



AMERICAN ACADEMY™  
OF OPHTHALMOLOGY

# EyeNet®

MAGAZINE

## 2017 Media Kit



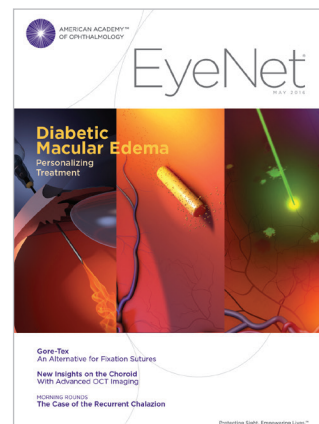
Protecting Sight. Empowering Lives.™

# 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.

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:** 22,000 (see page 10 for details)

## Advertising

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

**PLACEMENT POLICY:** Interspersed

**CATARACT**

**Kevin M. Miller, MD**  
Section Editor

William R. Barlow, MD  
Kenneth L. Cohen, MD  
Kendall E. Donaldson, MD  
Warren E. Hill, MD  
Jason J. Jones, MD  
Boris Malyugin, MD, PhD  
Cathleen M. McCabe, MD  
Randall J. Olson, MD  
Abhay R. Vasavada, MBBS

**COMPREHENSIVE OPHTHALMOLOGY**

**Preston H. Blomquist, MD**  
Section Editor

Sherleen Huang Chen, MD  
Robert B. Dinn, MD  
Susan M. MacDonald, MD  
Janet Y. Tsui, MD

**CORNEA AND EXTERNAL DISEASE**

**Christopher J. Rapuano, MD**  
Section Editor

Kathryn A. Colby, MD, PhD  
Helena Prior Filipe, MD  
Bennie H. Jeng, MD  
Mark J. Mannis, MD  
Stephen D. McLeod, MD  
Sonal S. Tuli, MD

**GLAUCOMA**

**Sanjay G. Asrani, MD**  
Section Editor

Iqbal K. Ahmed, MD  
Lama Al-Aswad, MD, MPH  
Ahmad A. Aref, MD  
Anne Louise Coleman, MD, PhD  
Steven J. Gedde, MD  
Catherine Green, MBChB  
Jeffrey M. Liebmann, MD  
Steven L. Mansberger, MD, MPH

Ronit Nesher, MD  
Richard K. Parrish II, MD  
Angelo P. Tanna, MD

**LOW VISION**

Mary Lou Jackson, MD  
Lylas G. Mogk, MD  
John D. Shepherd, MD

**NEURO-OPHTHALMOLOGY**

**Leah Levi, MD**  
Section Editor

Kimberly Cockerham, MD, FACS  
Helen V. Danesh-Meyer, MBChB, MD  
Eric Eggenberger, DO  
Prem S. Subramanian, MD, PhD

