

The Foundation of the American Academy of Ophthalmology
Museum of Vision & Ophthalmic Heritage

Conversation Between Dan Jones, MD and Ron Smith, MD
Orlando FL, October 23, 2011

Drs. Dan Jones and Ron Smith recorded this conversation on October 23, 2011 during the Annual Meeting of the American Academy of Ophthalmology, in Orlando, FL

Dr. Jones is from Houston TX and Dr. Smith is from Los Angeles CA, both are cornea specialists.

You are invited now to listen to an excerpt and read the complete transcript below.



In this [excerpt](#) Dr. Jones discusses his lecture style and his algorithm for problem solving.

[Here](#), Dr. Smith recounts a study on histoplasmosis he performed as a resident with the staff of Wilmer in his hometown.



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DAN JONES: I'm Danny Jones. This is October 23, 2011, and we're here at the Peabody Hotel in Orlando.

RON SMITH: Ron Smith, October 23rd, Peabody Hotel in Orlando.

DAN: I think the most poignant thing is that we're sitting right now where we sat on every board meeting on the corner, and tried to endure all the nonsense that guys like David Noonan and Bruce Spivey and everyone else were generating, and when we came to an agenda item we didn't particularly like, we just hunked it under the table.

RON: Right. I think Danny goes right to the best time. Sooner or later we're going to get to this. We might as well get to it sooner. But I think that those were the best times of my Academy career when Danny and I were involved in education, and a little irreverent along the way, and sat around the end of the table at the corner and tossed our papers into the wastebasket; those were good times. I think we made a lot of progress for AAO education along the way. Dan, you probably feel the same way.

DAN: Totally feel the same. I thought the suggested questions were good. It made me go back and do an inventory about those high-impact things in the Academy, our role.

RON: Well, why don't you go over those?

DAN: The question was what was your first experience at the Academy? Well, that was the Palmer House in 1969. I was a fledgling young faculty person. I finished residency and fellowship and was on the faculty at Vanderbilt. About six months after I joined the faculty the only other faculty member, Jim Elliott, took a one-year sabbatical, so it was me and nine residents.

I think the thing that got me switched on about education was Mel Rubin invited me to be a member of the first Ophthalmology Knowledge Assessment (OKAP) Committee. My first meeting was in 1971. The group was comprised of Mel, Ron Burde, John Flynn, Froncie Gutman, Tom Pettit and Joel Glazer, and we really came at education in an alternative manner. We had an old-fashioned way of putting together multiple choice questions, everybody had to send in their eight by 10 index cards with the question and multiple choice selections for answers. Mel showed them with an opaque projector in a little room at the lodge at Pebble Beach. That's when you could play Pebble Beach for 20 bucks.

But Ron is right. It was times together in a very formidable time in education in the Academy. I can remember the loose-leaf Home Study Course and then it became the Basic and Clinical Science Course, an expansive set of volumes. While we were together in education, we reorganized the titles and sections. I can also remember just so well one evening... maybe we had a couple of pops... but Ron simply birthed LEO on a paper napkin, and then we spent the rest of the night drawing lines and logos of what lifetime education ophthalmology would really be. I've got to credit Ron for all he did to organize people, keep people in the various education positions, how he kept education at the forefront at the Board meetings, how we worked hard to have a balance with what an Annual Meeting should be and what the educational content and the formats and platforms and availability of courses should be. It was a grand time, and, you know, I took advantage of the fact that I was among colleagues, scholarly colleagues, academic leadership. I learned a lot for my benefit, and I learned a lot that subsequently became valuable to me as a chair.

RON: Absolutely. LEO was a joint project with Danny. But I got to my first Academy when I was a resident. We all had mentors. Mine was Maumenee, you know, the guys that were the gods for us. And you had them and I had them, I still have them. And it was about education, that's just what we did. My parents were both schoolteachers, so I knew I was going to be a school teacher, I thought, but then there was a GP in town who took me under his wing. Oh, I'm going to be a GP. But then I got into ophthalmology by a circuitous route. Maybe we'll get into that later on. But when I went to my first Academy I slept on the floor in Chicago. Drove all the way out from Wilmer, and that was in those days where it was still at the

Palmer House, and I was literally sleeping in somebody's condo on the kitchen floor. That's my first meeting. And one thing led to another and then I became on the USC-Doheny faculty with Steve Ryan, who was another important figure in my life and yours, too, I'm sure. I was just starting on the faculty at Doheny at USC in 1975. David Paton, one of your heroes, too, was then at Baylor. He had been at Wilmer when I was a resident. So he called me up one day and said, 'You know, I'm doing something with the BCSC.' I knew what the BCSC was, it was that little book where they had all the questions and no answers, they had 150 pages of questions and no answers. So he said, 'You know, we need a BCSC on uveitis.' He said, 'Do you want to do it?' I said, 'Sure.' You know, you and I, everybody we know says yes, except... let me get to this, when you didn't say yes. We'll get to that. And so I said, 'Sure.' And that was '76 or '77, and that got me involved in AAO education. And when Bill Spencer was on that committee and he took over that education committee from David Paton, and the same guys, you know, Ron Burde, Peter Savino and Mort Smith and all those real stars and our heroes and colleagues. And then they asked me to do Focal Points. It's when I got to know that practitioners were important on our advisory boards, and that was an interesting group of practitioners.

After that the AAO wanted me to be the head of the Education Committee, and where you became the Secretary for Instruction, I became the Secretary for Clinical Education. And it's interesting, I don't think either one of us got into this because we want to be this or that, because Education was fun, you know, it was fun. It's what we did. It's part of our DNA.

And then they put us in charge of planning education. We made such a fuss at the end of the Board table, they would say, 'Well, they want to have a master plan for education.' And I think I was out of the room when they decided who should run that, and I was it, but that was when you and me and Paul Lichter, and Dunbar Hoskins, and I forget who else, put that together. And although my main contribution was putting the idea and name LEO together, your contribution was the logo and that was after more than a few pops and more than a few napkins.

But I think it was getting all these people together and just encouraging and working together. That whole five or six years, however long it was, when you and I were sitting there at the end of the table. That became quite an

iconic event, as it turns out, because they're still talking about it at the Board meetings.

DAN: I know it.

RON: Now... you know, they kept me around. They kept me around the Board until I got it right. You must have gotten it right sooner than I did, but they still reserve a spot for me.

