Remarks by New OPS President, Earl A. Choromokos

The Fifth Annual Ophthalmic Photographers' Society meeting took place during the week of October 5, 1974 in Dallas, Texas. The week's activities included Business meetings, Scientific Programs, Instruction Courses and an Instrumentation Seminar. Also scattered throughout these meetings were two cocktail parties.

Being involved in the OPS from its inception, it is gratifying to me to see the impressive manner with which these activities were planned and carried out. Another impressive thing was the large attendance to these functions.

Due to the fact that our meetings are held only once a year, it is very important that our members try to attend. We are now able to furnish the membership a Technical Session, Instruction Courses and advance sessions in Instrumentation. It is, therefore, worthwhile for Department Heads to send our members to this meeting.

For those members who were not able to attend the Scientific Session, I will give a brief synopsis of the presentations.

The first speaker was Matthew D. Davis, M.D., University of Wisconsin, who gave an enlightening talk on Diabetic Retinopathy, its clinical appearance, histo-pathological characteristics and its natural course. I am sure this talk was very informative to the Ophthalmic Photographer for he sees so much of this disease.

The next paper was on Fluorescein Angiography by Jay L. Federman, M.D., of Wills Eye Hospital, Philadelphia. He described the appearance and interpretation of fluorescein in retinal and uveal circulation. Dr. Federman's excellent talk was presented in an easily understandable format with superior illustrations.

Barrett P. Walker, University of Pittsburgh Eye & Ear Hospital described an improved method for filing a cross index of photographs. If anyone is having problems with their filing system, get in touch with Barrett and I am sure he will give you the help you need.

Mr. Peter Breit from the Lankenau Hospital, Philadelphia gave an excellent presentation on Color Fluorescein Angiography and InfraRed Photography. This presentation was no doubt, of great help to the new photographer who is interested in using these techniques.

The last presentation before the coffee break was by Pierre Guibor, M.D., Manhattan Eye, Ear & Throat Hospital who demonstrated the techniques of Ophthalmic Thermography. Dr. Guibor provided us with a notable demonstration of how Thermography could differentiate normal from abnormal tissues.
F. C. Delori, Ph.D., of the Retina Foundation in Boston, presented interesting data on Optical Filters for Fluorescein Angiography. His discussion entailed peak transmission of filters and the type of filters needed for retinal and choroidal angiographies. The illustrations in this talk were exceptional.

Jim Ferguson, University of Nebraska Medical Center described a simplified method of mounting a fundus camera on a movable tripod thus making the camera portable and easily accessible to the bedside and the operating room.

Mort Goldberg, M.D., Illinois Eye & Ear Infirmary spoke on Sickle Cell Retinopathy. He discussed the types of Sickle Cell disease, the clinical picture, course of the disease and fluorescein angiography findings. The peripheral photographs for Dr. Goldberg’s talk were taken by the next speaker on the program, Mr. Bruce Busse, also of Illinois Eye & Ear Infirmary. Mr. Busse described his technique of photographing in the far periphery. His technique consists of patient cooperation and the use of the optical compensator on the top of the Zeiss Fundus Camera. He demonstrated with this technique that sharpness and clarity of the retinal vessels is not limited to the posterior pole.

The final speaker was Martin Scott from Eastman Kodak who attempted to explain the reasons why the new KM25 was not as suitable for fundus photography as the old Kodachrome II. He stated that by using a 10cc Cyan compensation filter, some of the red could be eliminated. And he promised that, hopefully, by the first of the year this situation could be corrected.

This concluded the program. And I must say this was one of the finest programs on Ophthalmic Photography I have ever attended. I would like to thank all the speakers and Yvonne Magli, Program Chairman for their excellent contributions. If any of the members desire further information on any of the above topics, feel free to contact the speakers for their assistance.

FIRST ANNUAL OPS INSTRUMENTATION SEMINAR, OCTOBER 9, 1974 by Tom Van Cader

The first OPS sponsored instrumentation seminar was billed as an informal gathering of interested members and guests for the purpose of discussing innovative design features or photographic techniques as applies to ophthalmic photography. It was indeed very gratifying that fifty individuals, both members and guests, turned out for this program. Even more enjoyable as the moderator of the seminar was the fact that nine speakers were scheduled and an additional five came forward to present extemporaneous material. Perhaps the most remarkable fact was that no two speakers discussed the same topic.

Overall, the presentations were very well done and the material presented was both informative and valuable to the group as professionals. Many of the presentations aroused the audience to enter the discussions and added further to the program. Since it would be impossible to publish in detail the content of each presentation, only the key features of each will be mentioned here. Should you require further details of the material, please contact the person who presented the material.

