

OPS Education Survey: Your Stories

Thank you for sharing your stories in the OPS Education Survey. These stories are in no particular order. They have not been edited for spelling or grammar.

The current photographer left, and one of the doctor recommended I learn the job and take his place. I went to a course, practiced on a few people in a workshop and then started taking photos. The rest was learn as you go.

I started in 1995 after getting out of the Navy in Virginia. I was without a job for three months and went through a temp agency. My first job was in a retina practice in the spring of 1995. They needed someone to be able to start IVs. My training consisted of a tech teaching me how to use the camera and develop film. I had about one week's worth of training. I did not even understand what I was suppose to image at that time, but was curious and started reading the patient information. They were not willing to teach me even basic anatomy. After a year and half, I was let go due to downsizing. I went to work as a office manager for a medical clinic. Almost four years later, they went out of business and again I was looking. I started working for a Psychiatrist and he drove me nuts. I responded to an ad in the paper and sent my resume in to a retina practice. I had the job within 30 minutes upon sending my resume in. I started working in retina again and loved it. Jay Martin took me under his wing and taught me everything he knew and I have been in ophthalmology ever since. I have obtained my CRA, OCT-C, COA, OSA, CDOS.

I was always fascinated with medical photography and when a position came available for Ophthalmic photography, I jumped at the opportunity. I love being able to help in some small way to help patients with their eye sight.

Working as a medical photographer, I heard of a previous member of the medical photography department who was now doing ophthalmic photography. I made arrangements to spend a day with him, took a day of vacation and found out what ophthalmic photography was all about. Six months later the other ophthalmic photographer in this department and I was invited to apply for the position, which I got.

Mr. Jednock was in charge of the Ophthalmic Photography section at University of Illinois Medical Center in Chicago. I applied and interviewed for the job and I suspect he saw in me someone who had not yet been tainted by experience.

Dr. Tom Stafford, whom I worked for in Evanston, Ill. introduced me to Earl Choromokos, who taught me ophthalmic photography, fluorescein angiography and ICG angiography. I was hired by Johnny Justice at Baylor College of Medicine Jan. 2, 1973 and from there I went to Bascom Palmer in 1979 (and I'm still at BPEI) and thoroughly enjoying photographing the retina of mostly babies at this time!! It has been and continues to be a very rewarding career - I wouldn't change a thing!!!

My hospital was beginning the service for the staff Ophthalmologists. I heard about it and asked if they would permit me to learn and function as the hospital OP photographer. They said yes and I sought out an established OP photographer who was Bill Ludwick at USC. He graciously offered his time and talent to me and over time I learned the skill.

Had professional experience in photo processing & printing. Was hired to process/print angiograms & learned ophthalmic photography when not in the darkroom.

VISITED DON WONG AT MOUNT SINAI HOSPITAL. HIRED BY HENRICK MALPICA A FEW YEARS LATER. BESIDES BEING "THROWN IN" WITH A PERFECTIONIST PHOTOGRAPHER, I WAS SURROUNDED BY WORLD FAMOUS RETINAL EXPERTS IE GEORGEN WISE AND PAUL HENKIND, TWO OF THE CO-AUTHORS OF HENKIND, WISE, AND DOLLERY "THE RETINAL CIRCULATION". THE DOCTORS AND HENRICK ARE ALL GONE NOW. I WILL NEVER FORGET THEM.

Bill Nyberg at the Scheie Eye Institute, Hospital of the University of Pennsylvania took me under his wing in 1984. At the time I was working in Carpentry with no idea what I desired for a career. A Psychiatrist, who liked my photography informed me of this field. He also new I enjoyed helping people and science, and thought it to be a good match. First I met Terry Tomer & Rich Lambert at Wills Eye Hospital. Terry gave me Bill Nyberg's phone number, suggesting I call him. Later that day I did, I said to Bill "My name is Brian Jones, I am no body, could I come and see what it is you do?" He answered "Sure Captain, come on down." The next morning we met and that turned into 7 years of training off & on. He taught me optics, how to shoot stereo, explained the ariel focusing of fundus cameras, fluorescein angiography, etc. It was because of his training that I was able to enjoy such a wonderful career, and could pick and choose for whom I worked as long as they had a need. I owe my career to Bill, and part of my life to him. Dr. Brucker @ Scheie has always been gracious with me in allowing me to periodically visit Bill, further honing my skills.

Honestly, I wanted to do forensic work, but was unable to complete the requirement of being a sworn officer due to my vision. I ended up going to in Ophthalmic Photography because that's where I could get a job. I moved out of clinic as soon as I could complete my graduate degree in Instructional Design.

I was working as a professional photographer when a distant cousin who was a retinal surgeon asked me to work in his office freelance doing his fundus /fa imaging. I was introduced to Don Wong, a friend of his , who showed me the basics and got me started. I joined the local chapter of OPS and continued my on the job training until the CRA certification began. I was among the first couple of batches of examinees to take the tests. Shortly thereafter I went to medical school. I took a residency in ophthalmology, a fellowship in retina, and was offered the position of director of residency training. During the 15 years I spent in that position, I helped introduce digital imaging to the institution, 3-D ultrasound, blood flow imaging, slo/oct and macular pigment imaging, and developed the Advanced Retinal Imaging Lab. I then became Vice Chair of the department and Director of Research. Most recently I was appointed Director of Retinal as well.

Photography is my hobby. I started as an ophthalmic tech and then when there is an opening for an ophthalmic photographer in our clinic, I applied immediately.

I received a BA degree from Brooks Institute in scientific photography and MP. I then moved to Portland OR looking for a position in industrial photography. I saw an ad in the local paper advertising for a fellowship position in ophthalmic photography. I applied and I was accepted for the position. After the year of training I interviewed and was accepted for the position of chief photographer at Eye & Ear Hospital, Pittsburgh. I remained there most of my career advancing through several positions my last being Director of Ophthalmic Bioinformatics.

Natural progression from Technician work into photography.

Having been recently unemployed in the early 1980's, I went back to school for my Master's degree. I was working as a photographer for the school library and happy being a student again. My wife became pregnant and decided I needed a full time job. So she wrote a cover letter and sent a resume to a classified ad the local hospital ran. Multiple interviews later, I got the job. And then worked in the field for the next 25 years. I enjoyed a long and fruitful career.

