Celebrating 50 years of **C_{20}H_{10}O_{5}Na_{2}** in Ophthalmology
The President's Niche

Dear Friends,

2009 is a Banner Year for the OPS!

It’s a year that marks two extraordinary events – the 50th anniversary of the development of fluorescein angiography AND the 40th anniversary of the founding of the OPS. These remarkable milestones deserve special consideration, and we will be granting them their due accord at the OPS annual meeting in San Francisco. What better place to celebrate these events which made such great impact on our profession than at an educational program that strives to share information on current and developing technologies and provides a common meeting place for ophthalmic imaging professionals. That is the definition of a meeting – “an assembly for a common purpose.”

The first retinal angiogram, which utilized a fundus camera and fluorescein sodium dye, was a collaboration of two medical students whose common purpose was to find a way to document retinal circulation. As fluorescein angiography has been widely accepted as the cornerstone of ophthalmic photography, it is hard to imagine a time when it was not an essential component of the practice on Ophthalmology. As part of the OPS commemoration of its discovery, several key physicians who were pioneers in the development and acceptance of ocular angiography have been asked to share their thoughts and reminiscences on that historic event and its importance in the diagnosis of retinal disorders. Their comments are being collected and will be available for review at the Annual meeting, and later on the OPS website.

When Johnny Justice, Lee Allen, Earl Choromokos, Terry Tomer and Don Wong met at the Palmer House in Chicago in October, 1969, their common purpose was to build a professional society dedicated to stimulating and maintaining high quality ophthalmic photography. 40 years later, that is still the aim of the OPS.

As fluorescein angiography has evolved, so has the OPS. This year all the OPS Boards will meet in a special session dedicated to taking stock of current Society practices and preparing the OPS for the future: a common purpose of maintaining a professional society that encourages and educates to provide high levels of quality in ophthalmic imaging and therefore, in patient care.

I sincerely hope you will be able to join us at the OPS Reception at the annual educational program to celebrate these significant milestones in this banner year. ■

Paula

CONGRATULATIONS TO JCAHPO FOR AN OUTSTANDING YEAR!

Not only does 2009 mark the 40th anniversary of the Joint Commission on Allied Health Personnel in Ophthalmology, it also brings the announcement from the United States Bureau of Labor Standard Classification Committee that Ophthalmic Medical Technician will be recognized as a separate occupational classification starting in 2010.

Happy 40th anniversary and best wishes for continued success in all your endeavors in behalf of ophthalmic personnel.
This year marks the 50th anniversary of the first successful fluorescein angiogram in a human subject. In 1959, two medical students, Harold Novotny and David Alvis began working under John Hickam, Chairman of Medicine at Indiana University on a research project funded (in part) by the United States Air Force. Dr. Hickam was interested in the retinal vascular bed as a visible segment of the cerebral circulation. He was searching for a photographic technique to estimate blood oxygen concentrations in retinal vessels.1

The students began by learning to perform fundus photography and they noted what appeared to be fluorescence from the crystalline lens. This led them to question whether it would be possible to photograph fluorescence in the retinal vessels using a fluorescent dye such as fluorescein. They presented the idea to Dr. Hickam, who gave his approval along with the suggestion that they would need to determine the excitation and emission wavelengths of fluorescein. A blood sample was mixed with fluorescein and sent to James Hartigan at the Eli Lilly Pharmaceutical lab for measurement with a spectrofluorometer. They found the peak excitation of fluorescein to be around 480nm and peak emission to be 520nm.

They then plotted the spectral transmission curves of numerous filters looking for a combination that would be effective for angiography and chose a Kodak Wratten 47 blue filter for the exciter and a Wratten 58 green for the barrier. They added a copper sulfate water bath solution as an adjunct to the barrier filter and felt that it was not essential, but resulted in sharper images. Ironically, the blue color of copper sulfate probably made their filter system less efficient and increased the crossover in the transmission curves of the broadband absorption filters. Using Ansco Super Hypan 500 speed film (pushed to 2400), they first tried the technique on rabbits and then reportedly flipped a coin to see which one of them would be the first “patient”. Alvis lost, so he was the subject of the first successful fluorescein angiogram in a human!