**OPHTHALMIC ONCOLOGY**

**Zélia M. Corrêa, MD, PhD**  
Section Editor

Dan S. Gombos, MD  
Tatyana Milman, MD

**OPHTHALMIC PATHOLOGY**

Deepak Paul Edward, MD  
David J. Wilson, MD

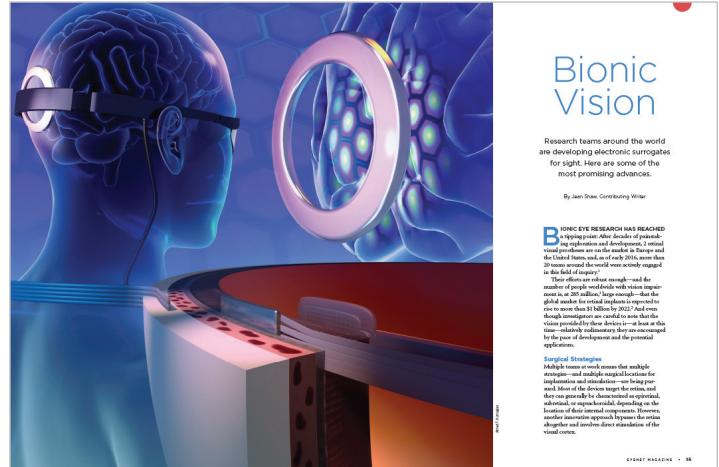
**OPHTHALMIC PHOTOGRAPHY**

Jason S. Calhoun  
Michael P. Kelly, FOPS

**PEDIATRIC OPHTHALMOLOGY**

**David A. Plager, MD**  
Section Editor

Michael F. Chiang, MD  
Jane C. Edmond, MD  
Frank Joseph Martin, MD  
Federico G. Velez, MD

**OCULOPLASTICS**

**Evan H. Black, MD**  
Section Editor

George B. Bartley, MD  
Elizabeth A. Bradley, MD  
Andrew R. Harrison, MD  
Don O. Kikkawa, MD  
Bobby S. Korn, MD, PhD

**REFRACTIVE SURGERY**

**George O. Waring IV, MD**  
Section Editor

Damien Gatinel, MD  
A. John Kanellopoulos, MD  
George D. Kymionis, MD, PhD  
J. Bradley Randleman, MD  
Karolinne M. Rocha, MD  
Marcony R. Santhiago, MD  
Roger Steinert, MD

**RETINA/VITREOUS**

**Julia A. Haller, MD**  
Section Editor

Neil M. Bressler, MD  
Kimberly A. Drenser, MD, PhD  
Sharon Fekrat, MD  
Mitchell Goff, MD  
Lawrence S. Halperin, MD  
Gregg T. Kokame, MD

Andreas K. Lauer, MD  
Jeffrey L. Marx, MD  
Prithvi Mruthyunjaya, MD  
Kyoko Ohno-Matsui, MD  
Ingrid U. Scott, MD, MPH  
Gaurav K. Shah, MD  
Richard F. Spaide, MD

**UVEITIS**

**Gary N. Holland, MD**  
Section Editor

H. Nida Sen, MD  
Steven Yeh, MD





# The Best in Clinical Insights, 12 Times a Year

## January

**Personalized Medicine.** Now that the genomics revolution is here, how is it playing out in eye care? *EyeNet* looks at several ophthalmic conditions ripe for precision diagnostics and therapeutics.

### Clinical Updates

Comprehensive • Refractive  
*Distributed at APAO and Cataract Surgery: Telling It Like It Is!*

## February

**Spotlight on Cataract.** Revisiting the excitement from the Spotlight on Cataract session during AAO 2016, *EyeNet* presents a variety of surgical cases, along with audience poll questions and answers, and fresh expert commentary.

### Clinical Updates

Cornea • Retina

## March

**Corneal Cross-Linking.** With its approval for use in the United States, corneal cross-linking is taking its place in clinical practice. A look at questions surrounding implementation, reimbursement, and malpractice. Plus, alternative techniques and devices that are up and coming.

### Clinical Updates

Glaucoma • Oncology

## April

**Office-Based Cataract Surgery.** There have been rumblings from Washington, D.C., that Medicare may consider allowing—or requiring—cataract surgery to be performed in an office setting. The pros and cons of such an arrangement.

### Clinical Updates

Cataract • Pediatrics  
*Distributed at ASCRS*

## May

**Tropical Diseases.** Between the high-profile spread of Zika and the presence of chikungunya and vectors for dengue in the United States, tropical diseases are moving into previously unaffected areas. What to watch for.

### Clinical Updates

Cornea • Neuro  
*Distributed at SOE*

## June

**New Reimbursement.** The Medicare Access and CHIP Reauthorization Act (MACRA) has ramifications both broad and deep. What you need to know to navigate these new reimbursement waters. And how the Academy IRIS Registry can help.

### Clinical Updates

Trauma • Uveitis

## July

**Expensive Drugs.** When some anti-VEGF drugs cost nearly \$2,000 per injection, practices must carefully manage costs. Experts discuss the practical and ethical issues of balancing financial concerns with optimal patient care.