I enjoyed Ophthalmic Photography in the technician program I attended. A few months after graduation I interviewed for a job at a multi-specialty ophthalmology practice in need of a back-up photographer. The photographers at the practice mentored me to bring my skills up to the level required by the physicians. When the practice opened a satellite office a year or so later, I became lead photographer at the new office.

I was working for Xerox in a deadend job. I knew I was going to be laid off any day. I saw an ad in the newspaper for an Ophthalmic Assistant/Tecnician and applied. I was hired even though I didn't know an OD from an OS. That was 15 years ago.

RIT

working as an eye bank director, began doing technical tasks like endothelial photography, left when medical director of eye bank took position as chairman of an academic program

Dr. Harold Scheie was building a new Eye Institute in Philadelphia and ran an advertisement at RIT. I was interviewed and got the job. That was in 1972. I've been there since.

Bill Nyberg

Attended RIT. Graduated. Posted position sought ad in OPS newsletter. Got call from first employer within the week.

Applied for entry level job at Schepens Retina Associates, Boston (because Boston professional photographers did not hire assistants!). They liked my photographic knowledge and hired me.

I wanted to become the next Ansel Adams when I went off to RIT. It did not take long to realize that Ansel's road was going to lead me back to my parent's house after graduation while trying to be discovered. In doing my research I found that 90% of Biomed Grads had a full time position within 6 months of completing the program. It was in this program that I met both Bill Fischer and former student Kit Johnson who offered me an internship. From there it was a living six degrees of separation aka Kevin Bacon game that made connections to assist me in obtaining all three positions I have had in the field. I am grateful to have entered the field when I did as the transition from Film to Digital was just about to start and everyone thought OCT stood for October.

I was interested in getting the field of medical photography (I was ready to move on from working in photo retail). There was an intriguing listing in the want-ads: an opening for a person to take internal and external photographs of eyes. In the interview, I mentioned I had worked two summers as a surgical technician, and had even done some photography in surgery. I started in 1975 with one of the OPS godfathers. Working at a medical school with many sub-specialists was a great way to learn the art and science of ophthalmic photography ("ophthalmic imaging" was a few decades away).

When I started, I was perhaps one of two or three people in my state doing ophthalmic photography full-time. The profession has grown a great deal since then. It is still the best job there is.

I started working for Johnny Justice developing E6 and B&W film at his office in Memphis TN. 17 years ago. His office was in the same building as a very large retinal practice. The practice had 6 photographers. Our office and the retina practice shared a darkroom. Over time I became friends with the photographers and expressed an interest in learning ophthalmic photography. I spoke with Johnny about this. Johnny went to Dr. David Meyer, who owned the practice and asked if I could be hired as a photographer. I was hired and through the help of the photography staff and Steve Moser in particular I became an ophthalmic photographer. That was 17 years ago. Today both Steve and I comprise the photography department at the University of Tennessee's Hamilton Eye Institute.

started as a darkroom tech at a university and worked my way to the camera room. Was let go due to budget cuts and picked up by a private practice immediately

After working as a Nurse in Europe, I arrived to the US without a US license to work as a nurse. I found that I was allowed to work as a medical assistant in a doctor's office and happened to get a job with an Ophthalmology Group. They had hesitated in hiring me as they thought I might find the job too easy, considering my background. I quickly learned the ropes and spent my down time listening to the doctor talking with the patients so that I could learn more. Management soon realized that I needed more of a challenge and asked if I was interested in working in their diagnostic lab. I jumped at that opportunity and started to learn ultrasound, endomicroscopy and photography. I never looked back at my nursing days.

After graduation got job at UC Davis, California as a Medical Photographer for 5 years. Moved to San Francisco, worked as a Ophthalmic Photographer for the University of California San Francisco for 30 years. Retired UCSF, now working for the Veterans Affairs Medical Center in San Francisco as a Ophthalmic Technician/Photographer.

I was working as a surgical technologist for a Hospital and assisted a retinal surgeon. When he was ready for a private surgical tech he asked me to join his practice and also learn retinal imaging and ophthalmic assisting. I proceeded to have two weeks on the job training and then utilized self study, JMC Eye Photo Seminars, calling other CRA's and JCAHPO training to gain knowledge in the field. I eventually became a C.O.A. and a C.R.A. I now am Director of Imaging for a large private practice in South East Florida. I started in the practice as a solo photographer and have now developed the department into a staff of 5. I continue to maintain my certifications through JCAHPO and OPS continuing education.

20 years ago I ran into Chuck (an old high school acquaintance) at a sports bar. As we caught up and compared notes he revealed that the Retina Practice was expanding and asked if I'd be interested in giving it a look. And the rest is history.

It was part of our training in the Ophthalmic technologist program I graduated from.

I did an internship in Medical Photography at Duke. After graduating at RIT, an opening for a ophthalmic photogrpaher became available after graduation. My internship had a major role in getting my foot in the door to the position.

Worked in general ophthalmology first, then applied with a Retina Clinic in 1989.

A professor in the art department at the University of Kansas received a letter seeking a person who would be interested in becoming an "Ocular Fundus Photographer". The professor contacted me, i contacted the physician that sent the request, was hired, moved to the city where the practice was and began a 26 year career in the field.

While at RIT, I signed up for a general medical photography internship and not long after, I realized there was one available in ophthalmic photography elsewhere. I quickly called and set-up an interview. I took the "job" on the spot and cancelled my other summer internship plans. I was mentored for approximately 3 weeks when my mentor told me he was going on vacation for the ensuing 3 weeks and that the "shop" was all mine to take care of. I had already learned the ropes in slit-lamp photo, fluorescein angiography and surgical photography during my first few weeks. Being a long-time photo enthusiast and after completing one year at RIT, I had all the darkroom skills and copy photo skills necessary. The residents and fellows took me under their wing when I had free time and I learned a ton about ocular disease during that tenure. I did well for the balance of the summer and returned to RIT to complet my degree. February before graduation, I was looking to make some side money and landed a job to start an ophthalmic photo service at a local Rochester hospital. They had a brand new Zeiss findis camera in a crate and a large room with a desk. I set up of the service and worked it part-time while I finished my studies and then went quasi full-time when I started Master's work in Instructional Technology in Health Science Education at the University of Rochester.