Following their initial results, they refined the technique on diabetic and hypertensive patients in the ophthalmology clinic as part of their research project. Neither Novotny, nor Alvis had ever written for publication before, but completed a manuscript hoping to get published in the ophthalmic literature. A brief abstract from their presentation to the Midwest ARVO meeting (April 23-24, 1960) appeared in the American Journal of Ophthalmology (AJO) in 19602 and a technical report submitted to the USAF School of Aviation Medicine (the sponsoring agency) was published in September 19603, but a full manuscript submitted to the AJO was rejected as unoriginal work! The reviewers cited work previously published by Milton Flocks and coworkers who had used a 16mm movie camera and a carbon arc light...
source to obtain fluorescein angiograms in cats, but had been unsuccessful in humans due to insufficient light.

After being rejected by the ophthalmic literature, Dr. Hickham forwarded the manuscript to a colleague who was editor of the journal *Circulation*. The landmark paper, “A Method of Photographing Fluorescence in Circulating Blood of the Human Retina” was published in *Circulation* in 1961. Novotny and Alvis went on to continue their medical education. Alvis began a residency in ophthalmology at Wayne State University, where he made several requests for support to continue his work in angiography. His requests were denied and he did not pursue angiography any further.

Following publication of their report, several investigators studied various clinical applications of angiography, quickly establishing the intrinsic value of the technique. Further technical innovations such as improved filter combinations, fast recycling flash units, and digital imaging techniques were gradually implemented, but the basic principles and technique originally described by Novotny and Alvis remain the same today.

Some years later, Alvis was recognized for his pioneering role in fluorescein angiography and received an apology from the journal editor who had originally rejected the manuscript. Finally feeling some vindication for his efforts, Alvis wrote, “I had an idea how Orville and Wilbur Wright must have felt when they finally received support for their heavier-than-air machine which was thought to be unworkable.”

For more reading, visit the archives of the Journal of Ophthalmic Photography on the OPS website for these and other articles on the fascinating history of angiography:

Alvis DL, Julian KG. *The story surrounding fluorescein angiography*. JOP 5:6, 1982


Saine PJ. *Landmarks in the development of fluorescein angiography*. JOP 15:17, 1993

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References:


In celebration of the 50th anniversary of Fluorescein Angiography, an historical video project that has been years in the making has come to fruition and will be shown for the first time at the OPS Annual meeting in San Francisco. Jim Gilman, CRA, conceived of a video relating the complicated first steps taken by Drs. Novotny and Alvis as they sought to develop a way to document retinal circulation. With great determination Jim arranged over time to record interviews with these pioneers, and has produced an excellent retelling of the “birth” of fluorescein angiography in “Discovering Fluorescein Angiography”, Jim described the story of the conception and development of this exciting project in this way:

“Being the inquisitive photographer that I am, I became curious as to how fluorescein angiography ever came about. In the not so distant past, we busily burned through cases of film and injected innumerable vials of dye throughout busy retina clinics, but I wondered who was responsible for introducing such a valuable tool to the armamentarium of ophthalmic photography and aiding in retinal diagnoses?

I started my journey of discovery when Don Wong, a brilliant photographer turned administrator, told me the story of Novotny and Alvis and their struggle to publish the first human angiogram. The course of events surrounding the discovery was too compelling to leave to just an oral or written history: I wanted to videotape the players relating their viewpoints and get the story "straight from the horse's mouth", so to speak.

I started by schlepping my giant SVHS video camera to Palo Alto and I interviewed Dr. Novotny at his home. I was also in touch with Milton Flocks’ son, Franklin, who supplied me with photos and the original 16mm movies of cat angiograms. I then traveled to Indianapolis and through the help of Tim Steffens, interviewed Dr. Alvis and photographed the original camera used to make the first human angiogram. I was able to dovetail an interview with a clinical trial meeting in Miami, and with the help of Ditte Hess I was able to interview Dr. Noble J. David. Later Ditte was able to interview Dr. Don Gass for me.