### Clinical Updates

Glaucoma • Retina  
*Distributed at PAAO and ASRS*

## August

**Biologics in Ophthalmology.** Long a mainstay of therapy for systemic autoimmune conditions, biologic agents are finding new applications in diseases such as uveitis. A look at how they work, how to use them, and what to expect in terms of outcomes.

### Clinical Updates

Cataract • Refractive

## September

**Online Dispensaries.** Eyeglass vendors are going online, and refraction sites are popping up on the Web. Is this a disruptive innovation, or is it bad health care? What does this mean for your practice's optical shop? And for you and your patients?

### Clinical Updates

Comprehensive • Oculoplastic  
*Distributed at ESCRS*

## October

**Attention to Adherence.** Adherence to medication, especially glaucoma drops, has been an intransigent problem for many patients and their ophthalmologists. How emerging technologies, novel drug delivery systems—and even new bottle caps—are providing solutions.

### Clinical Updates

Cornea • Oncology

## November

**IOLs Around the World.** While the long-awaited Symphony lens received FDA approval last summer, other lenses that are being used abroad are still out of reach for U.S. ophthalmologists. Which of these will be game-changers?

### Clinical Updates

Glaucoma • Neuro • Retina  
*Distributed at AAO 2017*

## December

**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 talking to a pathologist.

### Clinical Updates

Comprehensive • International

## 2017 Ad and Materials Deadlines

### January

Ad close: December 5  
Materials close: December 9

### February

Ad close: January 4  
Materials close: January 6

### March

Ad close: January 30  
Materials close: February 3

### April

Ad close: March 6  
Materials close: March 10

### May

Ad close: April 3  
Materials close: April 7

### June

Ad close: May 1  
Materials close: May 5

### July

Ad close: May 29  
Materials close: June 2

### August

Ad close: July 3  
Materials close: July 7

### September

Ad close: August 1  
Materials close: August 4

### October

Ad close: September 4  
Materials close: September 8

### November

Ad close: October 2  
Materials close: October 6

### December

Ad close: November 1  
Materials close: November 3

# YOUR 2017 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. 2016's findings show the following rankings.

**#1 in High Readers.** *EyeNet* has the most dedicated readers for the 8th year in a row.

SOURCE: Kantar Media, 2016 Eyecare Readership Study, Table 801.

**#1 in Ad Page Exposures.** Your ad will be seen by more ophthalmologists in *EyeNet* than in any other ophthalmic publication for the 3rd year in a row.

SOURCE: Kantar Media, 2016 Eyecare Readership Study, Table 801.

**#1 in Average Page Exposures.** More ophthalmologists are likely to see a page in *EyeNet* than any other ophthalmic publication for the 5th year in a row.

SOURCE: Kantar Media, 2016 Eyecare Readership Study, Table 701.

### What Subspecialty Ophthalmologists Think About EyeNet

When Kantar surveyed subspecialists, it found that *EyeNet* is highly ranked in many categories.

#### Cataract

**#1 in high readers and ad page exposures**

**#2 in average page exposures**

SOURCE: Kantar Media, 2016 Eyecare Readership Study Ophthalmology Subspecialties, Tables 1701 and 1801.

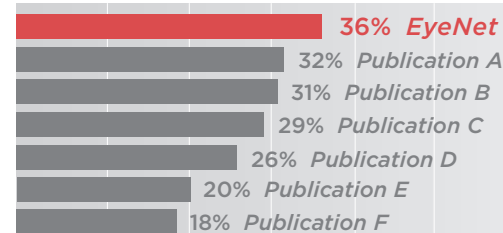
#### Retina

**#1 in ad page exposures**

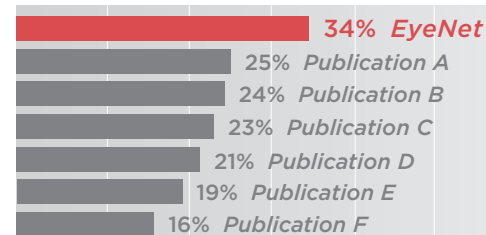
**#2 in most other categories (total readers, average issue readers, and average page exposures)**

SOURCE: Kantar Media, 2016 Eyecare Readership Study Ophthalmology Subspecialties, Tables 1702 and 1802.