DAN: Two guys came up to me today and said, 'Boy, I can remember you and Ron Smith at the board meeting, and this, that, and the other.'

RON: Those were the good years. In fact, when I moved to the other end of the table as President, remember you were still there. You'd send me messages, sitting up there as president. And we'd be sending me messages back and forth. They really did keep me around until I got it right because that I sure as hell didn't get that part right.

But I think we made a difference to AAO education. Maybe not in the same form, but the same issues, and the same organization, and the infrastructure, and a lot of it's still there, and they build on it. Good people have taken over for us, and they're just as good or better. But those are memories I'll never forget. And Danny, when I was president, and I'll never forget this, you gave me a glass statue of Leo the Lion in 1994, I'll never forget that, so that was fun.

DAN: I walked through the Academy Resource Center today and saw the vast array of materials and media opportunities and self-learning, self-assessment things, and I think you are right. We enjoyed the privilege of putting that...a lot of that together and getting it started. And it was such a privilege to be in such a varied group, because I got to meet people I would not have gotten to know as well. I got to hear views and insights from various disciplines—from academicians, from guys in comprehensive ophthalmology practice. It was poignant today to watch the Council members be honored and stand up at the Opening Session and...as you remember the Council was the enemy back in our days. I mean, we struggled to hear that voice, respect input, balance out individuals, and that was an important era.

RON: Danny, what would you have done if you hadn't been an ophthalmologist? Where were you headed? Were you going to play shortstop for the Rangers or something?

DAN: I wrote down I don't have a clue. You know, I was an only child, grew up in Raleigh, North Carolina. My mother was Executive Director of the Raleigh Housing Authority. Pretty Spartan little life, and somehow or another this idea to go to Duke and be a doctor got ingrained, and I lived by that rhythm and theme. I had a good high school education. I thought the first year at Duke University was a breeze in terms of physics and math and English and other subjects. Thank goodness they didn't have challenge examinations. There was no SAT, there was no MCAT, you didn't have to do this or that...all you had to do was 'Harry Hotel' your way through the interview.

Medical school was a shock, a whole different way of learning and applying learning rather than just learning and taking a quiz and moving on. I got inspired by ophthalmology when I was a junior medical student by Lawton Smith. I worked for him as...I guess you could call it a fellowship...for one summer. Those were the years when medical school didn't run through the summer. My wife had a job, so I had to find a job...and so I worked for him and had an amazing experience.

Those were the days when Lawton was a little less evangelical than his later years. He tried his hand in science, so we wanted to produce an animal model of histoplasmosis, and he figured out that the pigeons have a macula. We tried to infect pigeons by injecting the organisms into the anterior chamber, but try as we may, you could take live histoplasma spores... I didn't know how dumb that was then. We didn't wear gloves and masks or anything else. So time after time, we injected these pigeons with histo, and they could give less of a rip. So finally Lawton figured out that pigeon external eye surface was warmer than most animal surfaces. I don't know what it was, like 42 degrees centigrade. So we stuck the pigeons in the freezer and jabbed them into the anterior chamber again, and sure enough they didn't get ocular histo, but they got this roaring uveitis and everything else.

But the time I spent with Lawton seeing patients was what locked it in for me. His absolute thoroughness, the same way of doing things in an eight-

point eye exam, a brilliant remember-it-all kind of guy, had all these flashy catch phrases to help you learn, and that was it for me.

Those were the days of the Korean War when you had to have a deferral or go into some branch of military reserve to be accepted into an ophthalmology residency program. The word around Duke was, rather than be in a general medical office somewhere, try to get a position as a Public Health Service epidemiologist and go to the CDC. Sure enough, I spent two years in Nashville as the state epidemiologist. When I started residency I was destined to be a neuro-ophthalmologist due to the role model of Lawton Smith. But I had some exposure to some exciting things and infectious diseases as an epidemiologist. Bob Sexton was my mentor at Bascom Palmer. I got totally thrilled by cornea and external disease. Bob left to take a job at U.T. Southwestern in Dallas and basically just turned over the microbiology lab to me. My mentor, whom I would call my academic and ethical personal trainer, Ed Norton, talked me into taking a fellowship between my second and third year in residency and I spent a year at Moorfields Eye Hospital in London. Barrie Jones was the mentor of all time in cornea and external disease. I had a circuitous route, but along the way role models and mentors paved the way towards subsequent colleagues like yourself that made a difference in my academic career.

RON: That's interesting. You've told me things that I didn't know. You know, I came from Walkersville, a small town of 500 where I grew up.

DAN: Tell me again about the free throws at the line, 50 to 49, triple overtime...

RON: But I think it's interesting from the histoplasmosis discussion standpoint, because Walkersville is endemic for histo. It was a town of 500, and I was, as you know, a major athlete. When you only have 35 in your class, you play, whether you like it or not. My parents were both schoolteachers. We didn't have any money, so I started at a small college, Washington College in Chestertown, Maryland. I was going to apply to medical school at some point. But I was there on a quasi athletic scholarship, and I got ocular histo, and I had wavy lines and the whole thing, and I had para macular disease as a first year in college. And I noticed that I couldn't hit the ball. This was due to diplopia. I had a little monocular diplopia, and my batting average went down. Then I broke my leg and said,

'I'm not getting anywhere. I might as well go to medical school.' I didn't realize how hard that was. I said, 'Well, who's got an opening? Well, Johns Hopkins.' And I said, 'Well, why not, you know? So I went to the college library and asked, 'How can I get in early? I can't play anything here. I broke my leg, can't play basketball, I can't see.' That's when I started to pitch in college rather than play first base or catch.

DAN: You don't have to see worth a rip to pitch.

RON: That's right. So I went to the library and they had this "two-five program," where right after two years of college you could get into Hopkins Medical School...so I applied to the two-five program. I didn't take any exams, and I think I was an experiment to see how a top student from an average college would perform at Hopkins. They wanted to get some good students to see how they did at Hopkins. I didn't do very well. Rather than the top half of the top third, I was the top half of the bottom third at Hopkins. But we didn't have any money, and during that time I actually went to Wilmer to get my eyes examined, and saw Frank Walsh, who had his monocular direct ophthalmoscope, and Dave Knox. Nobody knew what histo was, so they looked at me and said, "Oh"... and I was actually a patient in their grand rounds. In retrospect, I didn't know what that was, but now we have grand rounds at Doheny every week.

DAN: You never told me all this.