Carl Kittelson of Portland has come up with an ideal method of getting patients who are hard of hearing to follow his instructions, simply place a stethoscope into the patient’s ear and put the sounding part across the top of the camera near the eye piece and speak into it. Clever, Carl. Carl also uses a small lamp to assist the physician during a fluorescein, except he mounts his with velcro tape. I congratulate Carl for starting off the evening while the moderator was stuck in the restaurant due to hunger.

Ogden Frazier of Iowa City demonstrated the necessary bracket to shift the vertical axis of the old model Zeiss Fundus Camera to coincide with the optical axis of the eye. It seems to me that Ogden and Lee Allen published this material awhile back; however, I do not have a reprint of it in my files.

Tom Merrill from Mt. Sinai in New York showed how difficult the 100° Clinitex Fundus Camera is to use and demonstrated the degree of artifacts achievable with various media imperfections.
John Johnson has a new bracket for mounting an external camera on the side of the Fundus Camera which allows one to do iris angiograms. John's idea is an improvement over a similar bracket made by Bill Ludwick, I believe.

Bill Ludwick solves the problem of staying dark adapted while the physician performs the fluorescein injection by mounting a small high intensity lamp on top of the fundus camera, the lamp can be aimed at the arm on either side of the table. Bill also uses a Kodak film strip adaptor to project the negatives of fluorescein studies for those rush jobs that come up now and then. And finally, Bill showed us his external camera with an auto bellows and a bracket for mounting the flash at the lens barrel. This bracket allows the flash to be rotated about the axis of the lens to facilitate placing the reflex out of the area of pathology.

Richard Irwin from Gainesville had an extra Zeiss photo slit lamp objective lying around, the above the oculars type, after switching to the beam splitter stereo system, so he mounted the anterior segment flash in the rear of the extra unit and now has a system where he can do slit and transilluminated photos simultaneously. The value of each method is well appreciated and combined, yield the ultimate in information for slit lamp photography. Dick's modification and the excellence of his slides made the Zeiss representatives set up and take note.

Marshall Tyler, formerly of Yale, reported the presentation of his Stere Sequence Programer; a wizard at electronics, Marshall has used the Zeiss Allen Stereo Separator to take matched pairs of stereo frames always in the proper left-right sequence at regular intervals regardless of time delay between shots. This is valuable during fluorescein angiograms, to achieve rapid stereo shots in the proper left-right sequence avoids disturbing the roll of film to place the frames in proper order for viewing. This idea too, made the Zeiss people wonder why they hadn't thought of it first. Look for Zeiss to come out with a "Tyler Stereo Sequencer". Anyone interested in this can contact Marshall by writing to him at 432 North Harbor Street, Bradford, Conn. 06405.

Ken Julian of Indianapolis noticed some foreign particles in the bottom of a vial of fluorescein one day and wondered what they were and how they got there. Turns out, they were bits of paint and glass from the edge of the vial as it broke. Ken obviously wondered what injecting such material into a person could do and found out it can't do any good. How does he get the dye out of the vial, but not the glass and other junk? a filtering needle! Turns out that Sherwood Medical Industries of St. Louis, Mo. makes a cheap aspiration needle which will filter out objects 5 microns and larger in size. This needle is used to draw the fluorescein out of the vial, another needle is used to inject it into the patient.

Richard Sherman in Columbus, Ohio was asked to do some color fluoresceins and found that with High Speed Ektachrome pushed one stop in development and a W 47 filter in his Topcon Fundus Camera really excellent studies can be obtained. This is very encouraging to those who have a Topcon unit and have not bothered to install the proper filters for this purpose. This presentation brought up a long-standing question of how to compute the flash powers of the Topcon as compared to the Zeiss unit. Mr. Peter Horenz of Zeiss, New York, was on hand to explain how the Zeiss Watt Second exposure is derived and to confirm our findings that there is no conversion factor available to compare their measurements to other methods of flash intensity. Only a meter system at the film plane will suffice in this instance. I thank Mr. Horenz for his contribution to the program.

Patrick McGean in Salt Lake City, gave a well illustrated example of a device he discussed briefly a couple of years ago. His technique of installing a small piece of opaque film with a long narrow slit cut into it to the macular fixation rod of the Zeiss Fundus Camera is a novel, cheap way to produce a slit illumination of the fundus. Highlights can be appreciated with this method that can only be achieved with the use of a photo slit lamp. Unfortunately, the light path cannot be sent in at an angle to appreciate depth separation as with a photo slit lamp. It does produce informative pictures, however.

Chuck Foster, now at Memphis, handled the recent color shift in Kodachrome by switching to AGFA-64 film which is handled in this country by Honeywell and is very similar in red separation to the old Kodachrome. Chuck showed some excellent comparative photos of the
same eye on several patients. The difference was striking, and the AGFA film won out in every case.

