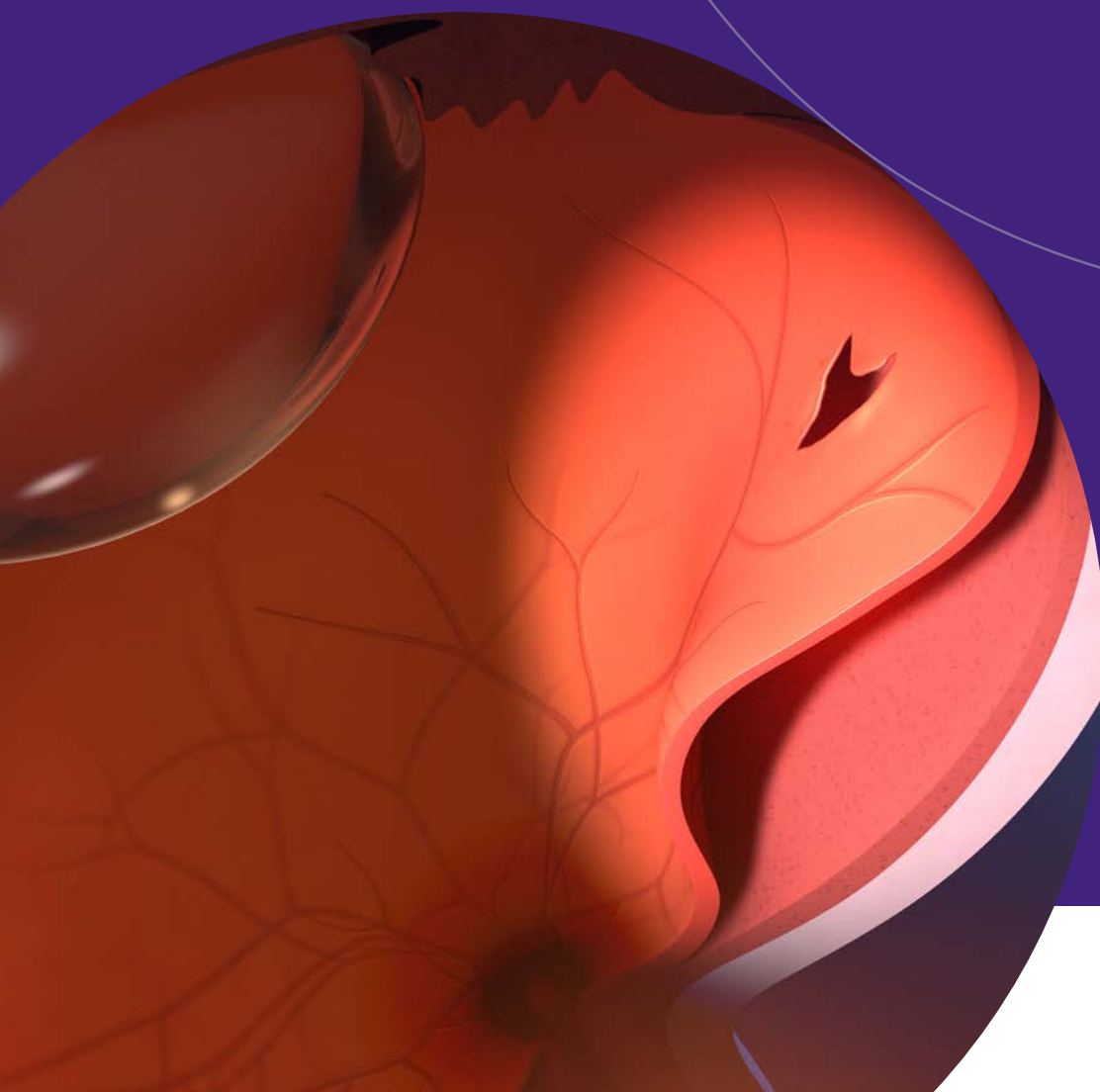


AMERICAN ACADEMY  
OF OPHTHALMOLOGY®  
Protecting Sight. Empowering Lives.