RON: That's why I'm telling you now. I wouldn't tell it now, except by the time this thing gets out I'll be history. Nobody will care.

So...that's when I get to know Walsh, Knox and Maumenee, as a college student. I maintained 20/20 even with histo all along. I needed a job in summer and got a job working in a uveitis lab, of all things, with Art Silverstein at Wilmer, and made a little money. I said, 'This is really interesting.' So I decided to go into this field. Dan, I've never told this story to anybody, I'll never tell it to David Paton...but when I was a Hopkins medical student applying for residency... and in those days the way you got into residency is you talked to Maumenee. He knew that I had this histo condition, this uveitis, and so he said, 'Would you be interested in coming back here to do uveitis?' I said, 'Sure, why not?'

When I talked to David Paton, who was interviewing me for residency at Wilmer, he said, 'You know, I'll be honest with you. You really shouldn't go into ophthalmology. You want to go into a specialty where vision does not need to be perfect since you're probably going to go legally blind eventually.' I didn't know what that meant, but ophthalmology looked like a pretty good deal to me, so I said, 'Well, if I can get in here I think I'll stay.' So I got in, didn't go blind, although I took steroids every now and then over the years, and the nets dried up in my case.

DAN: That's amazing.

RON: So that's how I got interested in histo, and that's why my lab work and my grants were in histo, because I was trying to beat this thing before it beat me. That was my main motivation to do all the work I did in histo. About two people know that now, you and Steve Ryan.

DAN: That's worth the oral history right there. The serendipity of it all for me is that I got on the faculty at Vanderbilt in '69, and that's the histo belt, and I became sort of the resident expert, even though I wasn't very good at driving a retinal laser or anything else. As you know, Don Gass was born and raised in Nashville, Tennessee. It turns out his father was head of public health in Franklin, Tennessee, about 15 miles south of Nashville. His father was the one that first detected the coin lesion in histo and began to do skin testing and connected the fact that this was... no, this was not tuberculosis, this was a new pulmonary disease.

RON: Interesting. Maumenee got involved in the Walkersville histo study. We did that survey and skin testing when I was a resident, third-year resident. The reason we did this in Walkersville...my dad was head of the Lion's Club and we got all the churches and the Lion's Club involved. Maumenee was my mentor. Residents like me would drive Maumenee from Baltimore over to Bethesda, where he was doing rounds, and he said, "You know, we don't know enough about histo. Why don't you do a survey or do skin testing and really prove that connection?" They did skin tests in those days. I said, "Yes, sir," saluted. He said, "Well, how?" I said, "I'll get my dad up in Walkersville to help." So that's when Maumenee...in those days a chair could control things. You and I know that's not possible anymore. He got the whole faculty at Wilmer to go up to Walkersville for one day, we examined the whole town, and that included all my pals and all my friends,

and Maumenee, of course, was running everything, including the Academy. He said, "you're going to present the results next year at the Academy." My first presentation was on histo.

I also did my AOS thesis on histo. I didn't know you were interested in histo too! That's news to me. But I was trying to get the most definitive bibliography on histo, and I reviewed all Lawton's work on histo. And Lawton had published Histo 1, Histo 2, Histo 3, and Histo 5. I looked for months for Histo 4? There must be a publication four. So I called him one day and he said, "Well, we never did publish Histo 4." I said, "Well, you could have saved me a lot of trouble." But I remember the pigeons and the chickens and all those various histo models he studied and you were involved too!

DAN: Yeah, and that was the era where there was a big argument whether or not giving the histoplasmin skin test would exacerbate the disease. And there was this big back and forth argument, 'Don't do that. No, you can't do that, whatever.'

RON: Amazing for us.

DAN: And when I was at Moorfields, a guy from England came in, never been anywhere but London, and sure enough he had typical findings of the presumed histoplasmosis syndrome, with the peripapillary atrophy, subretinal neovascularization and punctate lesions all around, and I became the resident expert at Moorfields on ocular histoplasmosis.

RON: Especially the non-histo type of histoplasmosis. Changing the subject, but Danny, you know, you're the world's best lecturer and anybody that hears you tells you that. We mean it. How did that come about? I know your personality and all that. How did you get to the point where you have such a natural way of communicating? Is that just the way you are? How do you teach that? Very few people have that skill. I sure don't have it, but how do you get there?

DAN: I don't know. It's kind of like method acting. A lot of people know the script and the intent of the story, but getting it across in an effective way. I worked very hard on problem-solving methodology. That was a backbone

for the course that Kirk Wilhelmus, Alice Matoba, and subsequently Steve Pflugfelder and I gave for years and years at the Annual Meeting.

RON: Algorithms?

DAN: Yeah. Rather than talk about what herpes simplex keratitis is and go through the discussion of the disease, we created how it presents and used presentation as a key to problem-solving. And it did lead to the algorithmic approach. I hit upon that by accident. I was going to be a speaker at the annual New Orleans Academy of Ophthalmology meeting, and one of my topics was microbial keratitis. So I reviewed the cases that we had had at Baylor and looked at the literature. Everybody started a lecture with “bacterial corneal ulcer,” and I said, ‘You know, it doesn’t come in with a name on it. It comes in with suppurative keratitis, so what’s the cause... what are the distinctive signs...’ I got interested in distinctive signs and developed, you know, whatever it is, five or six distinctive signs of the ocular surface, and began to create algorithms around problem-solving, and came up with this method of when you’re confronted with a problem there’s only three answers—yes, no, or maybe. Managing a problem when the answer is obviously “yes” and when it’s obviously “no” are easy, but how do you manage the uncertainty of not being sure? And so it developed thematically around that.

I then got interested in teaching methodology, as well as the content, and tried to blend that in a unique way. I had good material. I worked hard on my slide collection and images. When I was at Moorfields, Barrie Jones gave me a 35mm camera with an aluminum tube extension and a lens on the end. It had an angle arm. You could take the little centerpiece out of the Haag-Streit slit lamp and could mount the camera there. I also created an adaptor for the Zeiss slit lamp. So I took jillions of photographs during my fellowship year. I think Barrie got a little irritated because I walked away with them...But I ended up having good material in places where I spent time...my senior year at Bascom Palmer, a stint on the faculty at Vanderbilt and subsequently at the Cullen Eye Institute.

Among my Academy experiences, I think that annual course was very rewarding. We got a lot of strokes for it. It was fun because often times a number of big dogs in cornea and external disease would be in the audience.