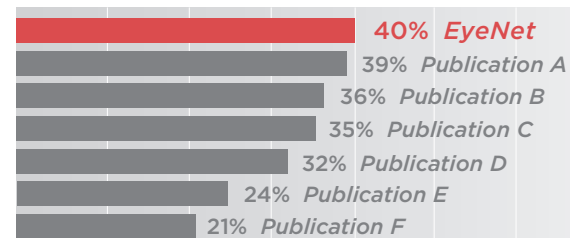
#### #1 in High Readers



#### #1 in Ad Page Exposures



#### #1 in Average Page Exposures



#### Refractive/Cornea

**#1 in ad page exposures**

**#2 in all other categories (total readers, average issue readers, high readers, and average page exposures)**

SOURCE: Kantar Media, 2016 Eyecare Readership Study Ophthalmology Subspecialties, Tables 1703 and 1803.

#### Glaucoma

**#1 in average page exposures and ad page exposures**

**#2 in all other categories (total readers, average issue readers, and high readers)**

SOURCE: Kantar Media, 2016 Eyecare Readership Study Ophthalmology Subspecialties, Tables 1704 and 1804.

#### DEFINITIONS OF TERMS

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

**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.

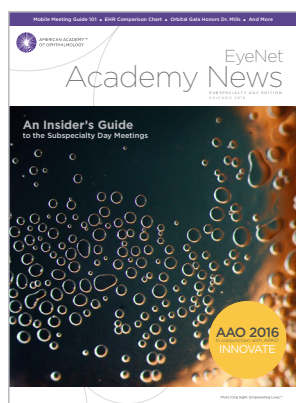
**Total readers:** Used to evaluate the reach of an audience, and includes anyone who reads at least 1 out of 4 issues.

**Average issue readers:** Takes into account how frequently an issue is read—the number of readers likely to see an average issue of a journal.

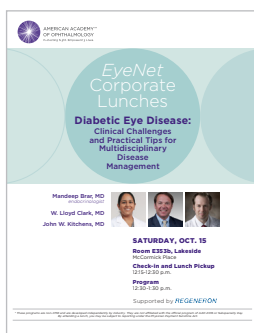
## YOUR 2017 MARKETING PLAN

# 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 2017 print and electronic publications, custom supplements offered throughout the year, and digital opportunities to engage your audience when and how they choose to read the magazine.



ACADEMY NEWS



LUNCH SYMPOSIUM



ACADEMY LIVE



GUIDE TO ACADEMY EXHIBITORS

## AAO 2017 Opportunities

**ACADEMY LIVE.** *EyeNet's* clinical e-newsletter is reported over 4 days in New Orleans to keep ophthalmologists on top of news from Subspecialty Day and AAO 2017. It is emailed nightly to more than 74,000 recipients and posted to [aao.org/eyenet](http://aao.org/eyenet) for double exposure.

**AAO 2017 NEWS formerly known as Academy 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.

**AAO 2017 NEWS DISTRIBUTION BINS.** Includes advertising on 2 publication bins on the top, side, and kick panels, located in high-profile locations in the convention center.

**"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 2017 attendees turn to this 6-part series in *EyeNet* for deadlines, event previews, interviews, sneak peeks, and more (June to November).

**EYENET CORPORATE LUNCHESES.** Attract the ophthalmologists you want to target by taking advantage of this highly coveted lunch time-slot and convenient location onsite at AAO 2017. You develop the program, *EyeNet* handles the marketing and logistics.

**GUIDE TO ACADEMY EXHIBITORS.** The ONLY printed exhibitor list for AAO 2017, 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 newly designed cover. Ship preprinted tips or send a high-resolution, press-ready PDF for *EyeNet* to print.

