What Determines the Success of a LASIK Practice?

Preoperative imaging technology and low enhancement rates are strong contributing factors.

BY STEPHEN COLEMAN, MD

ver the past 18 years, I have attended countless meetings, symposia, and dinners with people spanning the entire arc of our industry, trying to find the answer to one question: What drives LASIK volume?

Naturally everyone has their own suggestions on how to increase business. Common strategies including tracking phone leads, discounting patients' family members, transitioning from print to digital advertising, giving coupons to former patients to share with friends, and sending birthday cards. Both physicians and patients tend to concentrate on the laser system itself. Surgeons generally focus on click fees, eye trackers, spot sizes, and repetition rates, and patients tend to ask how laser technology has improved over the years.

My feeling has always been that the key to maintaining or increasing LASIK volume is low enhancement rates. Give me a laser that results in the fewest enhancements, and I will show you a successful practice in which technology can truly be the foundation of ambitious marketing objectives.

Patient selection will always be paramount, but a laser can perform only as well as the information available preoperatively to calculate an ablation profile. I tell patients that lasers have indeed improved over the years, but, perhaps more important, preoperative imaging systems specific to laser vision correction have dramatically changed the landscape of LASIK. I showcase the seven different imaging systems in our office as if I were putting on an art show. The beautiful monitors, tremendous color graphics, and highdefinition pictures are exhibits in and of themselves.

It can be surprising to patients to learn that the way doctors determine an accurate spectacle, contact lens, or LASIK correction are, by definition, completely different. Wavefront-derived LASIK calculations, for instance, are 25 times more accurate than either spectacle or contact lens prescriptions, which makes sense given how far preoperative imaging technology has come.

My enhancement rate is currently less than 2% with

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- 1. Which do you find to be more important?
 - ☐ Preoperative data collection
 - ☐ How the laser performs an ablation
- 2. Which aspect of LASIK do your patients most frequently ask about?
 - ☐ Preoperative screening information
- ☐ The laser procedure itself

customized wavefront-guided LASIK. With the iDesign system (Abbott Medical Optics), the 400-um resolution and 241 data points that we now have will improve to 177-µm resolution and 1,257 data points across the entrance pupil. I tell patients that the most profound advancement in LASIK since I started practicing is the amount and accuracy of the information that I am armed with before ever setting foot into the laser room.

The questions I pose are these:

- 1. Which is more important, preoperative data collection or how the laser performs an ablation?
- 2. Do LASIK patients more frequently ask you about preoperative screening information or the laser procedure itself?

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