I have continued to learn new things as I compile all this information and convert it into an accurate historical video, aiming to let as many people as possible learn the tale as I have. Many people collaborated on this effort - I could not have pooled such talent by myself. The timely completion of this project coinciding with the 50 year anniversary of fluorescein angiography is quite serendipitous and I look forward to sharing these efforts at the OPS Annual meeting.”

A small portion of this special video will be shown during the OPS Reception on Friday as part of the commemoration of the 50th anniversary of FA, and the entire documentary will be shown at a special viewing at 4:30 on Saturday afternoon, following the completion of courses. The OPS congratulates Jim on his foresight in appreciating the value of a video history of this diagnostic procedure which is the cornerstone of our professional Society and his willingness to share it with our members.

Mark your Annual meeting calendars! This is a special event you won’t want to miss!

—Paula Morris, CRA, FOPS
Spotlight on the OPS: Nominating Committee

According to the Random House dictionary, to “nominate” is to propose a proper person for appointment or election to an office. That sounds like a fairly simple task, doesn’t it? The act itself is fairly easy – the work behind the nomination is where the challenge lies. Continuing the series of articles designed to acquaint members with the hard working committees that serve the OPS, the third committee to be featured is the Nominating Committee.

The Nominating Committee is one of the Bylaws mandated standing committees that serve the BOD. Its purpose is to seek out and interview potential candidates for OPS elected positions, and ultimately prepare a roster of qualified candidates for BOD and BOE positions. Its members include the OPS Secretary, a Director-at-Large, and a representative from the Board of Education and the Board of Certification. By having representatives from each Board in the group, the committee seeks to provide a more global view of the membership, broaden the exposure of all aspects of the Society to potential candidates, and collaborate in presenting information about the different elected positions so that candidates can have a better understanding of where their individual strengths and interests might find “the best fit”.

While the Board of Certification holds its own Board elections with candidates who are certificants, their input and perspective is very valuable in preparing ballots for OPS general elections. And in the process, they may learn of members who are interested in specifically working with the certification programs.

The Nominating Committee uses all the resources at their disposal to seek out interested individuals: solicitations for interested members through the newsletter and electronic member list, phone calls, emails, and one of the most effective and personal approaches, interviews with members at educational programs and other OPS events. They are prepared with written descriptions of the duties of each elected position for interested members to review, and are ready to answer, to the best of their collected ability, any questions potential candidates may have. Their goal is to have at least two candidates for each position – a daunting task that is not always achieved.

The only way the Nominating Committee can reach its goal is if they can find interested, motivated OPS members who are willing to volunteer some of their time to serve the Society. Makes sense, doesn’t it? The best candidates are members who truly want to help the OPS stay vital and still evolve to meet the needs of ophthalmic imagers. And the best way to find these motivated people is to learn of someone’s interest. Let the committee members know of your interest, seek out information, and learn more about the OPS so you can find an area where you can truly shine. If you are interested in learning more about how you can serve the OPS, contact Committee Chair Cindy Montague at cramsey@opsweb.org OR at secretary@opsweb.org. If you feel a little shy, let any member of any OPS board know of your interest, or contact Executive Director Barbara McCalley. Either route will get that information to the Nominating Committee.

Our Nominating Committee will be actively engaged in speaking to members about serving the OPS at our annual educational program. They are a highly motivated and pleasant group! Don’t hesitate to let your interest be known!

