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*"The Academy online community is a perfect setting to get ideas from other practitioners on how to manage difficult cases. It is a very positive environment where I can share ideas and techniques on patient care, keep updated on the politics of medicine, and research practice management tools such as electronic medical records."*  
— Chad R. Bouterse, DO, Clarkston, Wash.

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# Letters

## Femtosecond Lasers: Another Option

I enjoyed your article entitled "Femtosecond for Cataract: Are Lasers Good for Business?" (Feature, July). I agree that our current reimbursement structure has made it difficult for practices and surgeons to justify the addition of femtosecond lasers into our cataract offerings. However, I found absent from your discussion a fifth financial economic model for integrating femtosecond technology: mobile access.

I have experienced success over the years utilizing the services of a mobile provider for traditional cataract surgery, refractive surgery, and now, femtosecond laser for cataract surgery. Not only have I benefited from the ability to remain at the cutting edge with regard to equipment but I have also found the expertise that the accompanying engineer or technician brings to the procedure day invaluable.

There are many practices, particularly in small to mid-markets, where case volume will remain an obstacle, limiting the ability to break even, let alone profit. Factoring in the risk of equipment obsolescence and technological advancements, it is reasonable to be thoughtful. However, these financial concerns need not be a limiting factor to sur-



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geons adopting femtosecond technology.

Sightpath Medical, the company I have partnered with for over two decades, provides variable access to femtosecond lasers for cataract surgery on a per-procedure basis. Their model allowed me to profit on the first case day, rather than breaking even over a five-to-eight-year timeframe. For me, this has been a successful model, and for your readers who prefer to dip their toes into the femtosecond technology pool rather than take a leap, this model may be a viable option.

Richard L. Lindstrom, MD  
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*Dr. Lindstrom is chief medical officer of Sightpath Medical; consultant to Alcon, AMO, Bausch + Lomb, and LenSx; and owns equity in Bausch + Lomb, LenSx, and Sightpath Medical.*