**EHR SUPPLEMENT.** This supplement is a collection of informative articles and resources to help you spend less time on data input and also do more with your data. It will also be available on the AAOE and *EyeNet* websites, and it mails with the November issue.

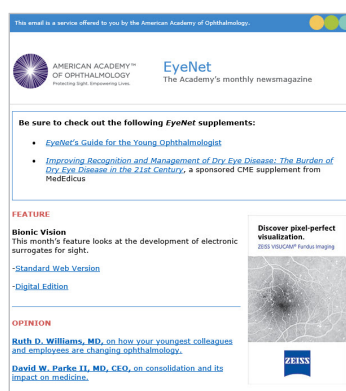
**INDUSTRY-SPONSORED SUPPLEMENTS.** Tell the full story of your products or services to ophthalmologists with a supplement polybagged with the monthly issue. Develop your own content, and design your own cover and layout—or use the modified *EyeNet* design template provided by the Academy.

**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.

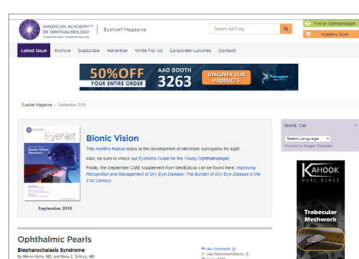
**OTHER SUPPLEMENTS.** Got a topic in mind? *EyeNet* can work with your team to develop supplements on a subject that works with your messaging.



EHR Supplement



e-TOC



aao.org/eyenet

## Spotlight on Digital

**DIGITAL EDITION.** This version of the magazine combines the content of the print publication with multimedia and other extras. Amplify your campaign with digitally enhanced advertising, ranging from toolbar branding and skyscrapers to premium-placement, digital stand-alone ads, video, and more.

**eTOC.** This monthly e-blast provides all Academy members with on-the-go highlights of *EyeNet* print content. With approximately 26,000 recipients, a 32% open rate, and 7% clickthrough rate, the blast features prominent ad positioning.

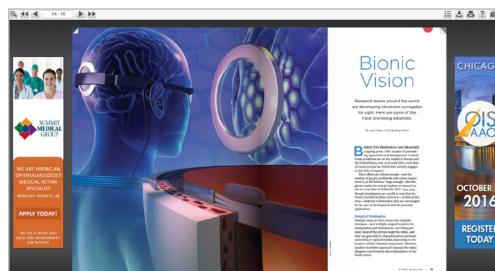
**SPONSORED IMAGE.** Your image and case description is rotated in every month onto a dedicated page on [aao.org/eyenet](http://aao.org/eyenet). Callouts and links provide extra exposure.

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

- **Leading into the multimedia extra.** 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. Averages 153,000 visitors, 178,000 visits, and 208,000 views monthly.

**EYENET RETINA.** This quarterly email blast for retina specialists and comprehensive ophthalmologists (13,000 circulation) contains a feature, journal highlights, and content from around the Academy. Please inquire about blasts for other subspecialties.



DIGITAL EDITION

## 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 [cmorris@aao.org](mailto:cmorris@aao.org) when the ad is uploaded.

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

Username: enm

Password: provided by [cmorris@aao.org](mailto:cmorris@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 22,000. Contact M.J. Mrvica Associates for further details.

## EyeNet Advertising Materials

Catherine Morris  
EyeNet Magazine  
655 Beach Street  
San Francisco, CA 94109  
Tel. 415.447.0325  
[cmorris@aao.org](mailto:cmorris@aao.org)



**Black-and-White Rates**

Frequency	Full Page	2/3 Page	1/2 Page	1/4 Page
1x	\$3,190	\$2,647	\$2,073	\$1,276
3x	\$3,125	\$2,594	\$2,031	\$1,250
6x	\$3,030	\$2,515	\$1,969	\$1,212
12x	\$2,966	\$2,462	\$1,928	\$1,186
18x	\$2,870	\$2,382	\$1,866	\$1,148
24x	\$2,838	\$2,356	\$1,845	\$1,136
36x	\$2,775	\$2,303	\$1,803	\$1,110