We would pimp them and deflect questions to them. It was hard work but that was very rewarding.

RON: Whether you admit it or not, you changed how the best lecturers organize their material. You changed that paradigm. And we've all used it, makes sense, it works- from the straight didactic to a patient setting. And that's what we're doing now. All interactive exams are given that way now. Education is given that way now, and it was basically started by you. It's so common-sensical. It's the way we think, but it wasn't the way we talked and lectured until you changed it.

DAN: No. When I was on the American Board of Ophthalmology, we changed the props for the oral exam around that principle. Before it was like abstract questions and name this, that, and the other. We created a clinical problem and walked through the answers and built on the problem solving method.

RON: Well, since you mentioned the ABO, the world ought to know that you were the terror of the examinees.

DAN: That's a most overstated wrong thing in the world.

RON: The reason I heard everybody wanted to get to know you is so they didn't have to have you as an examiner. The poor kids would come back and...

DAN: The most frightening thing, even today, is somebody will stop me out in that hall and say, 'You examined me on my oral exam in cornea,' whatever it was. I don't know what to say. So I simply say, 'How'd you do?'

RON: You're still here, you must have passed eventually.

DAN: Yeah, I was accused of being the most malignant examiner, but actually I had the highest pass rate. I mean, I was not near as much of a terrorist as some of my colleagues.

RON: I'm just teasing you, but I think it was that interactive style. So again, another experience that you and I shared was on the ABO. That's

another organization where we met a lot of people. When I was president of the AAO they made you write the history of your presidency. That fellow over there – David Noonan – would lean on you, ‘Have you written it yet?’ Well...it was ’94 as president...I didn’t want to write the thing, so in 2006 I finally wrote it.

DAN: You can remember that?

RON: Well, I could not remember it, so I went back and got all the 1994 notes. I had the long view perspective of what really was important to me, and it was education, and that’s when I talked about LEO, at my presidential address. What I remember was education and the people you met, and the same thing about the ABO. I mean, the stars and the soon to be stars that we met along the way that we never... as you said, we never would have gotten to know. And that’s true of the Academy. That would be true of the ABO, and AUPO, so I think that was the same culture, the same people a lot of times. There’s always that conflict of interest that came up, ‘Well, are you too close to the Academy, too close to the ABO?’ You know, that was a positive, just having people who were of the same mind who were collaborating. It wasn’t hard to know what hat you were wearing and I think that that conflict of interest was overblown, but now, guess what? They have joint committees and they’re formally doing this. We used to do it at the bar. Now it’s got five committees and a staff person, they go back and forth, telling... “Here’s what we’re teaching this year. You got to examine it.” One of the lawyers would get upset and say, “Oh, you can’t do that, you can’t do that.” “It’s probably better now. It’s more organized. It’s more institutionalized and not so dependent on the people.

But that whole relationship between the way people who worked together on these organizations is what...the AUPO, the ABO, AAO, that’s why it all worked, I think. And we learned that from Ed Norton and from Maumenee and the Straatsmas and the Spiveys of the world, that’s the way it evolved. I think it’s a right evolution for the way things are in the world these days, but it worked then.

DAN: You’re exactly right. We tried to anticipate and create the curriculum in ophthalmology by subspecialty. You said it. It becomes easier to identify subject and methodology about how you examine someone in terms of creating the written qualifying exam. I was in that melee when

the OKAP and the WQE became one and the same and the whole revision about the oral props and actually training the trainers how to be examiners.

You said something very important...that it is a privilege to be among people from whom you learned a lot. Last night we had a dinner honoring Steve Pflugfelder and after a couple of toasts he got up and he nailed it. He looked around the group whom he had invited and said, 'You know, it's a grand pleasure to be among my colleagues, but more importantly, it's a privilege to have this honor by the Academy and to have had so much time associated with the Academy and the people that have helped inspire and direct and be a part of the whole, quote, academic community.'

When David Paton left as chair and I took the job in 1981, I had probably spent more time in educational initiatives in ophthalmology organizations than in my own institute. I said, 'I know a lot about education. This is going to be a breeze. You treat your residents...we'll recruit them, we'll work on the curriculum.' Guess what? In being a chair, education, is not a natural act. You've got to work at it. But you and I know all too well all the other elements of that job. Not to look down on education, but all of a sudden we became trapped by all the other responsibilities economically. Things were pretty flush back in the '80s with regard to reimbursement and funding and resources and...

RON: That's right. You know, I never aspired to be a chair, I never aspired to be president of the Academy, and I don't think either one of us did. Our interest was really in the education side. And one of the things that I think in making that transition from being a faculty member, when I think about it... and I was very happy not to be chair. The best years were when I was vice chair when I could have some influence in a positive way on what's happening, but not be so worried about the negative side of being a chair, the meetings and all that. So I'm doing chair, but I never wanted to be chair, I'm doing it but I didn't want to be it. That is one of the problems these days, people want to be chair but they don't want to do chair. That doesn't work very well.

But my point is, going from that... being a faculty member or a vice chair to being a chair, it's a different role, and some people can't make that transition, and you, I'm sure, feel the same way. You know, when you're a faculty member, you like to have a good leader, your own career is your

focus. You're writing papers, you're getting grants, your satisfaction is based on what you have accomplished and you're proud of your department. When you become chair, you've got to make sure you can get your satisfaction from what somebody is doing, because there are some chairs who say 'I've got to be on every paper,' and they're not going to have it, but that's a temperament or skill, whether that's personality that you just have to be able to do like you do with Steve Pflugfelder. You take pride in him; you get a jolly out of that; and you're not on his papers and you're not insisting on this. But that's a factor that not all chairs have. And I think we learned that to some extent, how valuable that was, by going up through the ABO and AAO, when you had good people, you didn't have some one person get credit; everybody was enjoying and receiving group credit. When I think back on those days, these are things that I didn't think about at the time, but as we're talking, there were changes that we went through that we didn't think about, and nobody taught us, there wasn't a course, but that's what happened. I don't know whether you experienced the same thing or not.

