite.”

According to Dr. Williamson, colleagues and VIPs should always receive the same surgical experience

as other patients during the actual operation; the differences exist pre- and postoperatively only, in the way different technology choices are described and in the way their patient experience and follow-up plans are shaped. “I firmly believe the surgery itself should be identical no matter who the patient is—and it always is for me. It doesn’t matter if I’m operating on an NFL star, an LSU All-American, an optometrist, or an ophthalmologist—once I’m inside the eye, it’s all the same for me.” The process leading up to the surgery itself, he admitted, can be much more involved with patients he has a connection to.

Dr. Williamson added that, because optometric colleagues are experienced in eye care and familiar with the surgical terminology, conversations about the benefits of technologies such as femtosecond lasers, astigmatism correction, advanced technology IOLs, and modern excimer ablation profiles can be much more involved than with patients naive to the eye. Dr. Ann Shaw added, “For me, the process of having LASIK and getting to understand the technology better has made me more confident in answering my patients’ questions and participating in the comanagement relationship.”

### CONCLUSION

Operating on OD colleagues whose lives can benefit from cataract or refractive surgery represents a living testament to the collaborative relationship between the more progressive MDs and ODs throughout our country. “It used to be about

politics and turf, and it still is in some places. Even in my own market, you experience some of the old grudges and dogma from time to time,” Dr. Williamson said. “But I just stay positive and focus on working with a small, select group of like-minded, positive people. I’ve always believed those fights to be futile. There’s room for everybody along the patient journey. Even though modern cataract and refractive surgery is transformational, there will always be patients who prefer contacts or glasses or can’t afford a vision correction procedure. Similarly, there will always be the need for great primary eye care.”

Dr. Williamson believes that medically minded optometrists see refractive surgery not as a threat but as a potential new revenue stream and opportunity to enhance their knowledge and build their practice—and what better way to learn than by doing? ■

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