I had worked with an Ophthalmologist/retina specialist from 1982-1987 who had Alan Campbell, a photographer, at that time from Uof I, come out monthly and shoot our angiograms on a Saturday. When that MD decided to sell his practice and return to Argentina, Alan suggested I apply for a job at the Hauser-Ross Eye Institute, another practice he did photos for and actually started working full time for just prior to my change. I did relocate and about 2 years after I started there Alan left our pratice for another job. I was asked to take his place, (even though I had difficulty even opening the 35mm camera back that we used for external photos at the time-I felt less than qualified for this daunting task, but was honored to be asked and took on the challenge).

Alan trained me and 20+ years later I am still here and learning new things all the time. Unfortunately, tragically Alan's life ended before it should have. Truly I do feel I owe him my career on many different levels. But then I also owe alot to my original retina doc who gave me a love for the field and Dr. Hauser and Dr. Ross who handed me all the opportunities to advance my knowledge to the highest level I could take it. I have been VERY fortunate in my career to have a lot of great opportunities offered to me-and believe me I took advantage of them all!

Already did, worked the darkroom for 30 days, offered the full time photographer/darkroom because the other photographer quit; was a sink or swim deal. I learned to swim quite well on a diet of 60 angiograms a week, that was 1975.

I was one year out of art school, laid off from a cashier job at a photo lab and looking for work. My friend and fellow photographer from school had been doing ophthalmic photography and invited me to apply for an open position. I balked at first, saying I was going to try my hand at being a web designer. Luckily, I changed my mind. Here I am, nine years later, managing the photo dept.

I was an Ophthalmic Technician in the Navy when the 'photographer' was transferred to the Marines to go to Vietnam. The Chief of Service, Dr. Boyden, asked if any of us had any photographic experience. I quickly raised my hand even tho I had never used a 35mm camera before. I figured I could learn easily! I bought a couple of books on developing film and processing prints then proceeded to burn thru chemicals and paper faster'n light seeping thru the darkroom door. (the photographer who was leaving did spend about 5 minutes showing me how he processed the film and prints). The clinic had a black Zeiss camera with a lever to manually retract the mirror. So, you had to focus, retract the mirror manually then press the shutter release. Dr. Boyden prided himself on shooting just under 1 frame per second. I could not quite get under 1 fps. After the navy I went to work for a local retina specialist then went the corporate route into sales.

In my senior year in college, I had hoped to become a photojournalist, but with the demise of Life Magazine, the sustainability of that profession was somewhat clouded. I ran across a classified ad in our city's newspaper that had the words "Ophthalmic Photographer wanted. Experience preferred, but will train." Not exactly sure what that was, but since I minored in Biology, it seemed like a good chance to combine my two interests. I answered the ad, interviewed for the job, was hired. Four months later, the chief photographer left and I was promoted. I have never looked back. What an amazing and fulfilling career choice!

I started as the Administrative Assistant in a multi-specialty Ophthalmology Practice. The MD's wished to have more technical staff trained so I begged for the training. It took about 9 years to complete all of the training, (time spent with Ophthalmologist.) This was 31 years ago. I believe it was a win-win situation.

I had been laid off a job working as a bartender. I was collecting unemployment and needed to apply for at least 3 jobs per week to receive my benefits. I was looking for a management position which is something I had previously done and liked but on this particular week there were very few jobs like that listed. I had been an optometry technician in the military many years before and saw a job for an ophthalmic technician in the paper. I thought I could reasonably apply for that job but had no delusions about actually getting the position. I cut and pasted the worse resume I had ever put together and faxed it off assuming I would never hear back. To my surprise, a few days later, I got a call to come in for an interview. Being that I was collecting unemployment I had to go in for this interview though I was very reluctant to do so. Though I totally sandbagged the interview I liked my current manager and actually thought the position might be kind of cool. We got along well but my skills were certainly out of practice relative to other applicants they interviewed. They hired another individual for the position who never showed up. They hired yet another that worked one day and never returned, then they called me and offered me the job. I worked for several months as an ophthalmic technician when the photographer they had on staff took a position with another company. I was asked if I wanted to train and get experience in that spot which I gleefully accepted and the rest they say is history. That was 7 years ago and this has been the best job I have ever worked. LeRoy D. Judkins, COT, OCT-C

I was a general photographer and looking for a full time job after college. My parents knew Bill Ludwick (then VP of OPS) and introduced me to him. Bill invited me visit him at work and went over the operation of a fundus camera. Bill then helped me get my first job as a freelance ophthalmic photographer.

I was hired as a photo tech and progressed to ophthalmic photographer and videographer.

I turned a scandal into a career. At age 16 I began dating the optometrist who worked in the department store where I worked as a cashier. As we began dating, much to the chagrin of my parents! he taught me some basic optometry skills like lensometry, keratometry. From there I got my first job in optics at the local mall. The Spectacle Opticians in 1976 was considered quite a phenomenon. First time you could get glasses outside of a doctors office! I worked there through high school, got fired for not being "pretty enough" Have some pretty wild stories about fitting glasses at age 17, 18 when you don't know what the heck you are doing. Moved up to a small town in 1979 and got hired as "the photographer" because a) they were pretty desperate. Their long time photographer was leaving in 3 days and b) I at least knew some basic optic skills. Did my first angiogram 3 days later. Horrible results. Horrible photos my first year. Turns out in meeting Dennis Makes, CRA (one of the original founders of OIS) who was currently working for AO Star at the time.He determined the internal lenses were out of position nearly 30 degrees. Once this was fixed miraculously, my images became quite nice, my confidence was restored, and I went on to become a pretty decent imager. From there I went to work in an extremely high volume retinal practice in the 80's where 30 angiograms per day was the norm.

I was working as the Medical Photographer at Lutheran General Hospital, and as part of the service, we covered the eye clinic 2 1/2 days per week. I got more involved with the Ophthalmic work, and was eventually hired away form the hospital to work in the private practice I had been working with through the hospital.

Prior to my career in ophthalmic photography, I worked for a few years as an optician in a private optometrist's office. When a position became available at my current place of employment, a friend and coworker recommended me as a possible candidate. Six years later...I'm still here!