DAN: You alluded to it, that in your position, and in mine, becoming a chair was almost a protective duty. I simply didn't want someone else coming in and screwing up the department, quite frankly. I figured that I knew the way around and I knew the sensitivity of the faculty. I didn't know much about recruitment and retention. I did learn quickly exactly what you say. That's one of the Norton principles. When Ed Norton gave his remembrances of being a chair at his last AUPO meeting, we had breakfast, and he asked, 'What do you think I should talk about?' I said, 'Well, you've got some tips and whatever.' So just like you did, he took out a paper napkin at breakfast and wrote down 10 things. When he presented the topic at the meeting, I wrote them all down. When I gave the Norton Lecture several years later, I presented the Norton principles, and they have been preserved in the works at Bascom Palmer. One of them was exactly what you said, "Plant the seeds, water the plants, let them grow, and get away from their bountiful beauty," or words similar to that.

So that is key, when you bring in new faculty, you have to mentor them. You have to give them some expectation and focus about your expectations. But I try to leave them alone, other than reminders and how they inventory their academic accomplishments. But the last thing...I agree with you... the last thing I want is shared credit for something that I really didn't have anything to do with.

RON: I agree. Steve reached out to Ed Norton and Maumenee who were the two people that he called and I called the “what do we do next” type guys. And it was Ed Norton being the gardener, you know, the gardener of the faculty members analogy. And I still use that to this day, and I credit Ed then. That’s what we do. And some people grow and some don’t, but you give everybody a shot at it and you encourage them. I get satisfaction out of that.

DAN: You also have to ask how do you deal with difficult faculty? You’ve got a critical mass of 25 or more individuals who don’t all love one another and may not be the nicest people in the world. Ed would look at them and say, ‘You know, I respect your opinion in this matter, but I simply do not happen to agree.’ It was his opinion and that ruled.

RON: Do you want to say something about the AAO Secretaries?

DAN: I know when I first got involved as the Secretary for Instruction, I felt that the individuals with similar or complimentary responsibilities and their respective staff members should have some sort of colloquium to discuss matters. Maybe we won’t call it strategic planning. We’ll call it trying to interact around priorities of the Academy, because there were other arms other than education, other needs of the membership. Even within our own group, as you know, there were individuals who had a different spin on medical student education, the OKAP committee, and the BCSC. I remember struggling with certain individuals, but we made a move towards bringing a different kind of level among the Committee for Secretaries, and whereas big business got done around the board table, a lot of roll-your-sleeves-up kind of hard work got accomplished in that forum.

RON: Yeah, I think you’re right. And in retrospect, you know, the annual meeting was a separate thing, and Dunbar was there and Paul Lichter was the editor, and we had... and thinking about it now, and having had the benefit of 20 years, I think we did all pull it together because we had good people. We just hadn’t set ourselves up in a way to think about these things together. And I remember we went over to the Claremont, a Claremont Planning Session, when we talked about the education as a group, Bruce is the one who teed that up for us, and there was a time when it wasn’t as fragmented as it had been, and it’s naturally going to get fragmented because

jobs are so big. I think it is a time that the Secretaries, who were all related somehow to education, were working together.

And at the same time we didn't think about it, but you and I have seen how other people work together with staff, and it's just natural for you, and natural for me, to include [Academy] staff. They're a part of the team, and I know we had great time after hours and during working hours, and there was a lot of fun along the way, which included staff. And I think that credit always went to the staff, and that's because they deserved it, and at the same time we meant it, and there we were all included, and I don't think we gave it a second thought. We didn't get up in the morning and say, 'Well, this time I'm going to do this with the staff today.' We just did.

DAN: I think that we also helped [Academy] staff understand the constituency group and the Academy members. As a staff member you might easily look at your own priorities, budgeted agenda items, and whatever, and easily forget that Academy members are volunteers around whatever they are involved doing. I can recall more than a few times we bridged the gap between staff, not quite being patient and understanding... you had to keep them a part of the team...and then you had to talk to the Academy member and say, 'Now, they really didn't mean that,' or, 'let me help you do this,' or whatever it is. It took some sensitivity development to take advantage of skilled staff and volunteerism. You and I have said for a long time that the Academy is built around volunteerism, and the Academy, to a significant degree, is dependent upon the departments of ophthalmology and their faculty to add significantly to the content, organization, and presentation of material. That step, to some degree, created a bigger desire among the non-academicians, who really are academicians in practice, with their own tutorial methods, their own clinical trials, to want to be more involved in the Academy. They looked around and saw, 'Well, there's Ron Smith. He's taken time out and he's doing this, he's got creative thinking. It's an honor and privilege to be on the podium or on the committee.' They learned to work their way up. Individuals would ask, 'How can I get more involved in the Academy?' And we'd say, 'Well, what's your interest?' 'Well, I think I want education.' I said, 'How about getting on the BCSC for glaucoma?' or whatever. And it enabled the senior leaders of that particular domain to figure out who the players were, who would do the work, who would really get engaged in the process.

You are absolutely correct in that we depended big time on staff because there were a lot of educators among the staff about methodologies, but we were sort of the go betweens.

RON: Yeah, facilitators and energizers. And I think you're right, and everybody said so...I mean, there had been so many physician volunteers and when you think about it, it really is giving back, and that's just what it is. Why do it? You like to do it. You know...I'm having fun. Why not? But it was fun; I never thought of it as a big onerous task.

DAN: So what was your most memorable moment or moments, in your Academy career, meeting, organization?

RON: Well, I guess at the 1994 annual meeting for impact when I was president, but the best times were when you and I were sitting together around the Board table on our special corner. I think we got more done, and it was more interesting. I've never been a very good politician. I've become one, but it's not natural for me. I had to as President and as Chair. And there's a lot of political aspects of being president that you had to do, and I did it, and I tried to do my best, but I always come back to education. The best times for me were working all the time in those education committees and then when we had a chance to have an impact on that and create a whole direction, for better or worse, and bounced it back to each other and then played around with it, and after dinner had a few drinks and drew stuff on a napkin. At the same time we were making a difference, and that's what it's all about, how you make a difference. So that was the best time for me—working with you on education.

There were other moments and we've all had them, and, you know, being on the Reorganization Committee. That might have had the most impact on the organization, not because of me but because of the committee, but it was a chance to see all other types in the Academy, leadership, the advocacy people...and I've always learned more, always learned more than I've given to it. The one thing I learned from that committee, and I still use it to this day, whenever we serve on any committee in the university and they want to reorganize that thing, it is "form follows function." Form follows function, because most of the time you get up and say everybody wants to talk about the structure instead of function.

DAN: The org chart.

RON: ...the org chart, but it was form follows function, and when you think about it that's one thing I learned.

