



Arun Gulani, MD

A new EyeWorld column from Dr. Gulani

Why another column? Why another responsibility on my already full plate of commitments? Simply put, a continued observation by visiting surgeons at my institute, continued phone calls and emails from fellow eye surgeons regarding their patients, and a consistent reaction of surgeons who attend my talks and surgical demonstrations reveal a need for the most important missing piece in eye surgeons' quest for personal and professional success: a reliable planning system.

Between the advertising hype of "new" technology and techniques and the resultant lack of consistency of happy outcomes lies the lack of direction. This is where the Gulani Planning System (GPS) comes in.

Think of it like cooking. A newly introduced food ingredient (technology) still needs a proper

recipe (direction) to maximize its full impact and raise the recipe itself to new levels. A new and great ingredient will fail miserably if used without proper preparation (patient selection and education) or direction (in ocular situations of associated pathology, improper optical symbiosis, or limited vision potential).

"That new lens implant is #\$\$%@!" has been a common evening phone call to me from many talented eye surgeons nationwide blaming the industry for the problem or asking if they can fly their patients to me for repair.

In most cases, the surgeon was excellent and the technology was excellent. The direction, however, was completely wrong.

"Can I do LASIK on this patient, Dr. Gulani? How about PRK?" "Can I use this IOL or that IOL in this case?" My mornings start with calls and emails from brilliant surgeons around the world whose questions seem stuck in limited surgical options or thought processes.

"I have a case of a LASIK complication!" I receive another five to seven emails or calls a day from surgeons who detail their patient's case with a dreadful and scary description that ends up paralyzing their own thought process and may result

in diminishing the vision goals for the patient.

In this column, I'll share everyday cases from my practice, presenting the preoperative, the postoperative results, and revealing the GPS behind the road to success in that case.

My professional and personal goal is for every eye surgeon to feel privileged with what we get to do, feel empowered with how we change lives, feel content with the lifestyle this results in, and feel enriched by our patients' gratitude.

The power of our collective minds and compelling leadership with complete absence of collegiate envy or industry dependence should proactively raise awareness of our talent and impact on the world.

For those surgeons who wish to follow my thought process and attitude, I will share a few assumptions:

1. We are all ophthalmologists. I think there should never have been a separation of corneal, cataract, and refractive specialties. I look at all eye surgeons as "vision correction" surgeons.
2. Having seen surgeons from all over the world, I can diligently assume that my readers are talented surgeons who can execute every surgery I'll discuss in these columns.

3. We are all committed to integrity with genuinely personalized care, and no false/hyped advertising, no discounts, and no luring patients.
4. Every refractive surgeon must know how to refract.

Last but not the least is my gauge of success: a fully paying patient on camera after surgery with no incentives, no script, no make-up. That is because I think that in some cases, data and statistics can be fudged, tarnished, or influenced, but a fully paying patient has no reason to be on camera unless he or she is ecstatic. These are real outcomes and real reactions.

I think that the side effects of this method of practice are the presence of work/life satisfaction, self-respect, and a solid reputation, plus the absence of envy of colleagues, industry pressure, fear of markets, or the feeling of helplessness.

Let's begin our journey together as I share my GPS. The column starts with the first case study next month. **EW**

Editors' note: Dr. Gulani has no financial interests related to his comments.

Contact information
Gulani: gulanivision@aol.com



Dr. Gulani with his patients from nine countries 1 day postop.