I was hit in the eye with a plastic practice golf ball. I had surgery (Traumatic Iridectomy) performed around 1976 which launched my interest in medicine and Ophthalmology. From there it is a typical military story. Out of high school, in a go nowhere job, so into the Navy I went. I had my choice of jobs so I became a corpsman. After about a year in general nursing type duties I discovered the Navy offered a school specializing in eyes. I took the school and have been with it ever since. 6 months or so into my ocular surgical tech career, there was a vacancy in the photography department. I took it and have been an Ophthalmic Imager ever since. I first certified as a CRA in 1997. I started in the Navy where I received the bulk of my training. I then took a job at the Moran Eye Center University of Utah where after a couple years I became the lead photographer. From the U of U I was recruited to become the Director of Imaging Services and build an Imaging department at a private practice in Houston.

was hired to work as a technician, and found an old Zeiss FF4 in the practice that wasn't being used. Read the manual and started photographing

While working as a medical assistant one of the MDs showed me how you can get a glimpse of the general health of a patient from his eyes (diabetes, hypertension). With my interest in photography, I found a medical photography certificate program at a local hospital and chose ophthalmology as my internship. I started my career in the AV dept. of an eye and ear hospital; major task was processing film and printing angios. Also worked as an ophthalmic technician for a few years, then the ophthalmic photography position became available (17 years ago). The rest is history.

I had a background in photography during and after college. I worked at the nearby Starbucks making a lot of the office's coffee. One of the Doctors came in all the time and asked me what I did for a living. I was a freelance photographer and graphic designer. I was told they had an opening in the Photography department would I be interested in doing something along the medical side. I came in for a day at the office and checked it out and then went to an off site office and was really interested in it. I took the job, 5 yrs later still here and expanding my position to include graphic design, A/V and computer help.

I worked as a technician, then the practice had a consultant come in to teach imaging.

I was trained to be come a back-up photographer so that the photographer at my multi-practice facility could trade out long evenings with me.

Worked for 3 years as a Emergency Room Tech in Northern New Jersey and as a commercial photo assistant, while studying photography. Got lucky when a add in the paper asked for a ophthalmic photographer (no experience necessary / will train right person). My past clinical medical experience plus past photo asst. experience seemed to make the choice a good one

I began working as a technician for a 4 dr ophthalmology practice. The 4th dr. began the same day as I did and he was a retina doc. They needed someone to begin doing photography and I volunteered. We looked for courses for me to attend and I ended up at an OPS mtg in Park City where I met Paul Montague, Denice Barsness, Mark Maio and Pat Saine. I then attended a similar course in Vemont where I met Michael Coppinger and the rest is history. Several yrs later Paul asked me if I would be the OPS newsletter editor, run for the BOD and so it began a long history of great friends and a fulfilling career until I went back to school to get a business/marketing degree which is what I am doing today still for the original practice that now has 25 + drs., 8 locations, 2 surgery centers and more.

I was a foreign Physician from the Philippines practicing Occupational Medicine in its prestigious Flag carrier. My wife is an RN and we migrated to the United States 6 years ago. I was employed by Loma Linda University Dept of Ophthalmology 5 years ago. My boss Ms. Terry Merrick saw the potential in me added by our growing clientelle they had me trained by Mr. Bill Milam and the rest was history.

I had a photography interest out of high school but was not ready for college. I got a job as a Darkroom technician for a Retina practice in Bethesda, MD. After working in the darkroom processing tons of angiograms they asked me if I was interested in becoming a technician/photographer. They taught me the photography in the office and also sent me to a 10 week Ophthalmic Technician program @ Georgetown University. The rest is history... I have been in the field 28 years and manage 24 technicians in 5 of our 11 offices.

My son was diagnosed with bilateral retinoblastoma at 8 months of age. He had many office visits, hospitalizations and treatments related to this. I was working as a hair stylist at the time. By the time he was 3 yrs, I had spent so much time in the ophthalmologists office with techs and imagers it seemed like a likely career move. It took me 6 months, but I was persistent and found a person in my area (Jim Jackson) willing to hire me and teach me to be an ophthalmic photographer. After two years, I took and passed both my CRA and COA. Back then, everything was on film. I also had to learn darkroom skills. As the years passed I moved up through the ranks and moved on. I am now consulting with ophthalmology practices (mostly academic institutions) across the US for clinical operations, which includes imaging departments.

I met Don Wong FOPS, COPRA as an RIT student. I was a student volunteer at the OPS course held at the Eastman Kodak Company Marketing Center in Rochester 1985. Don recruited me to NYC. Where I worked at Manhattan Eye Ear and Throat Hospital. I worked with Ed Baxter CRA at MEETH.

After I graduated with a 4 year degree in Photography I worked briefly in a Commercial-Industrial Photography Studio and then in Medical Forensic Photography. When the Dept of Ophthalmology looked for someone to establish an Imaging Department, mostly IVFA and Slitlamp photography for teaching purposes I took the opportunity. A few years later, in 1973 I took a similar position in Philadelphia and founded the Ophthalmic Service in Lankenau Hospital.. And I am still here ever since...

I was working as the front desk coordinator for about 3 yrs and was ready for a change. The position came open to work as a photography receptionist. I was hired and soon after started training to become a photographer. I trained two years, took my CRA, passed and have been a CRA for 2 years now.

Started off as a marine biology major my first year of college. I did not enjoy that major so applied at RIT for photography. Then combined science and photography and pick biomedical photography as my major.

Regular Photography just wasn't challenging enough so I switched Majors from Photography to Biomedical Photography and it was there that I learned that the only type of photography used as a diagnostic tool was Ophthalmic Photography. I thought this was an interesting fact and then the rest is history

The death of conventional photography and no other skills

Was an ophthalmic technician and really didn't like being a tech. Photographer's job was open at the same institution and I got the job. They taught me hands on. I had no photography background.

started as an ophthalmic technician- i have a biology degree and was always interested in eyes- and was jealous of the photographers and was thrilled when a position opened and i got hired.

Hired by Wills Eye Hospital Retina Serviv in 1977 after graduating from University of Delaware with BS in Biology.

I was working as a commercial photographer & seeking more stable work. I answered a Classified ad for Darkroom Technician at the Cleveland Clinic Foundation in 1990. I got the job to process FA B&W film & then print up proofsheets. The next week one of the photographers left employment at CCF & I was offered her position...the rest is history as they say! I've worked in private, research & educational enviroments. I have trained several photographers in on the job training as well.