**Color Rates**

Frequency	Full Page	2/3 Page	1/2 Page	1/4 Page
1x	\$5,579	\$5,021	\$4,463	\$3,626
3x	\$5,468	\$4,921	\$4,374	\$3,554
6x	\$5,300	\$4,770	\$4,240	\$3,445
12x	\$5,189	\$4,670	\$4,151	\$3,373
18x	\$5,021	\$4,519	\$4,017	\$3,264
24x	\$4,965	\$4,469	\$3,972	\$3,228
36x	\$4,854	\$4,368	\$3,883	\$3,155

**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.

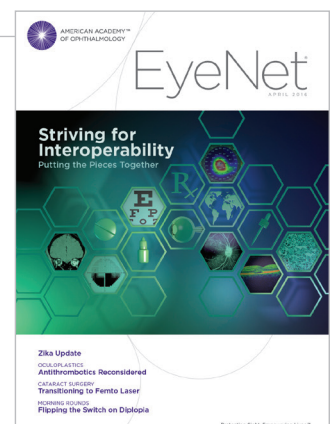
Berlin, NJ 08009

Tel. +1.856.768.9360

Fax +1.856.753.0064

**Mark Mrvica, Kelly Miller**

mjmrsvica@mrsvica.com



**CATARACT**  
**CLINICAL UPDATE**

**Gore-Tex:  
An Alternative for Fixation Sutures**

**F**ixation of posterior chamber intraocular lenses (IOLs) in eyes with inadequate capsular support remains a tricky problem in ophthalmology.

About 17 years ago, an Academy Ophthalmology Technology Assessment concluded that the available surgical approaches and IOL types for such eyes were superior to their visual and safety outcomes. A consensus that held up in 2000, when the report was last reviewed for currency.

But the field of IOL fixation has not stood still since then. According to experts in complicated cataract surgeries, there has been a steady evolution in the techniques, devices, and materials for stabilizing IOLs in eyes with insufficient capsular support. And the report is now an alternative for posterior chamber implantation in the capsular bag or ciliary sulcus.

**Surgical Fixation Materials**  
Arguably, one of the most intensively researched developments relates to the material used for the fixation sutures. Generalized fear for leakage of the IOL polypropylene sutures on which they had been relying, some surgeons began to use the eye as an alternative with higher tensile strength sutures made from copolymer polyethylene sutures (Gore-Tex) and Gore-Tex Copolymer (Gore-Tex) or Gore-Tex Copolymer (Gore-Tex) or Gore-Tex Copolymer (Gore-Tex).

It is a very resilient suture, which is used for cardiac procedures such as valve replacement, and it is also used for fixation sutures. The report is now an alternative for posterior chamber implantation in the capsular bag or ciliary sulcus.

**The Polypropylene Story**  
There have been reports for more than a decade that 100 polypropylene fixation sutures (PDS) were less durable in the eye than polypropylene sutures. The bottom line: "You should not use PDS fixation at all. You should, at best, use PDS fixation as you've got something that will be like Gore-Tex," said Jonathan B. Rosenblatt, MD, at Rush University Medical Center in Chicago.

**A surprising problem of broken sutures**  
Even if 10-15 sutures were used and kept, however, an eye would be used to hold an IOL in place, the report stated.

**A surprising problem of broken sutures**  
Even if 10-15 sutures were used and kept, however, an eye would be used to hold an IOL in place, the report stated.

BY JAMES HOGAN, CLINICAL PROFESSOR, UNIVERSITY OF MICHIGAN, ANN ARBOR, MI; JONATHAN B. ROSENBLATT, MD, RUSH UNIVERSITY MEDICAL CENTER, CHICAGO, ILL. (1) JONATHAN B. ROSENBLATT, MD, RUSH UNIVERSITY MEDICAL CENTER, CHICAGO, ILL.