# EyeNet<sup>®</sup>

MAGAZINE

## 2019 Media Kit



Protecting Sight. Empowering Lives.®

# EyeNet<sup>®</sup>

MAGAZINE



*EyeNet* is the Academy's official newsmagazine and the premier source among the ophthalmic trade press of credible information for ophthalmologists. *EyeNet* delivers practical clinical information that can be applied immediately in patient care, plus coverage of a broad range of subjects of interest to ophthalmologists, including business and news—all in a concise, highly readable format.



## Organization Affiliation

*EyeNet* is a member benefit for American Academy of Ophthalmology (AAO) Members and Members in Training worldwide.

It also is a benefit for American Academy of Ophthalmic Executives (AAOE) Members.

AAO membership includes 93% of practicing U.S. ophthalmologists and 99% of ophthalmologists completing a residency or fellowship training program.

AAOE membership includes approximately 6,000 office administrators, managers, and physicians.

## Issuance

**FREQUENCY:** 12 times a year

**ISSUE DATE:** First of the month

**MAILING DATE & CLASS:** 25th of the preceding month, second class

**AVERAGE CIRCULATION:** 23,500 (see page 10 for details)

## Advertising

**ACCEPTANCE AND COPY RESTRICTIONS:** Subject to approval by the Academy

**PLACEMENT POLICY:** Interspersed



# The Best in Clinical Insights

## January

### Technology: Education.

Surgical simulators are making significant inroads into ophthalmology. Examples of how these devices are being incorporated into medical education, not only during residency training but also for the continuing education of clinicians who are already in practice.

### Clinical Updates

Comprehensive • Refractive

*Distributed at AAO*

## February

**Tele-Glaucoma.** The concept of remote screening, diagnosis, and even treatment may help to address the needs of patients who might not currently be receiving timely and adequate care. Can technology help improve the state of glaucoma management?

### Clinical Updates

Cornea • Retina

## March

**Cataract Spotlight.** Revisiting the Spotlight on Cataract session during AAO 2018, *EyeNet* presents 18 nerve-wracking surgical cases, along with audience poll questions and answers and fresh expert commentary.

### Clinical Updates

Glaucoma • Oncology

## April

### Alternative Drug Delivery.

From the front of the eye to the back, ophthalmic drug delivery seems to be undergoing a revolution. A recent influx of devices and techniques is expanding the range of treatment options for patients and their ophthalmologists. A perspective on these new developments.

### Clinical Updates

Cataract • Pediatrics

*Distributed at ASCRS and PAAO*

## May

**Retina Drugs.** Which pharmaceuticals are under investigation for the management of various posterior segment diseases? Don't miss this survey of products in the pipeline. Plus, a discussion of research results from clinical trials of the longer-acting anti-VEGF drugs.

### Clinical Updates

Glaucoma • Neuro

*Distributed at SOE*

## June

**Corneal Infections.** From atypical keratitis and herpes zoster ophthalmicus to viral endotheliitis, corneal infections run the gamut. What you need to know to stem infection in your patients, and what to do when therapy fails.

And a look at corneal cross-linking as treatment for some infections.

### Clinical Updates

Trauma • Uveitis

## July

**ASC Essentials.** How the ambulatory surgery center has changed over the years and what you can and should do to bring yours fully into the 21st century. Plus, considerations as you steer your ASC into the future.

### Clinical Updates

Glaucoma • Retina

*Distributed at ASRS*

## August

**Ophthalmic Pathology Refresher.** What do you remember from your ophthalmic pathology rotation? We thought so. Here are the top 5 things you need to brush up on, as well as tips for collaborating effectively with a pathologist.

### Clinical Updates

Cataract • Refractive

*Distributed at ESCRS*

## September

**Focus on Cataract Outcomes.** Get expert advice on maximizing the outcome of cataract surgery. This case-based guide will take you through the bewildering world of IOL calculations and provide tips

on how to match formula selection to case presentation.

### Clinical Updates

Comprehensive • Oculoplastic

## October

**Focus on Technology.** What are the implications of the latest technology for ophthalmology? A look at the most recent advances and their potential impact on the profession and patient care.