I was working as a bartender in a restaurant/lounge in Atlantic City, NJ. I had been working in various positions in the restaurant industry for about 15 years and wanted to move on to something else. I enjoyed my hobby as an advanced amateur photographer, and thought it would be nice to be able to do something with photography. Coincidentally, at the time I was looking to change careers (1990), a well-known retinal practice was planning to open a new office in my area and they were looking for an Ophthalmic Photographer. When I saw the ad in the newspaper, I had no idea what it was, but applied anyway. I had an interview, which went well. Soon after I received a phone call that the job had been offered to another more qualified candidate. Soon after that I received another phone call offering me the position, after the other person didn't show up. The physicians I worked for and senior Ophthalmic Photographer Karen Albert were all very patient with my inexperience in the medical field, and Karen taught me the craft of Ophthalmic Photography very thoroughly. All the physicians were more than willing to answer my questions and teach me new things. A little over 3 years later, I had my CRA. I have found the profession to be very satisfying and interesting. I now work for a hospital system in upstate NY. Ophthalmic photography plays a smaller role in my current position than my previous job, and I spend as much or more time assisting with lasers as photographing patients. I continue to enjoy my work and patient contact and look forward to at least another decade in the field.

As a satellite office of Eye Associates of New Mexico, it was decided that we needed to do fluorescein angiograms and photos for our local patients. I went one day to Albuquerque to purchase supplies for a darkroom and to train on how to take and develop black and whites. Two weeks later our first patient came in who needed a FA and my photography career was underway. A few years later, I completed my portfolio and passed my CRA--this was about 27 years ago. Time flys when we are having fun and photography has always been interesting and fun for me.

Graduated with a teaching degree but no jobs summer of 1973. Offered a part-time job photographing research rabbits in Retina research lab. Finally graduated to working with patients in 1974. Certified for the DRS and ETDRS studies with numerous more today. Finally wound up in the first group of CRAs at my own expense. I guess I just like ophthalmology.

Worked physical labor with a trucking company for a little under two years after highschool. Wanted to make better money. Researched local schools in Colorado. Originally wanted to do radiology program. Radiology clinical director showed at Pima Medical Institute screened me, showed me graphic images in radiology field. That was not for me. I asked "what else you offer?" Respiratory Tech just plain gross, Radiology program can be pretty ugly. OMT program same pay scale and unlike other programs OMT program had class rooms chalk full of lots of interesting diagnostic equipment. I was sold. I loved all the toys. Since imaging diagnostics have always been my interest. During OMT program did 1st clinical rotation with University of Colorado, they were doing research on retinal lesions from West Nile virus which opened my eyes to academics and research and the rest as they say is history, I've been in academics and research ever since, going on 11 years now. Love this field.

Had the department close where I had been a Medical Photographer for 18 years, when an ophthalmology office gave me a job based on my medical experience will to train me in Ophthalmic Photography.

I was introduced to ophthalmic photography by Beth Ann Benetz who gave me an opportunity to try it, even though I had no knowledge of ophthalmology and had never even heard of ophthalmic imaging.

I was engaged to marry and moved to Rochester MN. Looked for a couple of months for a job in photography, then I found a job as an Ophthalmic Photographer. I worked at the Mayo Clinic for 30 years and retired. I started with Wolfe Eye Clinic one week later and have been here for 3 1/2 years.

I was hired as an ophthalmic technician at a retina practice. We were cross-trained, and I loved doing angiography. My favorite part was trying to guess the diagnosis without looking at the chart. Our physicians always marked what area they were interested in seeing. After talking with Ben Szirth, I decided to test for my CRA.

I was working in Maryland for Dr. Bert Glaser as a COA. Our photographer was moving to PA and gave 2 weeks notice. I was trained in less than 2 weeks and started imaging right away on a Topcon 50X and a early Heidelberg HS ICG/FA. I was lucky enough to train with Robert Flower, PhD on a very early prototype for his HS ICG. I also like to say that I "trained" Robert Curtin on the Heidelberg while he was working at Wills Eye...

started in the ophthalmic field by going to school for opticianery, became a certified optician, then n.c.l.e., c.o.a., and last c.o.t., started doing photography, I still would like to become a c.r.a.

came from general ophthalmology practice. ready and will to learn retina. part of job description was to begin working with topcon camera, fundus photography and then moved forward to use FA dye, study photography and OCT's.

The OP at the clinic where I worked quit and they just moved me into the position.

I was an English/Arabic Interpreter in the Ophthalmic Photography Department at the King Khaled Eye Specialist Hospital in Riyadh, Saudi Arabia, then I showed interest in learning O.P., so I started with learning Ext. Photo., then Dark Rm work, then S.L. Photo. and FFA, within 3 yrs time I learned it all with the help and mentoring of my Supervisor at the time Mr. Donald Boyles, CRA and my coworker Kim Littlefield, CRA I sat for the CRA exam in 1994 and passed it on my first attempt. I became a CRA in 1994, then I became the Chief of the Ophthalmic Photography Department at the King Khaled Eye Specialist Hospital in 2004 till Mar. 2011. I just moved to live in the USA and I started working in June 2011 as an Ophthalmic Technician/CRA in a 2 Retinal Doctors office in Springfield, MO

As receptionist I dilated patients for a weekly laser clinic. Some patients needed IVFA before their laser and I assisted in whatever capacity I could with that as well as in the laser room. At some point I was invited to train to do the photos and I continued to train one day a week for what seems like an eternity now... About 2 years later I took the CRA exam.

Shortly after finding work in the field of ophthalmic imaging I took prerequisites to go to Optometry school. This is why my major fell into the Engineering category, however, we moved back to the other coast and there is no Optometry School here, so I stuck with Imaging. A happy choice, as it turns out!

I was an RIT student in the ophthalmic photography concentration. Under the guidance of Chrystie Sisson I was able to gain knowledge of the field and the camera equipment. I then had an internship working for Joe Territo and Margaret Powers, where I learned the clinical side of the field.

I met Howard Schatz M.D. in San Francisco at his art/commercial studio assisting his photo shoots. He then introduced me to ophthalmic photography once he informed me he was a retina specialist. Once at his practice I realized he was a pioneer in the field. Since my background was in commercial and fine art photography, I was not sure I wanted to pursue retinal photography. He informed me that if I decided to start this path it would be a life decision, I thought he was kidding, eighteen years later I am still at it.