The second thing I learned was from, one of the lawyers at the AAO. He told me the world is run by those who show up. You don't show up to run the world, but that's just the way it works, so you volunteer. I never got into it to run anything...but that's what happens. If you're not there you can't change or improve anything.

DAN: If you're not at the dinner you're on the menu.

RON: Those are the kind of general takeaways. There are more, but those are two that always come to mind. But the good times were sitting around the Board table. I think I called you when I retired from the Academy the first time, or the second time, and they...you know, they gave me that fancy trash can. They asked me what I wanted when I retired. When I retired the first time, I said I wanted a flag. You remember that one? You and Katherine Hecht and Tom Weingeist...I had the only Academy flag. They said, 'What did I want?' And this Noonan over there, he knew I was into flags, and when I was president he arranged to have two of those little flags you put on your limo that said President of the Academy, so he just played us like a violin. So that was that whole era I was talking about.

DAN: Being king of the volunteers.

RON: Oh, king of the volunteers...that's the other thing that Danny did for me. A memorable event that he always continues to tease me about is volunteering. And here's a guy, Mr. Volunteer, and he accuses me of being a volunteer. So he got me a racecar...he got me a model racecar and put the logos of all the organizations, like the AUPO and AAO on it...and he gives it to me. Well, that's a prized possession. I have two things from him that are my prizes: the LEO glassware and that car, and no one has any idea what they mean. And I'm sure when I'm gone they'll say, 'What the hell is this stuff?' and they're in the garbage can. But they meant a lot to me.

But sitting around that table...I know what I was talking about was getting back to the gifts, so the gift the first time was a flag. The second time was

when I was on the Foundation board. You know, the past president's job, you go out to pasture. You go to the cocktail parties. Well, then that Dunbar decided we want you to do a little more. So I was ready to retire as Foundation chair, and they gave me a certificate at the luncheon. I was walking into the parking lot, and David came out and said, 'Oh, I've got to talk to you for a minute, you know, Tom Hutchinson didn't want to do this yet. Do you mind being chair for a few more years?' I said, 'Well, what am I going to do with my plaque?' And I literally had the certificate. They said 'Well, until Tom's ready.' Well, ten years later Tom took over.

DAN: Ten?

RON: It was eight or nine...Tom said...is finally ready to be the chair. I was the interim.

The third time I retired was when they gave me that fancy trash can. I mean, it was a fancy trash can, and it says on there- Noonan probably came up with this and you saw it- and it said, 'In the corner but never cornered.' And when you open it up it had your name inside of it too. And that now is in my living room right where I use it every day, I look at that thing while I'm watching TV and what it says on there, and nobody has any clue what that means when I whip open that trash can.

DAN: So, Ron, what as President or Secretary was the most difficult time or decision when you were in the Academy?

RON: That's interesting. I wasn't so confident that I could add much to the whole discussion about reorganization. When it came right down to it, and the whole...you know, nobody likes confrontation—I sure don't—and the whole council and how that was going to work. I didn't think that I had any expertise or information that would help that, and I think it was a tough decision just to be involved in that process. But it turned out okay. We had good people and good advisors, but I was ambivalent about even being involved in that.

DAN: What about your time as president?

RON: We had managed care crises then. We'd just done the reorganization, and the whole thing about how the Academy was going to respond to

managed care, how it was going to respond to the AAO council. Those were the days when we were spending a lot of time focused inward and on ourselves and fighting among ourselves. You know, the old story, doctors do one thing well and that's fight among themselves, and we were doing a hell of a job. But I think that was a whole era when we were just getting through that, and then what do you do in managed care? And it was pitting one ophthalmologist versus another, and should we have a network of our own, and you had to belong to it. You know, I was an education guy. What the hell do I know? I think that whole era, how to keep the organization together at the institutional level, and then how do you keep the individual ophthalmologists who are being left out of these networks that were forming? The Academy might form a network, and that would have been a disaster. So I think those were the tangible things in that era. We made it through, but I think those were issues in retrospect that could have blown it apart if we had made the wrong decisions.

DAN: Yeah, and you know this. Being a chair and being able to hear that discussion, because you had the same problem locally. You know, what are you going to do with your faculty, and what about the practicing ophthalmologists in the community? And if everybody is going to be in managed care, from where are the patients going to come? How are we going to use the primary care ophthalmologists? Same thing became a forum discussion for the AUPO. So hearing the experts around the table at the Academy meetings was immensely helpful. I learned the language. It forced us to think a way we had not had to think before and, you know, we lived in the luxury of fee for service, covered lives, covered eyes with something that was just foreign. But that was hugely beneficial, and we did get through it a lot from your leadership, but it was extremely helpful to me as a chairman of the department.

RON: When I think back through that, when I wrote this President's report in 2006, based on what happened in 1994, and healthcare delivery and managed care was sweeping the country. It was cost and not quality, all those things, and how we were going to relate to each other, but even though we had experts and that was key without data. But at the end of the day there was a group of people who were ethical and with no personal agendas...and we see the same thing in departments. It's the same thing we were talking about earlier. It worked, because you had the leadership of the Academy, the boards and the secretaries, they were all there because they

were volunteering to be there. They didn't get any gain from it other than their own personal satisfaction. And I think that trust and ethical approach at the end of the day made a difference. And after you assimilate all the data and the facts and the experts, which you needed, absolutely, and learned a lot, different language, the language, and yet at the end of the day we had to make decisions about, 'Well, what do we do with all this?' That was when the core values came out that acted on that information. That's intangible, there's no way of teaching that.

DAN: Think back about how many times the Academy took a leadership role, and sometimes not so easily. I can remember David Paton getting thrown off the stage in Kansas City when he brought up the recertification issue. I thought there was going to be a riot in the house, and everybody hid from that issue for several years and was afraid to go back, and yet, in a very sensible, progressive way they did it. Same thing about how does an organization on behalf of its members, as diverse as they are, help them get through the morass and the complexity of managed care? Nothing could have made me happier today than to hear about outcomes and quality. That's the kind of thing I've been talking to my faculty about. I even passed around the Cleveland Clinic volume on cardiovascular outcomes. Toby Cosgrove and I have been pals since we tried to recruit him to come down and be chair of surgery at Baylor. And yet all I have heard has been, 'Well, wait until we get the electronic medical record up and running right and whatever.' But David Parke today just took the leadership role and made it very clear that you can't fix what you can't measure, and you can't expound on being a good doctor or a good ophthalmologist until you can show the data. It's a natural evolution that's been a long time coming.