—Paula Morris CRA, FOPS
Chicago Chapter News

On July 14th, 2009 the OPS Chicago Chapter and the SOMAC, (the Society of Ophthalmic Medical Assistants in Chicago), joined forces for a CE program at Rush University Hospital in Chicago. Pamela Hulvey, CRA, and Lead Photographer hosted the event. The program, Oct Imaging: Clinico-Pathologic Correlation, was presented by Michael Davis MD. Dr. Davis gave a visual tour of the ocular anatomy as seen with various OCT instruments including Fourier Domain and Spectral Domain comparisons. Dr. Davis then went on to show examples of pathology starting with single pathologic entities such as CME, Macular Holes, and Epiretinal Membranes, to more complex presentations mixing in several pathologies, and followed up with a visual quiz for the audience. After the formal program, we had the opportunity to tour the Rush University Eye Center, and get hands-on experience with the equipment covered in the program.

Our thanks to Dr. Michael Davis, Pamela Hulvey, and the staff of the Rush University Eye Center for an excellent educational program and a chance to socialize with the 40 photographers and technicians in attendance.

—Alan Frohlichstein, CRA, FOPS

WHAT’S IT LIKE ON YOUR WAY TO WORK, SHARE IT WITH THE REST OF THE WORLD!!

Ever wonder what it's like to live and work in Maine, Florida, Nebraska, Alaska, New Mexico, California, Texas, England, Japan or any of the world wide locations that ophthalmic photographs live and commute from home to work?

One of the best ways to gather insight into a place is where we commute. What scenery do we look at day after day that no one else sees but us?

Find the best five images that catch your eye, perhaps they are scenes you have even thought about photographing but never did and share them with your fellow ophthalmic photographers. This is not a contest but a way to better know our many different members and understand where they live and work.

The rules are:
1. Photographs have to be taken from the way you commute, car, train, bike, walking, etc.
2. Photographs have to be taken around the time of day you commute.
3. Photographs have to be on a route you normally would take to or from work.
4. Photographs can be taken on a weekend (so you're not late to your job)

Upload the photographs to http://flickr.com

The Sign in ID is: opsweborg@yahoo.com The password is nixamo (for Nixa, Mo. the headquarters of the OPS). Leave the security open so that everyone can view them. To view the photographs, look under: Flickr People search ops commute. If you have trouble viewing or would like help uploading the photographs, contact Jim Gilman, CRA.

james.gilman@hsc.utah.edu (801) 581-6947 (801) 581-8716 (fax)
Unsure about going to the annual program?

Look at all the fun you will miss!!!!
My Experience with the OCT-C Certification

I was a little apprehensive about taking the Ophthalmic Photographer Society’s (OPS) OCT-C test. I thought to myself, “How is this going to help me?” At that time, I did not see the benefit of taking it, since I helped to write it. I had obtained the Certified Retinal Angiographer (CRA) because it benefited me directly in my work. Without a clear-cut understanding of how I would be helped by it, I took the Optical Coherence Tomography Certification (OCT-C) test and became OCT-C a year and a half later. Unexpectedly, taking the test finally put everything into perspective. I really appreciated the detail and time that was put into creating this test. Passing the OCT-C, means that you understand the concepts behind scanning, as well as the underlying technology on which OCT is based. Just because you have a camera does not mean you are a photographer. Therefore, the same can be said of scanning with an OCT device. Many people can take scans, but few understand the processes, reasons, or have the skill to obtain an image of high quality with the greatest amount of usable information. A great OCT scan is worth a thousand words.

So now that you want to take the OCT-C test, where do you begin? Providing you meet the prerequisites for taking the test, the first thing you need to do is submit a portfolio. Once the portfolio is approved, you can then sit for the test. The catch is that until now, the portfolio requirements for the OCT-C were originally designed with the time-domain Stratus® in mind. The Stratus® uses lines, either single or in a radial pattern with different lengths and angles, for almost all of its scans with the exception of the Retinal Nerve Fiber Layer (RNFL) scan which is a circle scan. The macula is done with Radial Lines whether fast (128 A-scans) or slow (512 A-scans). The optic nerve is taken with a circle and radial type scan, both fast and slow. A single line scan (512 A-scans) will show you a cross section of the retina for diagnostic evaluation. A Fast Macular Thickness Map will give you a map with normative data but when looked at individually, the 128 A-scan OCT images are not recommended for Individual diagnostic evaluation.