### Clinical Updates

Cornea • Oncology • Retina

*Distributed at AAO 2019*

## November

**IRIS Registry.** The IRIS Registry (Intelligent Research in Sight) is useful for reporting to the Merit-Based Incentive Payment System, but how can it help collect data on patient care and outcomes?

### Clinical Updates

Cornea • Neuro

## December

**A Look Ahead.** *EyeNet* invites experts to discuss the news and trends within their subspecialties from 2019 and to examine these events for their likelihood to affect the profession of ophthalmology into the coming years.

### Clinical Updates

Comprehensive • International

## 2019 Ad and Materials Deadlines

### January

Ad close: December 3

Materials close: December 7

### February

Ad close: January 7

Materials close: January 11

### March

Ad close: January 28

Materials close: February 1

### April

Ad close: March 4

Materials close: March 8

### May

Ad close: April 1

Materials close: April 5

### June

Ad close: May 1

Materials close: May 3

### July

Ad close: June 3

Materials close: June 7

### August

Ad close: July 1

Materials close: July 5

### September

Ad close: August 5

Materials close: August 9

### October

Ad close: September 3

Materials close: September 6

### November

Ad close: October 1

Materials close: October 4

### December

Ad close: November 4

Materials close: November 8

# YOUR 2019 MARKETING PLAN

## EyeNet Tops the Charts

### What Ophthalmologists Think About EyeNet

Kantar Media, an independent, third party market research firm, conducts annual readership surveys to study the reading habits of U.S. ophthalmologists. 2018's findings show the following rankings.

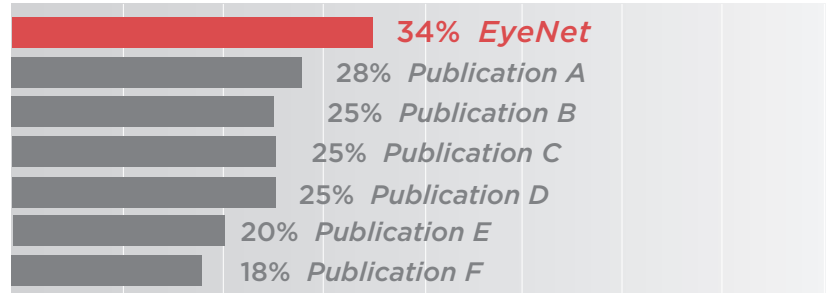
**#1 in High Readers.** *EyeNet* has the most dedicated readers for the 9th year in a row.

**SOURCE:** Kantar Media, 2018 Eyecare Readership Study.

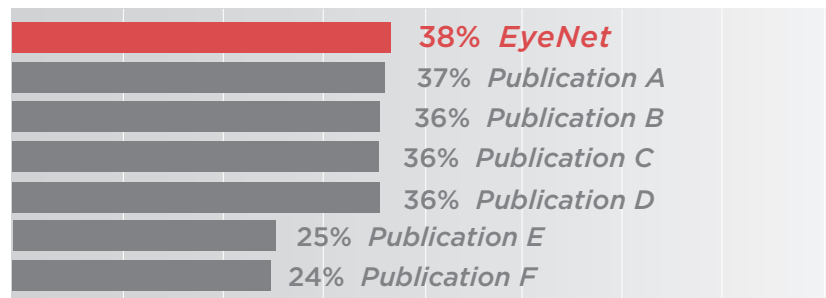
**#1 in Average Page Exposures.** More ophthalmologists are likely to see a page in *EyeNet* than any other ophthalmic publication for the 6th year in a row.

**SOURCE:** Kantar Media, 2018 Eyecare Readership Study.

#### #1 in High Readers



#### #1 in Average Page Exposures



### The Newsmagazine With the Most Receptive Readers

*EyeNet* leads the pack among ophthalmologists you want to reach: **#1 in high readers and #2 in ad page exposures in these and other categories:**

**Early drug adopters.** Reach the ophthalmologists who prescribe as soon as they see a new drug.

**Those who intend to purchase diagnostic equipment, surgical equipment, and EHR systems in the next year.** These are the physicians who are in the frame of mind to make purchases—target them when they're in the market to buy.

