

SIGNATURE EYE CARE™

Strategies for Success in Vision Source® Practices





you KNOW where to find your specific refractive solution



"The Xfraction Process helps me rapidly discern between patients that can be corrected to 20/20 with simple refinements or full refractions...and who I can't correct to 20/20, and exactly why not." April Jasper, OD West Palm Beach, FL



"Efficiency is paramount today; anytime I can save time and be more accurate – it's the perfect solution."

Ian Benjamin Gaddie OD, FAAO Louisville, KY



"With Xfraction, everything is smoothly connected, and with a single button push, all test results from all devices are immediately uploaded to my cloud-based EHR system."

Dori M. Carlson, OD Park River, ND



"The Xfraction WOW factor with my patients is huge! They really notice and appreciate the new high-tech and integrated experience...making them more likely to come back in the future."

Nathan Bonilla-Warford OD, FAAO



OPD-Scan III Wavefront



II TRS Total Refraction

Automation



EPIC Refraction Workstation



ARK Autorefraction Systems

Marco Refraction Systems — Advanced automated instrumentation includes the new OPD-Scan III Wavefront Aberrometer, the TRS-3100/TRS-5100 and EPIC Digital Refraction Systems, Autorefractors/Keratometers (with VA measurement, Subjective Sphere Refinement, Tonometry, Glare testing on certain models) and Lensmeters—all with EMR Integration.





Efficiencies Gained Result in Higher per Patient Revenue

ELITE

Reducing refraction time allows for more meaningful discussions

ina M. Wesley, OD, MS, FAAO, had been looking for a way to make her

Medina, Minnesota, practice more efficient. She had a combination autorefractor/keratometer/topographer, but "the topography just wasn't cutting it in terms of the information I needed. I didn't want to purchase a separate topographer,

which would cost at least \$20,000 or more, so I began to look at Marco systems."

Dr. Wesley

At The Exchange® in 2015, she took advantage of the show specials and purchased an OPD-Scan III and two TRS systems, one for each of her exam lanes. In early July, the systems were installed, and she says that the additional equipment has brought her the efficiency she was hoping to gain.

"Once I understood it—and that didn't take long—the refraction process was much faster. I had always thought I was very efficient with the refraction, but this cut my time in half," she says. She also found that she was able to increase her capture rate because she could show patients the difference between their current prescription and the new one with a touch of a button. That's true also of those patients who have not worn eyeglasses before. "I was spinning dials before, and it just wasn't easy to show patients what their difference in vision would be. Now they can see it for themselves," she says.

This process has made it much easier on her, as well, because she no longer has to try to qualify the difference in a change in prescription. "You can't predict which patients will appreciate the change. I've shown patients a tiny change in their prescription, and they notice it. It's all about optimizing the experience for patients every day," she says.

Her technicians like the new technology, as well. Although the previous system was connected to her exam room software, the transfer of data was neither as fast nor as smooth. There's no manual transcription required, virtually eliminating

any of those types of errors.

In addition, the OPD-Scan III system has provided her with additional value. "I easily see the root mean square number, which gives a aberration value/statistical likelihood of getting the patient to 20/20. Basically, it shows me if there is some pathol-

ogy or limiting factor that would likely prevent us from getting to 20/20. I know in a moment whether I should spend a lot of additional time on that refraction," she says. In addition, it helps her adjust her patient's expectation. "I can explain the topographical information and condition of the cornea, or even point spread function limitations that might explain why that impacts the quality of vision."

vision correction. Even adults who need correction appreciate seeing the images. It helps them get a better understanding and place a value on the vision correction."

With the new efficiencies and the ability to demonstrate refractive options, Dr. Wesley says the payoff has been increased per patient revenue. It was never her goal to increase her patient load because she wants to spend time with each patient, while not increasing her three-day-a-week schedule in the office. However, she has recently dropped a low-reimbursing insurance plan, so she is able to accept new patients and provide them with a high-quality exam. "Now that I have the Marco technology, the time I gain in guicker refractions is time I can spend discussing upgraded products and the need for multiple pairs of eyewear," she says.

ERGONOMIC RELIEF

r. Gina Wesley was listening in the audience at The Exchange® in 2015 when Ian Benjamin Gaddie, OD, was detailing the terrible pain he was experiencing and why he chose to switch to Marco's system. "Because I see patients only several days a week, my ergonomic stress and strain weren't too bad," she remembers thinking. But once she brought the Marco technology into her office, she says she realized that she was no longer experiencing the shoulder pain and neck pain that she often felt after a long day.

The OPD-Scan III also includes a retro image function, allowing her not only to detect a cataract but also help track the changes over time. But one of her favorite functions of the system is the diagnostic scene that correlates uncorrected refraction into a simulated picture. "It's one thing to explain to adults what line their child is reading on the chart, but it's another for them to see side-by-side the pictures that approximate what their child's vision is now and what it could be with eyeglasses or contact lenses. It's good to be able to show that to parents who have never required

Her goal—and she's been achieving it routinely since the addition of the Marco technology—is to move patients from their entry into the practice, through intake, pretesting and the exam and into the optical in 30 to 40 minutes. "Anything longer than 40 minutes begins to impact the success of the sale in the optical dispensary. Very few of our patients complain about our office timing," she says. "I feel that having the Marco technology in the office has changed the way I practice. I have a better understanding of the refractive capabilities of the patients," she says. 焙

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-Dr. Wesley