The majority of the new spectral-domain (SD) OCT devices do not mimic these Stratus® scan patterns. It’s hard to know what scans to submit that are equivalent to those of the Stratus®. We have gone from scanning at 400 scan per second (SPS) with the time-domain systems to a whopping 20K-40K SPS on the spectral-domain systems. Although there are differences between scan strategies and quality of Time Vs Spectral domain scans, the techniques, artifacts, and procedures are very similar; similar to changing from film to digital photography. Patient positioning, focus, working distance, media opacities, to dilate or not, are all factors that still remain the same for whichever OCT device you plan to use. The major differences are in the software and knowing what analysis and scan patterns will get you the correct information.

Most maps in SD OCT’s are produced using a set of Raster scans – horizontal, vertical or mixed. Other instruments, such as the Cirrus®, RTVue®, Spectralis®, 3D-OCT®, are capable of also doing a combination of scan patterns to map the macula and optic nerve against a normative data base.

What happens if you don’t have the Stratus®? In order to take the guess work out and put an end to your frustration, the OPS has worked together with the all the spectral domain companies and recently approved the portfolio requirements for the Cirrus®, RTVue® and Spectralis®, 3D-OCT® SD-OCTs. Now, if you have any of the SD-OCT’s, there is no reason for you not to submit a portfolio. The new portfolio requirements will challenge the candidate and assure that he or she has a good understanding of how the Cirrus®, RTVue®, Spectralis®, 3D-OCT® work and also how to use the different types of scan patterns. The new SD-OCT portfolio requirements will be available online at the OPS website for download at http://www.opsweb.org/. If you are using another instrument, ask the manufacturer to provide you with an OPS-approved portfolio outline.

Good luck,

—Carl Edouard Denis CRA, OCT-C, CST
Results of BOC Elections

The OPS Board of Certification is pleased to announce the results of the 2009 BOC Elections. The Board of Certification recently held the first ever OPS electronic election. 176 of the active CRAs and OCT-Cs cast ballots. Thank you to all candidates for your willingness to serve and to those that voted for taking an active role in their certification program. The ballot was filled with excellent candidates and the BOC encourages those not elected this year to not be discouraged. As a volunteer organization, the OPS has many opportunities for service and the BOC elections will come around again next year. Peter Hay, CRA, FOPS and Jonathan Shackle, CRA, OCT-C were re-elected, Donald Enkerud was re-elected by BOC vote and Stephanie Burke, CRA was newly elected to the board.

— Mark Croswell, CRA, OCT-C, COA

“Why Certify?”

You may know why but do you know how? Members of the Board of Certification will be present to answer your questions about the CRA™ and OCT-C programs. You will have the opportunity to learn what makes a portfolio submission acceptable, hear about the examination experience and learn the advantages of becoming certified. This is a come and go as you wish session, so stop by, meet your Board of Certification, and get the right answers to your certification questions. Earn your imaging credentials from the Eye Imaging Experts! This will be the best time to learn all about both certifications.

Please join us and learn more! Saturday, October 24th, 12:00 pm to 1:00 pm in the Mission III Room of the Parc 55 Hotel, San Francisco, CA.

Final 2009 RECERTIFICATION REMINDER

Certified Retinal Angiographers who were certified or recertified in 2006, this is the third (2007-2009) and final year that your certification remains valid. Recertification postcards outlining the 2009 recertification requirements were mailed in February of 2009. The 2009 website includes detailed instructions concerning the Continuing Education Credits, current CPR requirements, and current Recertification fees.

You must visit the Recertification Page on the OPS Website: http://www.opsweb.org/Certif/Recert.html and PRINT your Application and Instructions. No application will be mailed.

Please review your membership status (dues payment) with the membership office prior to mailing in your completed application. The OPS membership office may be reached at 1-800-403-1677.