It's just like the Preferred Practice Patterns. You and I sat at the corner and ripped them to shreds the first couple of times. But the PPPs and the construct and review processes became refined. The PPPs were effective before evidence-based medicine ever even got mentioned. I can remember when we made a run at Dunbar about a budget for education, and it was you and I that pushed out evidence-based medicine. We brought that article in *The New England Journal* to the board meeting and they made us stand up and explain what it was, and we then took that lead. After you have a Preferred Practice Pattern built on standards, the process then needs to help the members implement and measure the outcome. They will be squirrely about it. You certainly heard some of that today. But the very fact that that's

the direction that the Academy, once again, that's the Academy taking a lead role on behalf of the membership for their benefit, with no hidden agenda. They are certainly not in it for the royalties. It's for the sake of the members. As diverse as they are and with so many of them outside an academic domain, they simply do not have the resources to do that themselves.

RON: Exactly. Exactly. And the fact that the Board became a strategic board was a big step that has not changed. That really changed how the board worked.

One thing that I feared most when I was president all throughout this was public speaking. I mean, I stutter, I'm disfluent. I'm less now, but once you're disfluent you're disfluent, and I still work on it. In informal sessions it's no problem. but when I'm in front of a group, I have to practice, I have to rehearse, and I talked to Suzette. I said 'I've got to do something. I might be asked to speak in front of a state society.' I would say to her, 'I'm not Danny Jones. It's just not my nature. I just can't get up and spontaneously sound like I rehearsed.' So every time I would give something I had to rehearse it. For the year before I was president, I went to a stuttering clinic at Children's Hospital, every week I would rehearse and learn how to do public speaking, just to get ready to be president of the Academy. But the most fearful thing for me was getting up and spontaneously talking about anything, just because of the nature of my dysfluency.

DAN: See, that's going to go down alongside histo as a permanent statement and character definition about you. Not only what you've done and been through, you're so at ease sharing things that most people wouldn't even want anybody to know.

RON: That's an emotional thing for me there. You go ahead.

DAN: I thought that was pretty stupid when they instructed us that we could even cry during this interview. I thought there is no way are we going to cry!

I think the Academy gave me immense self-confidence in dealing with a variety of people, having to articulate what you felt was important, lay a claim to, deal with the complexity of individuals, yeah, get between staff and

the volunteers, and...you know, it didn't say Leadership 101, but there were elements of the experiences that I gained a whole new perspective of myself and my academic responsibilities, and being a chair.

RON: You were my standard for lecturing, which I've never reached, but I did try and I did practice. Well, it took me a year of speech training to be able to get up and give a speech at the American Academy of Ophthalmology, which I think worked out all right, I did all right. It did help me a lot. And that's not an issue for me now, but it was an issue then, it was a big issue for me at the time.

DAN: I think what's gratifying, too, is that our friendship...throw in Steve Ryan and Pat Wilkinson and whomever...We got to know each other in vastly different settings, with all the Walter Stark and Wilmer experiences. Our friendship has even survived the competitiveness of running departments and trying to recruit the same people. I remember too well that when we were trying to get Tim Stout to come into the residency program and we invited Lynn Murphee to come speak in the department, we said, 'Well, do you have dinner plans, Lynn?' 'No, no, no, I'm going to see some old friends.' There he was recruiting Tim Stout to go to Doheny. But that's okay. But it's for me such a comfort zone. There's been academic respect, there's been sharing...more than a few times, you know, I've called you about problems and personalities and what to do. I've marveled at the manner in which you built the department, how you struggled with issues at the top. It's a very special, immeasurable friendship.

RON: It is special. Yeah, it's one of those friendships where you if you don't see somebody for a year, and then you see them it's like you've been there with them forever. But I remember the times that we...well, we've had some good times on the tour. I remember that time you were giving the lecture at Wilmer. Do you remember that one? We had been out playing tennis. You were scheduled to give a lecture, and your slides were in Walter Stark's trunk, and I'd lost the key to the trunk. I kept telling Danny, 'Danny, we can't get these out of the trunk.' You were sure that I was playing a joke. I said, 'Danny, I don't have the keys.' The clock was running. So...and you started seeing me ripping the back seat out of the car trying...

DAN: To get to the trunk.

RON: ...to get to the trunk.

DAN: Yeah.

RON: They called Polly, and she had to drive all the way in to Wilmer, and this was going to work or not. That was a classic moment.

DAN: Ed Maumenee, you, Walter, and I, we played doubles that morning.

RON: That's right. That's right.

DAN: I thought sure that you were just jacking me around.

RON: I know you did, I know you thought I was, but I wasn't.

DAN: Just getting my heat up.

RON: That was one of the times I wasn't, so...that was good.

So what else can we discuss...Danny, you were everybody's choice to be president of the Academy, and I was given the job of convincing you to take this job on. Now, you didn't need it, you didn't want it, but I think the organization needed you. And every couple of years, my job was to convince you. So always...we'd go out to dinner, and I'd always have you convinced at midnight. You would say yes. But by 7 a.m. it was no. So that was not a big deal for you, but I think it was a missed deal for the AAO. For me we would have had a couple more years of fun. You know, we would get to have some more time together with you as president.

So, but what were your thoughts about that? That was a big decision for you not to do that.

DAN: I think I was afraid of the job. I didn't think I had that level of organizational skills. I didn't...I was worried about time away from the department. There was a lot of unfinished business in the department. I saw a couple presidents go back to being chair, and they no longer had a parking place or an office. I kept hearing horror stories, 'Oh, you'll be gone 50 weekends out of the year,' and whatever. And I didn't think I could manage the complexity of state ophthalmologic groups and the Council jacking me

around and pulling at me one way or another. I think that I also had a bit of fear of that much responsibility. That much time commitment. When I thought I had a lot to do in my own academic department.

RON: Of course that was your personal opinion. Everybody else thought that you were perfect for the president job. We really didn't care a whole lot about your opinion.

DAN: I never...I never regretted the decision. I think I regretted disappointing you, because you did try every trick in the book. Double Jack Daniels and whatever else, and, you know, you just like wake up gnawing your arm off in the morning. I also took great pride in seeing so many of my pals do such a great job of it. You did, Pat did, and there was just a whole parade of people.