**Those for whom ophthalmic surgery is at least 26% of practice.** Develop a loyal customer base of those doctors who need to purchase more equipment more often.

**Those who write more than 50 prescriptions per week.** Highly productive prescribers, prolific rx writers.

**SOURCE:** Kantar Media, 2018 Eyecare Readership Study.

#### DEFINITIONS OF TERMS

**High readers:** Those who read in depth and with high frequency (high percentage of pages and 3/4 and 4/4 issues).

**Ad page exposures:** Combines how thoroughly the publication is read with the number of pages and ad locations to predict the probability that a reader will be exposed to an advertisement.

**Average page exposures:** Factors how frequently and thoroughly a reader goes through an issue to project the likelihood of exposure to any page in the publication.

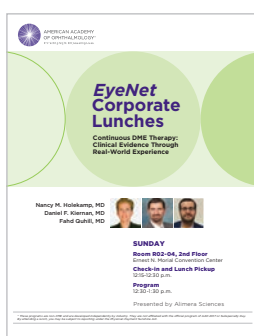


# Create an All-Encompassing, Multi-Platform Campaign

With *EyeNet Magazine* at the center of your marketing plan, you are guaranteed a loyal and avid reader base. Build out from that core with *EyeNet's* satellite offerings: AAO 2019 print and electronic publications, custom supplements offered throughout the year, educational events, and digital opportunities to engage your audience whenever and however they choose to read the magazine.



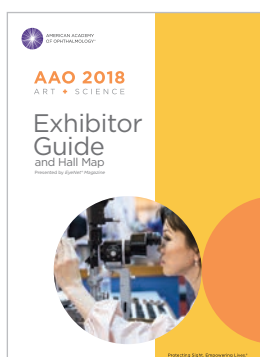
AAO 2019 NEWS



CORPORATE LUNCHES



BEST OF RETINA



EXHIBITOR GUIDE

## AAO 2019 Opportunities

**AAO 2019 DAILY.** *EyeNet's* clinical e-newsletter is reported for 4 days in San Francisco to keep ophthalmologists on top of news from Subspecialty Day and AAO 2019. It is emailed nightly to more than 70,000 recipients and posted to [aao.org/eyenet](http://aao.org/eyenet) for double exposure.

**AAO 2019 NEWS.** The Academy's convention tabloid provides extensive meeting news and information. There are 2 editions—1 distributed on Friday, the other on Sunday—displayed in high-visibility locations throughout the hall. The Friday edition guarantees distribution via a door drop to 11,000 attendees. Your ad will appear in both editions.

**"BEST OF" SELECTIONS.** Each edition recaps the important discoveries, issues, and trends in a subspecialty. Cornea, Glaucoma, and Retina editions are distributed at Subspecialty Day, while Refractive-Cataract is distributed at both Subspecialty Day and the Spotlight on Cataract Surgery session.

**DESTINATION SERIES.** AAO 2019 attendees turn to this 6-part series in *EyeNet* for deadlines, event previews, interviews, sneak peeks, and more (May to October).

**EYENET CORPORATE LUNCHES.** Take your hour-long message directly to ophthalmologists during lunchtime in San Francisco. You develop the program, *EyeNet* handles the marketing and logistics.

**EXHIBITOR GUIDE.** The ONLY printed exhibitor list for AAO 2019, delivered straight to attendees in their registration bags! Showcase your product with an upgraded listing.

**OPHTHALMIC PHOTOGRAPHY CALENDAR.** An eye-catching collection of striking ophthalmic images, the *Calendar* is distributed to meeting attendees via registration bags, and your corporate logo is displayed on each page.

## Year-Round Opportunities

**COVER TIP ADVERTISING.** Showcase your brand front and center on *EyeNet*'s cover. Ship preprinted tips or send a high-resolution, press-ready PDF for *EyeNet* to print.

**INDUSTRY-SPONSORED SUPPLEMENTS.** Tell the full story of your products or services to ophthalmologists through a supplement polybagged with the monthly issue. Develop your own content and design your own cover and layout—or use the modified *EyeNet* design template provided by the Academy.