Please check that your OPS mailing address is correct. The BOC sends mail to the home address. If you did not receive a 2009 recertification postcard and your certification is due to expire, please contact me. My goal is 100 % recertification. Do not wait until December 31, 2009 to address your recertification concerns. Certification is important and may someday be mandatory.

CPR certification has been very hard for some to achieve during the last two years of recertification. Please try to address this issue early in the year so you are not scrambling in December to find an open CPR class.

If I may be of any assistance, please call, write, fax or email me.

— Peter Hay, CRA, FOPS
**Deadlines for CRA and OCT-C Testing Dates**

San Francisco, CA  
OPS Annual Education Program

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tr>
<td>September 11, 2009</td>
<td>Portfolio Submission Deadline</td>
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<tr>
<td>October 9, 2009</td>
<td>Exam Application Deadline</td>
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<tr>
<td>October 24, 2009</td>
<td>CRA Written</td>
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<tr>
<td>October 24, 2009</td>
<td>OCT-C Examination</td>
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For a current list of CRAs & OCT-Cs and renewal dates for certifications, go to:  [http://www.opsweb.org/Certif/certifieds.html](http://www.opsweb.org/Certif/certifieds.html)

Questions about CRA or OCT-C certifications?
CRA@opsweb.org or OCT@opsweb.org

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**Celebrate the Push!**

The OPS is offering limited edition tee-shirts honoring the 50th anniversary of fluorescein angiography. These 100% preshrunk cotton shirts are available in all adult sizes, S – XXXL for $12.00 plus shipping. Order from the OPS online store at [www.opsweb.org](http://www.opsweb.org). Be one of the few to own this limited edition Tee-Shirt and proudly show your support of 50 years of ophthalmic testing.

A very limited number of shirts will be available at the annual program. Contact either Cindy Montague or Barb McCalley during the annual program for one of these shirts.

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**New CRA, OCT-C for 2009**

The Ophthalmic Photographer’s Society, Board of Certification is proud to acknowledge this years Certified Retinal Angiographers. With one more exam scheduled at the meeting there is time in 2009 to add your name to this list of motivated individuals who have taken an important step in furthering their professional careers.

Melanie Bailey, CRA, OCT-C

Jessica Gaultney, CRA

David M. Griffith, CRA

Sarah A. Harmon, CRA

Rachel A. Hollar, CRA

Kristin A. Konecki, CRA

Patrick Lamy, CRA

Elona Miller-Long, CRA

Brenda Nakoski, CRA, OCT-C

Jim R. Oramas, CRA

Bryan E. Chenoweth, CRA

Chad K. Harris-Hoyle, CRA

Julia Monsonego, CRA

Steven A. Bennett, CRA

John Head, CRA, OCT-C

Jim Soque, CRA

Katie M. Kilgo, CRA

Elaine Lok, CRA

Frank P. Pari, CRA

Join the Board of Certification, myself, and I am certain the entire membership of the OPS in congratulating our newly certified colleagues.

— Allen R. Katz, CRA, OCT-C, COT
Jennifer Licata, the Journal of Ophthalmic Photography Production/Design Director.

The Journal of Ophthalmic Photography was first published in 1978, a year after the foundation of the Ophthalmic Photographers’ Society. The first Editor was Don Wong, one of our Founding Members. Since that time, the Journal has kept pace with technology from its humble monochrome origins to full color reproductions throughout. Desktop publishing, electronic data interchange, and proofing from members and advisors have all been incorporated into the day to day running of the Journal. This year the OPS Board of Directors agreed to funding the usual two Journals in addition to a Supplement on Spectral Domain OCT imaging. If you look at these Journals, the number and quality of images has dramatically improved and is now a leader in bringing up-to-date images from the latest devices quickly and seamlessly from our OPS Imaging Experts to you, the Readers.