I was a freelance photographer in Lexington Ky and was looking for a steadier job. Had done portrait work and worked in a film lab. Answered an ad in paper for Dr. looking for a photographer. Did not know this type of job existed but was hired. He asked the photographer at the University where he had been sending pts. to show me how it was done. I spent time with her over about two months and then just started doing it on my own. Big learning curve but she was a great help.

During first year as a technician, I was only person willing to help our photographer whenever he had a fainter or other problem during FAs. Gradually started asking questions about how to take photos. This was during time of film FAs. I started taking fundus photos. Then he needed time off so I started filling in. Gradually took over that duty, but wanted full-time. Switched practices for that reason soley. In the process of getting my CRA now (just accepted portfolio).

I graduated from a photography program and workrd for a newspaper and did freelance phototgraphy for 4 years. Moved to a town where a major newspaper had just folded and applied for a photography job with a private retina specialist. Had on the job training (already knew how to do the darkroom work) then moved to a University setting for 15 years and presently been with another university for 6 years.

Noble J. David and LM Hart at the VA Hospital in Durham using a LMH modified B&L Fundus camera 1962

I started at the front desk in an Ophthalmology Retinal Practice. After a year I asked to become an Ophthalmic Assistant. Four years later I had changed practices and the Photographer positon become open and I asked to learn photography. I learned on the job with the barest of training and no one to mentor me.

I actually shot a lot of retinal photomics and EMs as a medical phg but had no idea what I was looking at. After two years I realized the salary cieling for eyes was twice that of medical and that living people smelled better (mostly) so I switched.

I was a stay at home mom for 15 years. I answered an ad "medical assistant, will train" that happened to be at a retina practice. Lots of on the job training, OPS & JCAHPO classes followed.

I had moved to San Francisco and was looking for a job. I saw a ad for someone with 35mm photography experience in the classifieds and managed to get the job. I couldn't have found anyone better to teach me ophthalmic photography. Dr. Howard Schatz was a renowned ophthalmologist and had written much on Fluorescein Angiography and its interpretation. He taught at UC Berkeley and Stanford so I prepared slides and ran the projector at his lectures. Dr. Schatz has left medicine and is now an accomplished professional photographer.

I was the Media Coordinator in the Education Department at St.Mary's Hospital in Saginaw, MI. When a retinal specialist came to the hospital in 1980 I was offered the opportunity to learn how to do ophthalmic photography.

Worked for general ophthalmologist who had a photographer and I thought it was very exciting and interesting. I then went to work with a retina specialist and worked my way up to photographer. I still love ophthalmic photography and work at a teaching facility which add more fullfillment when I am able to share my expertise.

After RIT I actually worked at the RIT TV center for 9 months until I found a position at a major university eye center. I wanted photographic work with a high degree of a technical component.

I was working for a General Ophthalmologist, and the Retina physician who came in to see the practice's Retinal patients needed help. Learned FA/ICG and venipuncture.

Working as intern from medical photography school, mentor was going back into US Navy. Hospital which was part of Tufts medical school asked me if I would like to stay on. Since then I have never applied for a job, have always been asked to join a group, working as a Ophthalmic Photographer.

I graduated from Franklin Institute in Boston, MA in 1971 with a Certificate of Proficiency, and got a job in Sommerville MA at Northeast Color Research, a high-end color lab, processing color film. I then moved to New Haven CT in the summer of 1971 and got a job at Yale University as a Xerox operator. I transferred to the Department of Cell Biology in 1973, and worked there for 13 years as a darkroom photographer, printing all the electron micrographs. I then transferred to the Department of Ophthalmology and Visual Science in 1986. I just celebrated my 25th year in this department on August 18th. Jan. 3rd, 2012, will be my 40th year at Yale.

The woman who had my Ophthalmology job before me trained me for 2 weeks, but it was really Dr. Caprioli (now at Jules Stein, UCLA) who taught me about Ophthalmology and the eye. I owe him a huge debt of gratitude.

Wanted a more technical career, answered A job listing for a Ophthalmic Laser Technician. This was a mobile Company Photo, US and Laser service; certification required, there 15 years. 10 years Private Retina Surgeons as OR tech and Research Photographer and Head Tech. 5+ years University Med School Eye Center as a Research /Photographer.

After having been laid-off and recalled 3 times since 1974, I was recalled to DuPont for the 4th time in April of 1989, to work swing shifts producing Clysar shrink film. I had returned to college in 1988 and was in the process of completeing my training in Cold Type and Offset Printing technology and had to divide my time between working and attending the last month of school. In February of 1990, an advertisement was published in the local paper soliciting resumes for a "Medical Photographer, No experience Necessary". This was about 11 months after I had returned to DuPont. I applied, had two interviews and showed a portfolio of my black and white work (I had taken a course in photography in 1982 and had been shooting weddings, model portfolios, still lifes, etc). I accepted the position of Ophthalmic Photographer in March, 1990, and started in April. As I had no idea of what was expected of me, my first day on the job was one of observation, as the physician shot 5 FAs over a 8 hour period. At the end of the day, I was admonished that I was to be taking the photos not the doc. The next day I sat at the camera and started "performing" Fundus Photos, FAs, Injections, film processing, b&w printing and slide mounting/sorting. Needless to say, my Fundus and FA images were worse than poor. With encouragement from ophthalmic techs in other practices in the office building, who were ever-so-happy to NOT be shooting FAs, I was able to muddle through until I figured out how to operate the camera and

manipulate the patients to obtain satisfactory images. That process took about 6 weeks, fearing that each day I came to work would be my last. I have now been shooting for over 20 years and obtaining OCTs for the past 7. I thoroughly enjoy the patients and the work I perform.

Told on previous page, optical background, side job of television production, no CRAs in my town when a Dr needed one, he decided to train someone, and I had the right background to learn it. Was shooting transits in a week. Came natural, and have stayed in the field ever since, 15 years now.

I started working as an ophthalmic assistant, fresh out of college and the retinal specialist mentored me and taught me angiography & photography. He sent me to the CRA exam study course in Erie PA, (I think in 1979) where I passed the exam and later submitted my portfolio to become a CRA.

After training as a general medical photographer and a five year stint as a hospital marketing manager I became a freelance photojournalist for about 18 years. It ended in 2002 after the passing of my fiance who I had been caring for. My business, while I tended to her care, had gone to the four winds. I needed another career. A friend, who had helped train me as a general medical photographer was working as a CRA in a local small retinal practice. The attending physician was planning to expand the practice and would need another photographer. I jumped at the chance to see myself again reinvented.

