



# THE CHANGING FACE OF OPHTHALMOLOGY

Current status and future outlook of practice changes in the COVID-19 era.

**T**he changing face of ophthalmology has many new characteristics that emerged in 2020. Despite quarantines and shutdowns, minor breakthroughs in ophthalmic medical devices and procedures were made. The practice of medicine today, however, looks nothing like it did before the COVID-19 pandemic.

I usually wore a mask at work every day during surgical procedures, but for more than a year, I've had to wear an N95 mask all day. All of my patients and my staff wear masks, too. Plexiglass adorns the check-in/out desks and the surgical counselors' area. It seems like slit lamps, chairs, and counters are now disinfected more often in 1 day than they were in my entire 25 years of practice. The break room used to be full of chairs and snacks. Now, most of the chairs are turned over, and just a few are available and positioned 6 feet apart. Many staff members eat in their cars. I could list more examples of changes that have affected ophthalmology, but all of us have experienced similar shifts in setup, workflow, and patient care.

The focus of eye care delivery has always centered around patient services. During the past year, we have had to devote additional time and energy to addressing other matters, including financial crisis management, staff retention, telemedicine, and physician burnout. Some of our changes will stick, and some will fade away.

Logistically, managing a modified office environment has been no easy feat. This month, I asked our contributors to speak about how the face of their ophthalmology practice has changed and the strategies they have employed to make it through the pandemic successfully (or at least as a human being).

Let's hope that, with the updated CDC guidelines on mask use for vaccinated individuals, we will soon be able to see the smiles of our staff, our patients, and each other again. ■

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