### MIPS MANUAL 2019: A PRIMER AND REFERENCE.

This booklet opens with a quick overview before taking a detailed, deeper dive into the regulations. It includes listings for scores of MIPS measures and activities, making it a valued reference. (Posted online ahead of print.)

**YO SUPPLEMENT.** Read by 4,000 ophthalmologists at the start of their careers, this supplement gets young ophthalmologists up to speed on key topics that aren't covered during residency and gives them a firm grounding in the business aspects of ophthalmic practice.

**OTHER SUPPLEMENTS.** Got a topic in mind? *EyeNet* can work with your team to develop supplements in your area of interest.



MIPS Supplement



aao.org/eyenet

## Spotlight on Digital

**eTOC.** This monthly e-blast provides all Academy members with on-the-go highlights of *EyeNet* print content. With approximately 22,500 recipients, a 35% open rate, and 8% clickthrough rate, the blast features prominent ad positioning.

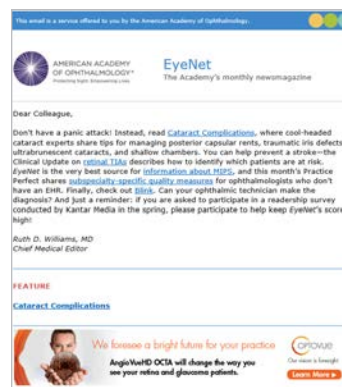
**SPOTLIGHT ADVERTORIAL.** Your image and copy is featured on a dedicated page on [aao.org/eyenet](http://aao.org/eyenet). Callouts and links provide extra exposure.

**VIDEO.** *EyeNet* offers 2 options for video advertising on [aao.org/eyenet](http://aao.org/eyenet).

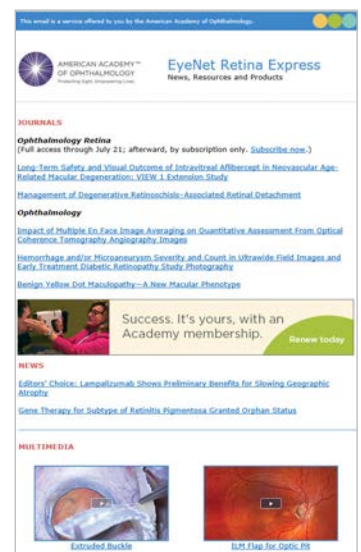
- **Leading into a clinical video.** Placing a 7-second video spot at the beginning guarantees undivided attention from ophthalmologists, as they must watch the ad before viewing the clinical content.
- **Freestanding.** Create a stand-alone video about your product. We will drive traffic to the video by mentioning it in the eTOC.

**WEBSITE BANNERS.** Multiple sizes are available (all are run-of-site): leaderboards, skyscrapers, and buttons. The website averages 240,500 views monthly, with readers spending an average of 8 minutes on each page.

**RETINA EXPRESS.** This monthly email blast for retina specialists and comprehensive ophthalmologists (9,500 circulation) contains links to retina-related content from around the Academy. With a 37% open rate and 7% clickthrough rate, you will effectively deliver content straight to your target audience.



eTOC



Retina Express

## MECHANICAL REQUIREMENTS

### Page Unit

Spread (two facing pages)
Full page
1/2 page (horizontal)
1/2 page (vertical)
2/3 page (vertical)
1/4 page

### Non-Bleed

15" x 10"
7" x 10"
7" x 4 3/4"
3 1/4" x 10"
4 1/2" x 10"
3 1/4" x 4 3/4"

### Bleed

16 1/2" x 11 1/8"
8 3/8" x 11 1/8"
8 3/8" x 5 1/2"
4 1/4" x 11 1/8"
5 3/8" x 11 1/8"
N/A

### Trim

EyeNet Trim Size (Page):	8 1/8" x 10 7/8"
EyeNet Trim Size (Spread):	16 1/4" x 10 7/8"
Live Matter:	Bleed sizes include 1/8" trim from outside, bottom, top, and gutter. Keep live matter 1/2" from trim size of page.