But how does this happen? Jennifer Licata brought her skills as a Lecturer in Graphic Arts at Buffalo University to our Journal, joining in late 2000. Jennifer immediately set about upgrading the Journal infrastructure with fast internet connections, the latest Quark desktop publishing software and a new energy that has come to fruition in the high quality Journals we now receive today. Minor things like getting married and having two children have not swayed her from her high standards and commitment to the Journal. Jennifer also coordinates the Journal proofing process, sending out pdf files of each Journal to the Review Panel (names listed on the inside cover of the Journal), incorporating responses for changes which may go through several versions before the final document is agreed upon. Jennifer also coordinates vendors advertising material incorporation into the Journal documents, a process that can be stressful at times with last minute changes to numbers of advertisements and the quality of documents supplied. Without the help from Vendors, the Journal could not exist in its current form as costs would be too prohibitive for a society the size of ours. After final agreement on layout and content, Jennifer then “sees” the Journal through the ink printing process. As we all know, this is not an easy process and has a high cost so a critical eye is essential to ensure that the quality is maintained throughout the process. One early Journal had to be reprinted completely and Jennifer made certain that there was no cost to the OPS and her highest quality standards were maintained. So, having Barbara McCalley at head office and Jennifer Licata at the production end of the Journal, we are in very capable hands indeed.

We are unable to predict what new technologies we may move to in the future to share information amongst our members. However, with Jennifer at the Design/Production helm, we are sure to carry on a tradition of giving the best Journal...
practicable to our readership: incorporating innovative changes in appearance and content and moving forward with the highest available standards in Journal reproduction whilst reducing costs. Did you know that our Journal has been produced electronically for over a decade and distributed to our moderators at a minimum cost to the OPS whilst incorporating self scanned images where possible to keep a tight rein on costs to the OPS? Perhaps with the rate of current technological change we forget that in the late 1990s this was cutting edge technology?

So we thank Jennifer for her knowledge, a gentle understanding of the vagaries of group committees and the maintenance of the highest standards in publishing such “image rich” Journals. We remain in the forefront of many other publications with far higher budgets and staff numbers and we sincerely hope that you will continue to guide us through the technological minefield for many years to come.

Jennifer, a big thank you from the Journal Team for all your hard work. Thanks also from the members of the OPS, both local and international, where the Journal is often the only interaction with the Society and positive feedback has arrived from all over the planet reflecting the highest of standards in Journal production that you have set. ■

—Chris Barry, CRA, FOPS

**Make New Friends.....Have Fun...and Give back to your Society all at the same time!!**

The OPS provides great opportunities for both new and veteran photographers to get to know others in our field and support our education program! There are a variety of ways you can be involved at our annual program in San Francisco.

**Room monitors** are needed for every class that is taught. In exchange for performing some classroom duties such as overseeing attendance and course materials you receive credit for the class you are monitoring at no charge. Sign up now! Training is provided at the Annual Meeting. If you are interested or have any questions, contact: Laura Savage, BOE Volunteer Committee Chairperson at: ops.roommonitor@tds.net.

**A.V. Equipment Assistants** are needed for setting up data projectors and to troubleshoot computers for speakers. Please consider volunteering some of your time at the annual meeting by contributing a couple hours to help with the A.V. equipment logistics. It is a great opportunity to make new friends while giving a big boost to the program!

Contact: Hoang Nguyen Phone: (303) 984 - 0189 E-mail: opsav_email@yahoo.com

**Workshop Instructors** are needed for every workshop subject: TD and SD OCT; FA, Beginner Fundus Photography and Advanced Stereo Photography, Slit Lamp and Gonio photography and SLO imaging. The more workshop instructors that we have, the more one-on-one time for our students to learn! This is a terrific way to contribute to the OPS, to network and to work on your training skills. If interested, please contact: Mike Kelly (for OCT workshops) 919-684-3139 Stephanie Attebery (all other workshops) 206 499 4705

**Workshop Equipment Set-Up** assistance is needed in getting all of the instruments into the appropriate rooms for the hands-on workshops. If you are interested in participating, please contact Chuck Hamm, CRA, OCT-C at (573) 882-8471 or by email hammc@health.missouri.edu.