## EyeNet Circulation Profile\*

Active U.S. Academy Members .....	17,611
U.S. Academy Members in Training .....	2,458
U.S. AAOE Members (nonphysician) .....	3,669

## American Academy of Ophthalmology Members

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

Administration/Organization Leadership .....	95
Cataract .....	6,018
Comprehensive Ophthalmology .....	7,422
Cornea/External Disease .....	1,876
Glaucoma .....	2,106
International Ophthalmology .....	36
Low Vision Rehab .....	29
Medical Education .....	31
Neuro-Ophthalmology .....	413
Ocular Oncology .....	155
Ocular Plastics/Reconstructive .....	1,171
Ophthalmic Genetics .....	46
Ophthalmic Pathology .....	92
Other .....	307
Pediatric Ophthalmology and Strabismus .....	1,121
Refractive Surgery .....	2,049
Retina: Medical Only .....	643
Retina/Vitreous: Medical and Surgery .....	2,746
Uveitis/Immunology .....	387

\* **SOURCE:** American Academy of Ophthalmology Membership Data, September 2016.

**Destination AAO 2016**  
GET READY FOR CHICAGO - PART 4 OF 6

**BEAT THE CLOCK**  
**AAO 2016: Only 2 Months Away**

In Chicago, engage with colleagues from around the world, learn new skills, and hear about the latest and most innovative research. AAO 2016, the Academy's annual meeting, will be held at McCormick Place Convention Center in Chicago.

**Register Now**  
The online registration system is now open and will remain open through the meeting. AAO 2016 registration is free for Academy and AAOE members. (Separate registration is required for Subspecialty Day and AAOE Late Day Coding Sessions. Not a member? Become one today at [www.aao.org](http://www.aao.org).)

**Reserve a Hotel Room**  
Reserve by Aug. 30 and save. Early bird rates are \$150 per night. The Academy Plus member rate, which includes the Academy Plus member pass, is \$100 per night. (Separate registration is required for Subspecialty Day and AAOE Late Day Coding Sessions. Not a member? Become one today at [.\)](http://www.aao.org</a>.)</p>
<p><b>Save the Dates: EyeNet Corporate Luncheon</b><br/>The EyeNet Corporate Luncheon will be held on Friday, Sept. 23, at 12:30 p.m. in the McCormick Place Convention Center. The luncheon will feature a keynote address by Dr. Jonathan B. Rosenblatt, MD, and a panel discussion on the future of ophthalmology. Tickets are $100 per person. (Separate registration is required for Subspecialty Day and AAOE Late Day Coding Sessions. Not a member? Become one today at <a href=)

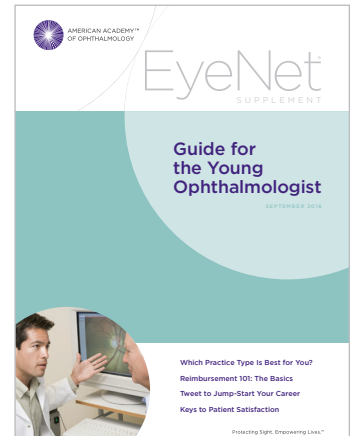
**Events**  
The Academy's annual meeting, AAO 2016, will be held at McCormick Place Convention Center in Chicago. The meeting will feature a variety of events, including plenary sessions, symposia, and workshops. For more information, visit [www.aao.org](http://www.aao.org).

**Journal Highlights**  
NEW PROVIDER FROM THE PEDIATRIC LITERATURE

**Ophthalmology**  
**Intelligence: Pediatric Ophthalmology: The Academy's Special Collection**  
The Academy's Special Collection of Pediatric Ophthalmology is now available. This collection includes a variety of articles, including reviews, case reports, and original research. For more information, visit [www.aao.org](http://www.aao.org).

