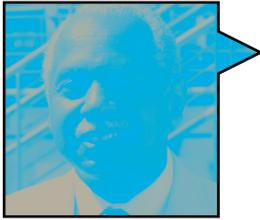


# SAY ANYTHING

HAVE YOU EVER BEEN FACED WITH A NATURAL DISASTER OR TRAUMATIC LIFE EVENT THAT ALTERED YOUR ABILITY TO PRACTICE OPHTHALMOLOGY? WHAT LESSONS DID YOU LEARN HAVING ENDURED THE EVENT?



**FRANK W. BOWDEN III, MD**

■ Bowden Eye & Associates,  
Jacksonville, Florida

“ Breno da Rocha Lima, MD, was a young medical retina specialist who succumbed to a recurrent brain tumor 1 year ago. He had been in our practice for 3 years and had a promising career ahead of him. The loss of his practice revenue was financially destabilizing, and as a result, we elected to close that aspect of our practice, as the effort to acquire a new medical retina specialist was deemed too daunting a task. Further, we had significant practice resources committed toward his specialty that would not be utilized. We have elected to renew relationships with other retina specialists in the community to ensure retinal care continuity for our patients. Life keeps happening!”



**ERIC D. DONNENFELD, MD**

■ Ophthalmic Consultants of  
Long Island, New York

“ Hurricane Sandy virtually shut down New York and the surrounding areas in October 2012. We had no electricity for 2 weeks in many of our offices, and there was no gasoline for cars, meaning doctors and patients could not travel easily. During this hardship, I learned that we should always have a way to contact staff and physicians in the event of a natural disaster. In addition, we should always back up office records, preferably using an electronic record that is stored in the cloud. Finally, with no electricity to use printers or computers, it is important to have office charts and patient lists printed out if there is advance notice of a pending natural disaster.”



**MARJAN FARID, MD**

■ UC Irvine Health Gavin Herbert  
Eye Institute, Irvine, California

“ On June 6, 2017, we lost our beloved mentor and director of the Gavin Herbert Eye Institute, Roger F. Steinert, MD. It was a very hard blow for me, as I trained under his tutelage and then joined the practice as his partner. My career had advanced under his wing and watchful eye. His loss was extremely difficult for me. Suddenly, the person I was constantly trying to make proud was gone, and all of our collaborative projects became meaningless. This initial grief lasted several weeks. Slowly I came to realize that his wish would be for me to continue our work. I now know that his legacy can continue through my work and that what he dreamed could be achieved in the world of keratoplasty can still become realized through my efforts. I now have that motivation to keep me going, and I will continue to make him proud.”



**PAOLO VINCIGUERRA, MD**

■ Humanitas University, Milan, Italy

“ I recently experienced algodystrophy of the hip and a torn ligament in one finger that prevented me from performing surgery for about 3 months. While I was unable to work, I learned that perseverance is everything. After an operation on my finger and with the use of a crutch, I was able to examine patients through the pain. It was a difficult period, but I concentrated on just doing my best through the healing process.”



**SUMIT "SAM" GARG, MD**

■ UC Irvine Health Gavin Herbert Eye Institute, Irvine, California

“ The loss of Dr. Steinert was huge to our department and to me personally. He was instrumental in leading the campaign to build our state-of-the-art eye institute building, but more importantly to me, he was a great friend and mentor. Although his loss was hard, I had been preparing for it for some time. I would make every effort to spend as much time with him as possible. Initially after his passing, I found myself trying not to think about it. With time, however, I found it easier to remember the good times we had and not focus on remembering him during the last few months of decline. What I learned from losing my mentor and friend is to try and maximize time with those you love and respect. You never know how quickly things can change.”



**JODHBIR S. MEHTA, BSc (HONS), MBBS, FRCOPTH, FRCS(Ed), FAMS**

■ Singapore National Eye Centre, Singapore

“ While playing squash with my fellow, I collapsed and was unable to stand on my right leg. The next day, the pain was controllable but swelling got worse. I was admitted for an MRI scan and went back to work the following day. The scan showed a high Achilles tendon rupture. I had surgery 2 days later, and I wore a plaster cast for 5 months afterward. I returned to work 1 month after the procedure, but I could not perform cataract surgery because I could not use the pedal. I also could not perform refractive surgery because I could not bend my leg properly enough to sit next to the laser. Throughout this ordeal, I learned how a seemingly minor injury can have a major effect on my day-to-day activities. Now I make sure to try to stay in the best shape possible and ensure I properly stretch the ligaments in my leg to maintain my health.”



**MAGDA RAU, MD**

■ Privatklinik Dr. Rau, Cham, Germany

“ A few years ago, after a busy meeting and long day of travel, I pushed through my fatigue and set out to ride my horse, George (pictured at right). While I was away at the meeting, someone had borrowed my saddle, so the fit was not quite right when I returned. The saddle slipped mid-ride, and I fell. I broke my arm in the fall, but thankfully George was well-trained and helped me prevent further injury. I needed to cancel all surgical appointments for 5 weeks because I could not operate with a plaster cast on my arm. Fortunately, most of my cataract and refractive patients trusted my healing process and waited until I was ready to operate. I was thrilled when the cast was removed and I could resume surgery, free of pain. I still ride my horse because it is an important passion of mine, but I try to be more careful and ensure George's saddle fits properly every time.” ■