**Registration assistance** is needed to help hand out the pre-registration packets on Friday. Assistance is also needed on Thursday to help set up registration. If you are available to help at either time, please contact Barbara McCalley by phone 800-403-1677 or email ops@opsweb.org.

Don’t miss out on these wonderful opportunities to get to know new people, build a network of contacts in the field and get involved with our organization! We hope to hear from you soon!■
Opportunities

Ophthalmic Photographer

Visualize a career with focus

The Rocky Mountain Lions Eye Institute at the University of Colorado Hospital, voted nationally to be in the top 10 for patient care, is comprised of world-class doctors and dedicated clinical staff who love the science, innovation and appreciation that comes with working at a world-class institute. Leading eye surgeons and specialists are drawn to the research, the commitment to providing positive outcomes and the multiple specialties that are dedicated to restoring, enhancing and preserving eyesight.

We seek a talented Ophthalmic Photographer to operate specialized ophthalmic equipment and perform imaging procedures which will accurately capture various images of the eye.

The ideal candidate will have

the following experience:
Certified Retinal Angiographer Formal vocational training with at least 3 years’ related experience. Excellent communication and people skills

We are proud of the teamwork and collaboration that positively impacts the advancement of ophthalmology at The Eye Institute and we look forward to the impact it can have on your career.

Don’t blink and let this opportunity pass you by. Join our fast-paced and challenging environment and apply online at www.uch.edu. Req. #299914.

Excellent compensation and benefits available. EOE/AA.
Work from Home

Reporters needed for growing newsletter. If you enjoy writing and would like to help your society with articles about members, events or any element of the OPS, feel free to submit articles to the newsletter editor. It’s your society and it will only become better with your help.

Ophthalmic Photographer

Located on the main campus of the world-renowned Cleveland Clinic, in Cleveland, Ohio, The Cole Eye Institute has an excellent career opportunity for a full-time Ophthalmic Photographer. Working in our state-of-the-art facility, you will be responsible for a variety of duties, including digital fundus photography (including seven standard fields), fluorescein angiography, optical coherence tomography (Cirrus, Stratus, Topcon, HRA, Spectralis, and Opko) digital ICG angiography, slit lamp and gonio digital photography and external imaging.

To qualify, you should have a degree from a four-year accredited photography/imaging program, including a concentration in ophthalmic photography. An ophthalmic photography internship or three years of hospital-based ophthalmic photography experience preferred. A combination of education and experience will be considered.

Qualified candidates can apply online at clevelandclinic.jobs.

We are proud to be an equal opportunity employer. Smoke-free/drug-free environment.

We stand for BETTER MEDICINE.

Our medicine is unrivaled. Except by our people. Sure, hospitals get recognized by the technology they possess. But what they truly take pride in is the committed people they employ. At Stanford Hospital & Clinics, we’re looking for a different kind of healthcare professional. The kind that knows medicine is the priority, but only when accompanied by compassion and respect.

OPHTHALMIC TECH/PHOTOGRAPHER

Working part-time, you will perform Ophthalmic Tech II duties as well as photography. This includes the use of the digital imaging systems, external photography, slit lamp photography, fundus photography, endothelial microscopy, nerve fiber layer photos and nerve fiber layer analyzer.

We require a minimum of 1 year at the Ophthalmic Tech I level and necessary skill to perform at least 3 of the advanced testing procedures. Must have a strong background in general and medical photography with at least 2 years in ophthalmology, experience in digital imaging systems and knowledge of the anatomy of the anterior segment of the eyes, of the ocular fundus and structure and disease entities of the ocular fundus. Strong communication, organizational, interpersonal and computer skills are necessary. Certification through the national professional organization of ophthalmic photographers and JCAHPO are preferred, as are a college degree and dark room experience.

Candidates interested in learning more about joining our team may view Job #15585 and apply at: www.WeStandForCare.com. Equal Opportunity Employer