## Production Specifications

### EyeNet Magazine Trim Size

8.125" x 10.875"

### Paper Stock

Inside Pages:	50 lb. text
Cover:	70 lb. cover with varnish

### Binding

Perfect Bound

## Digital Ad Requirements

### High-resolution PDF is the preferred file format.

These flattened files (PDF/X-1a:2001) should be created using Adobe Acrobat Distiller 4.05 (or greater) or exported from Quark XPress or InDesign using the PDF/X-1a:2001 setting. All graphics and fonts must be embedded. Spot colors, RGB, and LAB colors should be converted to CMYK before creating the PDF. All trim and registration marks must appear outside the bleed area (1/8 inch from trim). Scanned images must be saved as high resolution (at least 266 dpi) in TIFF or EPS format. Maximum ink density should not exceed 300%.

TIFF and EPS files created with Illustrator or Photoshop are also acceptable. Supply both printer and screen fonts, including fonts embedded in art files. If submitting an InDesign document (CS4 or greater), you must supply all fonts and art files. Line art should be scanned at 600 dpi. Images (TIFF or EPS) should be at least 266 dpi and saved in CMYK mode.

Send the following:

- Ad file (high-resolution PDF or native files).
- Any supporting graphics that are incorporated in the ad (e.g., logo file, images).
- Screen and printer fonts. Fonts must still be included even if the ad is saved as an EPS file.

## FTP Instructions

Ads can also be submitted via FTP. Materials should be placed within a folder titled with the company name and issue date.

Email *EyeNet* at [kthomas@aao.org](mailto:kthomas@aao.org) when the ad is uploaded.

Server address: [ftp.aao.org](ftp:aao.org)

Username: enm

Password: provided by [kthomas@aao.org](mailto:kthomas@aao.org)

## Reproduction Requirements

In order to ensure reproduction accuracy, color ads must be accompanied by a proof prepared according to SWOP standards. If a SWOP-certified proof is not supplied, the publisher cannot assume responsibility for correct reproduction of color.

*The Academy is not responsible for and reserves the right to reject materials that do not comply with mechanical requirements.*

## Insert Requirements

Average run is 23, 500. Contact M.J. Mrvica Associates for further details.

## EyeNet Advertising Materials



**Black-and-White Rates**

Frequency	Full Page	2/3 Page	1/2 Page	1/4 Page
1x	\$3,384	\$2,808	\$2,199	\$1,354
3x	\$3,315	\$2,752	\$2,155	\$1,326
6x	\$3,215	\$2,668	\$2,089	\$1,286
12x	\$3,147	\$2,612	\$2,045	\$1,258
18x	\$3,045	\$2,527	\$1,980	\$1,218
24x	\$3,011	\$2,499	\$1,957	\$1,205
36x	\$2,944	\$2,443	\$1,913	\$1,178

**Color Rates**

Frequency	Full Page	2/3 Page	1/2 Page	1/4 Page
1x	\$5,919	\$5,327	\$4,735	\$3,847
3x	\$5,801	\$5,221	\$4,640	\$3,770
6x	\$5,623	\$5,060	\$4,498	\$3,655
12x	\$5,505	\$4,954	\$4,404	\$3,578
18x	\$5,327	\$4,794	\$4,262	\$3,463
24x	\$5,267	\$4,741	\$4,214	\$3,425
36x	\$5,150	\$4,634	\$4,119	\$3,347

**Premium Positions and Inserts****Cover and Other Special Rates**

**COVER 2:** 35% over earned black-and-white rate.

**COVER 3:** 20% over earned black-and-white rate.

**COVER 4:** 50% over earned black-and-white rate.

**TABLE OF CONTENTS:** 15% over earned black-and-white rate.

**OPPOSITE EDITORIAL BOARD:** 10% over earned black-and-white rate.

**Inserts**

**2-PAGE INSERT:** Two times earned black-and-white rate.

**4-PAGE INSERT:** Four times earned black-and-white rate.

**OTHER ITEMS:** Split runs available, but pricing will remain the same.

**Advertising Incentives**

**ADVERTISING CONTINUITY PROGRAM:** Advertise in three issues and earn a free ad of equal size in the third issue.

**CUSTOM ADVERTISING PACKAGE:**

Contact M.J. Mrvica Associates for details.