**Journal Highlights**  
The Academy's Special Collection of Pediatric Ophthalmology is now available. This collection includes a variety of articles, including reviews, case reports, and original research. For more information, visit [www.aao.org](http://www.aao.org).

The following terms and conditions shall be incorporated by reference into all insertion orders submitted by Advertiser or its advertising agency (collectively, “Advertiser”) to the American Academy of Ophthalmology, *EyeNet*, and/or M.J. Mrvica Associates (collectively, “Publisher”) for all *EyeNet* publications, including but not limited to *EyeNet Magazine*, *EyeNet’s AAO 2017 News*, *EyeNet Best of*, *EyeNet’s Guide to Academy Exhibitors*, *EyeNet’s Academy Live*, *EyeNet’s Ophthalmic Photography Calendar*, *EyeNet’s Original Papers and Posters*, *EyeNet’s Destination AAO 2017*, *EyeNet’s Home Page*, *EyeNet’s Digital Edition*, *EyeNet Supplements*, *EyeNet Online Exclusives*, *EyeNet E-Newsletters*, and *EyeNet Reprints*:



1. Only Publisher may accept advertising.
2. Invoices are rendered on the publication date of each issue and are due and payable upon receipt of invoice.
3. Publisher shall have the right to hold advertiser and/or advertising agency jointly and severally liable for such monies as are due and payable to Publisher for published advertising ordered by advertiser or its agent.
4. Publisher reserves the right to reject or cancel any advertisement that, in Publisher's sole opinion, Publisher determines is not in keeping with the publication's standards or for any other reason, even if advertising has been published previously by Publisher.
5. Advertiser assumes all liability for all content (including text, illustrations, representations, copyright, etc.) for published advertisements and further indemnifies and holds harmless Publisher for any claims against Publisher arising from the advertisement.
6. Any attempt to simulate the publication's format or content is not permitted, and the Publisher reserves the right to place the word "advertisement" with any copy that, in the Publisher's sole opinion, resembles or simulates editorial content.
7. Terms and conditions are subject to change by Publisher without notice.
8. Positioning of advertisements is at the discretion of the Publisher except where specific positions are contracted for or agreed to, in writing, between Publisher and Advertiser.
9. Publisher shall not be liable for any costs or damages if for any reason it fails to publish an advertisement or if the advertisement is misplaced or mispositioned.
10. Publisher shall have no liability for error in the Advertiser Index.
11. Advertisements not received by the Publisher by ad close date will not be entitled to revisions or approval by Advertiser.
12. Advertiser may not make changes in orders after the ad close date.
13. Cancellations must be in writing and will not be accepted after the ad close date.
14. Advertiser will be charged for any artwork, separations, halftone, shipping, or typography provided by the Publisher.
15. Under no circumstances shall Publisher be liable to Advertiser for any indirect, special, or consequential damages (including, without limitation, loss of profit or impairment of goodwill). Under no circumstances shall the Publisher's total liability to any Advertiser exceed the invoiced cost of the advertisement.
16. Publisher will hold Advertiser's materials for a maximum of one year from last issue date. Advertiser must arrange for the disposition of artwork, proofs, or digital materials prior to that time; otherwise, materials will be destroyed. All requests regarding disposition of Advertiser's materials shall be in writing.
17. No conditions other than those set forth in this Media Kit shall be binding on the Publisher unless specifically agreed to, in writing, between Publisher and Advertiser. Publisher will not be bound by conditions printed or appearing on order blanks or copy instructions that conflict with provisions of this Media Kit.



## ***EyeNet Magazine***

655 Beach Street  
San Francisco, CA 94109  
Tel. +1.415.561.8500  
Fax +1.415.561.8575  
[eyenet@aao.org](mailto:eyenet@aao.org)

## **Advertising and Reprint Sales Firm**

M.J. Mrvica Associates, Inc.  
2 West Taunton Avenue  
Berlin, NJ 08009  
Tel. +1.856.768.9360  
Fax +1.856.753.0064  
[mjmrvica@mrvica.com](mailto:mjmrvica@mrvica.com)