That was 2002. I've changed practices and achieved my CRA. Its satisfying work in an environment of professionally caring and challenging imagery. One with tangible results and ever changing techniques. Even nine years ago I would have never thought that scanning laser and other imaging media would have such a profound influence on retinal imaging. I can hardly wait to see what the next years will present.

I was working on a MA in Communications (Filmmaking) at Temple U. in Philadelphia, PA. I answered a want ad for photographer in the Glaucoma Service at Wills Eye Hospital. I got the job.

I was working as a technician in a private practice and the physician I was working for purchased a fundus camera and he trained the staff to take retinal photographs. I later went to work for another physician and took some retinal angiography courses and began performing retinal angiograms which lead me to go on to working at a university and become certified as an angiographer.

I was a COA at a one Dr. office in Prescott AZ. The Retina Drs from Phoenix came to our office twice a month and I was fascinated. Eventually my Dr. Steve Mortensen offered to get me trained so I could have the angiograms done for them when they came to save time as they had a full day of laser treatments to do and often did not leave to go back until after 6 p.m. I had been a COA for approx 6 yrs at this time. I was appointed a teacher/mentor and we really hit it off. She called me a sponge. My love of ophthalmology exploded when I became an ophthalmic photographer!!

I was going to college and working part time at a camera shop. I became friends with the current ophthalmic photographer at the time. He discussed with me that he was moving into the office managers position and they were in need of a new photographer. He became my mentor over the next several months that followed. I have always appreciated that chance that the doctor and he gave me so many years ago. This is a great field to be a part of!!!!

Started working out of training for an ophthalmologist who had a fundus camera. Thought it would be a valuable skill-liked it so much I took a new job with a retina doctor.

After years of hospital clerical work, I became increasingly interested in the functions of the medical photographers. I joined the BCA (then known as the Biological Photographic Association). It was through their job listings that I eventually found my first job as a medical photographer.

Despite its program's excellent reputation, I could not afford to attend RIT at that time. Instead, I completed the Biomedical program at the Ohio Institute of Photography (Dayton), and secured a position as sole research photographer at a university-affiliated teaching hospital. There, I mainly performed specimen and patient documentation for publication, created lecture presentation materials, and produced images for the department's annual report.

Roughly seven years later, my department was cut from the budget, but I was able to make what I considered a lateral move, locally. I was accepted to work as an ophthalmic photographer for a local university clinic, and received ad hoc on-the-job re-training. I joined the OPS immediately, and supplemented my training with as many OPS meetings as I could manage to attend.

I am currently the sole photographer in a small, private inner-city clinic. As my office is over-booked and under-staffed, I perform a variety of clinical duties, as well as fundus photography, angiography, and OCT imaging. My experience with patient care and assessment, and my penchant for patient education, has given me a helpful perspective on my work as an imager, and I have been able to establish an invaluable rapport with my mostly aged patients.

On the down-side, the doctors' overwhelming scheduling has precluded any opportunity to obtain in-house mentoring, and after eleven years in ophthalmology, I regret that I still have not managed to pursue CRA, OCT, or COT credentialing.

I was given the job of dark room technician in the department of Ophthalmology at the University of Utah Health Sciences as an under graduate student. Their I went from the dark room to the front room. I did a two year internship their. Learning Cornea to Retina imaging and anatomy.

During Photo 2, at RIT, we had to do an assignment with Ophthalmic photography. I really liked the imaging. It was very technical, and was different type of imaging form everything else I have seen.

Science and Imaging focus in high school>photolab>RIT>OPS>Langton/Columbia 6 years>Escalon Digital 3 years>Zeiss 1.5 years

responde to ad for "career oppotunity" that was faxed to college's photography department

After studying photography at Southern Illinois University at Carbondale, I was working as a wedding and portrait photographer. I saw an advertisement for an ophthalmic photographer and applied for the job even though I didn't know what that was.

They physician was looking for someone who knew about photographic processing (film development, printing, color photography, slide making, etc.)

I learned the art of fundus photography on the job while studying for and passing my COA and CRA exams. One of my past employers was not concerned about having "certified" technicians, so I subsequently let my certifications lapse.

I was the chief photographer and supervisor for several private practice of the years before I became the Clinical Manager for ophthalmology at Saint Louis University.

I had to learn every thing in the Navy.

Was a veterinary technician Supervisor in California for several years. Almost 20 years experience with animals. Decided to change careers. Went to the local library for ideas, and found a brochure from RIT on biomed photography. Already had a BS in Biology (wanted to be a veterinarian), and loved photography, so decided to join the two interests. Went to RIT in the summer of 1995, did internship in ophthalmic photography in 1996 (where I met my future husband, Kenneth Boyd, who is also an ophthalmic photographer). Been doing this ever since.

Got associate degree in photography & was interested in medical photography. Worked in photo retail store with medical accounts for short time then went to RIT for BS. Got part time position in medical photo department in hospital, then also part time in ophthalmology department. Left hospital for private practice.

Couldn't find a job as a Health Educator. My new husband got laid off from his research job, and I decided to get ANY full time job. I was hired as a Medical Secretary to a private Ophthalmology practice. On the second day, the senior partner said, "You are already bored. There is an old camera in the back you can play around with." I was completely self-taught, reading Emery Billing's column in Ophthalmology Times until my boss died unexpectedly and I was hired at the Univ of Utah

Owned commercial photography studio with a partner who proved to be irresponsible. Dissolved the business and was looking for a "temporary position" to raise capital to open another studio, this time on my own. Started at Joslin running their processing lab and slide sorting. Still here. Went looking for "job" and found a "career"! Thanks go out to Joslin for having the patience while I taught myself and to the OPS who was invaluable as both a professional and personal resource for my career.

In 1985, I was the lucky winner of a job I got by answering a want-ad in the San Francisco Chronicle that said "Wanted- Ophthalmic Photographer- will train" I was also lucky that I got to learn from Bill Farkas; a very cool dude. In those early days, I remember running the slide projector for Howard Schatz at a number of his courses, and thinking that he was a great teacher, although I had no idea what he was talking about.

As an RIT student in Biomedical Photography, I participated in all 3 courses offered in Ophthalmic Photography.