RON: You know, but that was a moment...I mean, it was a part of the whole deal, nobody regrets it or one way or the other. It was just part of... but it was an interesting process.

DAN: It was an honor, I mean, for somebody...

RON: And actually, it was the best outcome. In a way it's the best deal to be asked, but you don't have to do it. I mean, that's the ultimate, that's the ultimate positive thing, so...it was two or three times, two or three times we went to the well. My friend Noonan over here was part of the ask.

DAN: Chicago Hilton?

RON: Oh...I was President in 1994 and the suite was at the Fairmont in San Francisco. Yeah, the Fairmont, you were there. Talk about a Fairmont story, this was when our pal Mr. Noonan was in charge. The president was allowed to have his own personal friends for one evening and my family was there. San Francisco was pretty close to Los Angeles. What they didn't tell me is that you have to close the bar. So I had an open bar and all the residents and all my friends were there. So the next day David Noonan comes up to me in some nice way, said, 'You know...' I don't know how exactly he said it, but basically he told me in a nice way, 'You know, you idiot, you weren't supposed to have an open bar, that's \$3,000. Do you realize that?' But it was a great party...

DAN: I had never seen so many people, Wilmer residents...

RON: I said I was sorry. I was trying to be diplomatic. You know, it's one of these times it took me less time to get forgiveness than it does permission. But you remember the one time when David was chastising me for not doing my duty.

So what else is on here I was going to ask you? Well, how about you, Danny? You ask me a question. What was the biggest challenge or the biggest problem that you've had, or maybe within...at the Academy or the time you were there...?

DAN: No, I think the biggest challenge is being a department chair, living through now my fourth president and CEO of the college, some changes, radical changes. I've worked very hard to try to not alienate the new president. I've tried to be...often bridge [the gap] and help in areas where I think the colleges' needs are. But it's hard. It's hard to manage the business of the department. We've done well. You know, we've had a good margin. I've pleaded that we, the department, need to get more benefit from that. They sweep the books clean at the end of the year. If you don't manage carefully or take advantage of some money you can use during the year, you're going to lose that. There's new hardship about tax on philanthropic gifts. If you receive money from funding agencies, whatever they may be, if they don't or will not pay indirect costs, you're going to have to pay that yourself.

Trying to manage faculty. My revolving door of vitreo-retinal surgeons is hard work, keeping them happy and fending for them, then trying to help do the right things for all faculty. But, you know, from a personality standpoint and subspecialty, ophthalmologists self-select subspecialty, and it's a personality element. It's just like an orthopedic surgeon does not look like a dermatologist, doesn't act like that. The cardiovascular surgeon doesn't behave, look like, think like a psychiatrist. A vitreo-retinal surgeon and a neuro-ophthalmologist are as different as night and day. And keeping the flock happy...and I don't think I've done a good job of actually accomplishing true group practice-sharing mentality, and that's been a disappointment for me. I don't think I've accomplished the level of service in patient delivery that...because I've got faculty...you do too... that do the same things now that they did 10 years ago. Patients are waiting two hours

to be seen, unnecessary expenditure of resources, and on and on and on. So, shoot, being on the Academy was pure joy.

RON: That's right, for me, too.

DAN: I won't say escape, but it's pure joy. You can walk into the meeting room, or onto the floor of the annual meeting, and feel buoyant. Feel entirely different, than the struggles that you and I know we share at the departmental level.

RON: I feel exactly the same way. You feel, in a way, more of a sense of accomplishment through our volunteer work here, or wherever we are, than I do back at the home base. In a way I'm more appreciated.

DAN: Exactly.

RON: And I don't think we're unique in that regard. So I think it's been a good run for both of us, at the Academy and...

DAN: So what are you going to do next?

RON: I'm thinking about that. I don't know what I'm going to do next. I'm not planning anything immediately. I've got some challenges that I'm dealing with right now that I'm not going to talk about, but after that challenge has gone away I'd like to leave a legacy. Legacy is maybe too fancy a word, but it would mean a lot to me what's there after I leave, and I don't need so much credit for it, but it's sort of a place that wasn't there when I got there with Steve...I bought into Steve Ryan's vision, and that's been fine for me, that's been a good run for me. And I know that he feels the same way. We'd like to get Doheny positioned so it can get better. And we've taken it so far, and we've made mistakes and it could be better, but, you know, you've got to learn from your mistakes. Hopefully it will be in a position where the next group...it's all about making a difference and moving the field, and not about your name on a building. It's about how are things better because you've been there? I don't know if we'll ever be there. It's a process, but when I've thrown in the towel to go part time and teach and be viewed as somebody that the next chair would want to be around, and there are places where they don't want the chair around. We love to have Steve Ryan round Doheny; he's a positive force. I want to contribute in that

way, whatever...whatever that is, and it won't be in a management or it won't be in a bunch of committees.

One of the things I enjoy most now, which, when I think about what do I enjoy, it's every Friday before rounds I meet with the residents, just me and the residents, nobody else, and we talk about everything, and we talk about anything. I learned this from Proctor. We did this at Proctor. And I've done it forever, and...

DAN: Seven o'clock?

RON: Seven to eight. We talk about cases, politics, what did you do at ARVO...and every year I talk to the new guys and the old guys and I ask 'Is this worthwhile?' Because sometimes you think, you know, they're late...and I know I enjoy it but is this really getting anybody anywhere. So I go around the halls and say, 'What is it that you like about this?' And some residents try to make up something, you know, that's good. But one guy just this year said, 'You know, we like the stories.' And I said, 'If you like the stories I'm here for another year.' But I think they appreciate it, and I don't think about it because for us it's just what we lived, you know. We talk about problems I've had, the four things that only should happen to you once as a surgeon, or I talk about us or something that went on in the history of ophthalmology and I guess they like that stuff. You know, like you and I liked it when we were there, and I hadn't appreciated that...but we're now the seniors. We are now the senior guys; you look around, you know, 'When did that happen?' But I think that kind of participation and involvement with the young residents- and I still read every resident application, not because we're going to take them all- but because they are just so inspirational. I just get turned on by the future, that we're in good hands...but those are the kind of things I like to stay involved in. How about yourself?

DAN: Yeah, I mean, it's clear that the biggest reward from the jobs that we do relate to the gratification of the product and their success. I mean, nothing is more stirring than watching Steve Pflugfelder today.

RON: Absolutely, absolutely.