**Agency Information**

**AGENCY COMMISSION:** 15% allowed to agencies of record, with billing to the agency. In-house agencies are acceptable.

**AGENCY RESPONSIBILITY:** Payment for all advertising ordered and published.

**EARNED RATES:** Earned rates are based on the total number of insertions (full or fractional pages) placed within a 12-month period.

*Space purchased by a parent company and its subsidiaries is combined.*

**EyeNet's Advertising Sales Firm****M.J. Mrvica Associates, Inc.**

2 West Taunton Ave.

Berlin, NJ 08009

Tel. +1.856.768.9360

Fax +1.856.753.0064

**Mark Mrvica, Kelly Miller**

mjmrsvica@mrsvica.com



# CIRCULATION PROFILE

RETINA/VITREOUS  
CLINICAL UPDATE

**To Treat—or Not to Treat—Vitreous Floaters**

**P**robably virtually any ophthalmologist practices and you'll find patients who complain of vitreous floaters. When it comes to treatment, however, there's a wide range of opinion. Some ophthalmologists, such as those at the University of California, San Francisco, prefer observation in 90-95% of cases. "However, we can't think that privilege is clearly changing," a combination of new surgical care, patient selection and enhanced technology and techniques may be dismantling some concerns about the risks of surgery for vitreous floaters.

And although it seems mostly controlled by the World, some suggest that VFA is the most common cause of floaters. But some floaters, it also seems questionable about the efficacy and safety, as well as the accuracy for many costly procedures. These vitreous floaters offer their perspective on whether or how to treat vitreous floaters.

**Troublesome Vitreous Floaters**  
Vitreous floaters may occur following a natural tear, retinopathy or scleritis, or vitreous floaters, however, associated with a tear, said Gerson R. Shah, MD, with The Retina Institute in St. Louis, Mo. "Most of the time, patients who report vitreous floaters are not in danger of losing their vision," he said. "But patients with vitreous floaters may have more floaters than they can handle."

**Not every vitreous floater is a problem**  
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## EyeNet Circulation Profile\*

Active U.S. Academy Members .....	18,168
U.S. Academy Members in Training .....	2,483
U.S. AAOE Members (nonphysician) .....	2,897

## American Academy of Ophthalmology Members

Self-Reported Subspecialty Focus\*  
(primary and secondary)

Administration/Organization Leadership .....	114
Cataract .....	6,105
Comprehensive Ophthalmology .....	7,531
Cornea/External Disease .....	2,015
Glaucoma .....	2,197
International Ophthalmology .....	44
Low Vision Rehab .....	27
Medical Education .....	56
Neuro-Ophthalmology .....	428
Ocular Oncology .....	171
Ocular Plastics/Reconstructive .....	1,232
Ophthalmic Genetics .....	51
Ophthalmic Pathology .....	92
Other .....	308
Pediatric Ophthalmology and Strabismus .....	1,150
Refractive Surgery .....	2,046
Retina: Medical Only .....	675
Retina/Vitreous: Medical and Surgery .....	2,873
Uveitis/Immunology .....	390

\* **SOURCE:** American Academy of Ophthalmology Membership Data, September 2018.

## Destination AAO 2018

GET READY FOR CHICAGO • PART 2 OF 6

### BEAT THE CLOCK

#### This Month's Register and Search the Program

AAO 2018 will be held at McCormick Place in Chicago, Ill., 27-30 and you can find the program on the AAO website.

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## Journal Highlights

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### Ophthalmology

Retinopathy of Prematurity (ROP) and the Role of the Retinal Pigment Epithelium (RPE) in the Pathogenesis of ROP

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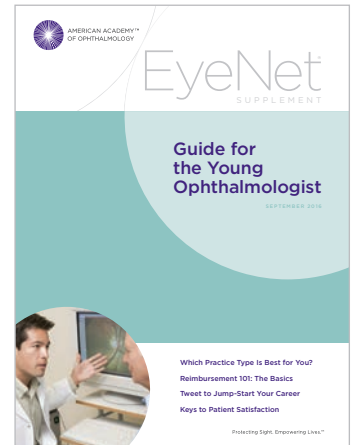
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