I knew John Fox outside of work. He talked a lot about his company and I was intrigued as it sounded a lot different from anything that I had done. He invited me to ride along for a day to see first hand what he did. I took him up on his offer and liked what I saw. I started working for him shortly after that. The first thing he taught me was how to run the darkroom. We processed all our own film and film for many of the area doctors. At first I only worked the darkroom. Then a few days a week I would travel with him to job sites to watch and be trained to shoot FAs. I started with the paperwork, then got to shoot the color photos, then added in the red frees and finally the complete FA. He taught by having me observe him first, then he stood right beside me as I took my first pictures, then he moved further away, then out into the hallway and eventually I was on my own. He also taught me how to do the dye injections. At first he only gave me the really big veins then gradually the harder ones. He probably spent close to a year training me between the darkroom and the actual photography.

I had just closed my studio and one hour film business. I had photography and developing skills. I answered an ad in the local newspaper for a photographer. The rest is history. I love this field!

I joined the army in 1987 as an Eye specialist, after 4 years received an honorable discharge and continued to work for ophthalmologist. I started to work for retinal practice nine years ago and eventually started doing photography which I really enjoyed. Now I work for Dean McGee Eye Institute in the Photography department going on 3 years now and still learning something new everyday.

I was attending RIT in their Biomedical Photographic communication program and I was finishing up the second year where we take 2 weeks out of the 10 week quarter to explore the different concentrations we can go into. We all were dilated and I was the second one of my pair to take photos. My partner had already started coming down in dilation and I was a little frustrated that they refused to re-dilate; I may not have masked my irritation well because the person who was helping teach us how to shoot images mentioned to my teacher that maybe this line of work wouldn't be "the best" for me to go into. Of course being stubborn as a mule, I took this as a challenge and immediately applied for an internship at Harvard Vanguard Medical Associates under Leslie Bull (Baressi). I shot fundus photos and FA's and some slit-lamp photos that summer. Leslie was an amazing teacher. I went back to RIT and did the first 2 quarters

of the Ophthalmic Concentration and then convinced Chriyste Sisson to let me finish up the concentration on an internship; where I went to Hawaii and worked with the Retinal Consultants of Hawaii with Jaclyn Pisano. Also an amazing experience and I really got to work on photographing the retina and was exposed to far more disease processes. Finally, I applied for a job with the University of Rochester and somehow managed to convince Bill Fischer and Dorothea Castillo to hire me albeit being 15 minutes late to my first interview -- I just learned to drive manual and stalled 3 times on the way to the eye institute. So with a little luck and some amazing teachers I'm now officially an ophthalmic photographer.

I fit contact lenses and took picture for follow up and now take pictures for Iridology and plan on using during the slit Lamp check for contacts and the eye checks in general .

The practise added a retina doctor to the practise and we used a company, Angiographics in Newton MA. The photographer could only come 1 day per week and my doctor wanted someone trained in the office that could do angiograms as needed.

My partner & I, in a very successful commercial studio business, parted ways. I then became accomplished in photographic equipment sales. I needed something more challenging and was offered to be trained and run the Ophthalmic photography department of a large hospital. Since I have trained dozens of technicians how to be the best at ophthalmic photography. It has been a rewarding career I have been very proud of.

After working as an ophthalmic tech I became the director of an Eye Clinic. I learned on the job to take photos and angiograms. I joined OPS and JCAHPO three months later at the annual meeting in San Francisco.

I was always every bodies back up on most of the ophthalmic equipment. Usually when some one quits or gets layed off, I was the only one left standing and the cheaper way out being a Tech to begin with they usually went with me. So, they would not fill the open position. They let me learn on to go rather bring so one in with experience and that seem to be stander no matter where I worked private or university settings. Always budget concerns.

I was working in the retina department and the photographer was getting overwhelmed with patients quite frequently. I learned how to do OCT's to help out. It was soon clear that having only one photographer for 14 doctor's was inadequate and I volunteered to learn more. The rest is history!

After college I worked for a large hospital in the photography department as a darkroom rat, spent a large part of everyday processing by hand the eye clinic angiogram film...lots of film! I was asked a number of times over the years to accept a position as a ophthalmic photographer...took 25 years, but here I am. It's a good place to be!

Pure luck and timing.

I was hired as an Ophthalmic Technician when the office had a complete re-staffing. Within six weeks of being hired I was promoted and am currently still the Retinal Angiographer.

Started as a COT all to become a photographer. Started working in a glaucoma practice shooting nerve photos and later got a position doing angiograms at the city and county hospital. Did a lot of Goldmann visual fields to be where I am now.

playing music traveling away from home ,my girlfriend at the time said I should get a real job to stay at home..got job at eye hospital and a busy retinal practice .Where the people I worked for where innovative,creative and demanded high imaging standards.

After 10 months training as an ophthalmic assistant, one of our retinal doctors, Mr. Peter Holland, thought I would be ideal to learn FA and venipuncture as he thought I was very detail conscience. I had photography in High School so this interested me greatly. I learned fairly quickly and later a few years another employer encouraged me to reach towards CRA which I flew to NY from Texas for the exam and completed written and practical.

During my photographic education one of my instructors was a medical photographer who referred me for a job in ophthalmology. It was at this point that I got out a dictionary and learned how to spell ophthalmology and went and applied for the job. I applied my background in photography to my first job working in an educational institution, learning patient photography and attending resident lectures and grand rounds whenever possible.

I was a technician for many years and was always interested in learning in made since to choose photography. I love it it is a great career and I hope to continue to grow in the field. I am currently back in school I am take leadership and communications

my father thought I would like it and I was tired of being a broke grade school teacher so I tried it as an intern in his retina clinic and I loved it.

20+ years ago I moved to Boston after graduating from college. Got a job in a large advertising agency and found moving up quickly as a photographer was not going to happen. I then found an ad in a local paper asking for an ophthalmic photographer in an office affiliated with Mass Eye and Ear. Got the position and had the opportunity to train with some of the best.

I wanted to become an Optometrist started collage at UNM unfortunately I had to drop out of school to take care of my first born son. I joined the Army got married (still together after 24 yrs) and had 3 more boys.

My experience and schooling as an ophthalmic tech made me realize how boring a life I would have if I continued my path as an Optometrist.

Needless to say like many I think got on a roll with photography and have loved it since. There was a brief time I was just doing study and tech work (I almost took my life JK) it had its positives, but I am back on the stool as a photographer and love every day.