Ivan Pieper at Madison, Wisc., shook up the Zeiss men with his utter remaking of the beam splitter mount inside the fundus camera to hold an excitation filter behind the viewing lamp light path. With his method the photographer views the patient with white light and only the flash comes through in blue. To achieve this, the large metal bracket that holds the plate glass to direct the viewing lamp has to be cut up by your local machine shop to accommodate the excitation filter. It's a neat idea Ivan, but I don't think that Zeiss will buy it from you.

Somewhere along the way, and from my scribbled notes, I can't tell where, Mr. George Zonduras of Spectronic Filter Co. gave a very good talk on the manufacture of narrow band interference filters and wide band filters. His discussion, as usual, was very good and I'm sure those who had never had any idea of how filters work got some valuable information from his talk. Aside from supplying us with an excellent filter, George is an outstanding person to know and a friend to ophthalmic photography around the world.

Bill Ludwick, same fellow, capped off the evening with several little ditties, only one of which I noted, a yellow filter installed in the observation lens cap in place of the green which Zeiss sends with their fundus camera. (I meant to ask Peter Horenz why they put a green filter in the cap to start with!) The yellow filter cuts out the blue background during a fluorescein and you get more separation just as the film does. Someone else said they use the yellow goggles as needed for laser coagulation.

As you can see, many people presented many topics, in addition, numerous asides were tossed into the discussions by those in the audience. It was very heartwarming to me to see this first attempt come off so well and that so many of our members and even two of our major instrument companies' representatives, showed the interest they did by attending and contributing. This seminar will definitely be scheduled for next year's program, probably on Sunday evening following the Technical Session. So, start working on those little ideas you've had in the back of your mind and let me know if you would like to present something next year.

And finally, my thanks to those who participated and attended this year.

MINUTES - OPS BUSINESS MEETING, OCTOBER 5, 1974 by Tom Van Cader

FIRST MEETING

1:06 P.M. - Meeting called to order by President Don Wong.

1st Order of Business:
Reading of minutes of previous meeting by Secretary, Thomas C. Van Cader.
Read and accepted.

2nd Order of Business:
Treasurer's Report read by William Ludwick
Report accepted.

3rd Order of Business:
Report of Constitution and By-Laws Committee by L. William Bell.
Mr. Bell presented a revised version of the Constitution and By-Laws for discussion and consideration. Since time did not permit a complete reading of the document and after lengthy discussion, the report was referred to committee for further discussion.

4th Order of Business:
Standards Committee report by Thomas C. Van Cader.
Compilation of statistics derived from OPS survey were presented and discussion related to purpose of survey ensued.

5th Order of Business:
Certification and Education Committee report by Don Wong. JCAHPO meeting in New Orleans and the OPS reception there was presented. Discussion of OPS compiling a job description to suit the commission's needs ensued. Purpose of Certification was explained for the benefit of new members.
6th Order of Business:
Awards Committee Report by Marshall Tyler.
Mr. Tyler reports that the AAOO will not sanction any other awards presentation during the AAOO.

7th Order of Business:
Editorial Committee.
No report given; chair has been transferred from Don Wong to Mr. John Johnson.

8th Order of Business:
Research and Development Committee.
Chairman L. William Bell presented purpose of new committee to publicize, through OPS correspondence, material fitting into this category as related to ophthalmic photography.

RECESS.

Recall to order by President Don Wong.

Election of Officers results:

President: Earl Choromokos
Vice-President: Terry George
Secretary: Thomas C. Van Cader
Treasurer: William Ludwick
Board of Directors: James Ferguson
Gerald Hoover
Thomas Merrill

New Business:
OPS chapter discussion led by Mr. Ron Kacizak. OPS policy regarding chapter organization was read, shortcomings noted and referred to committee for further work.

John Johnson recommended a certificate be presented to past officers of the OPS; moved and passed.

Johnny Justice, Jr. objected to travel funds allocated for OPS members, notably of the President being sponsored to present OPS Certification Report to JCAHPO. Ogden Frazier moved that BOD be responsible for this decision; L. William Bell amended motion to inform membership of each allocation and noted that present By-Laws cover the above motion.

Vice-President Yvonne Magli led a discussion that the OPS standardize the scheduling of its meetings for the benefit of the members.

Terry Tomer would like to see the proceedings of the Board of Directors meetings published.

Carl Kittelson questioned the number of members on the Editorial Board. President Wong replied editor can appoint his own members.

President Wong announced there would be an informal meeting of Certification and Education Committee later in the week.

Thom Wentlant moved that the meeting not be adjourned until all business is concluded; passed.

Ron Kacizak complained his paper was submitted to OPS and rejected; that the technical session of the OPS should be published; further that the OPS should have a journal of its own.
Editor John Johnson announced any paper submitted for publication must be typed and illustrated if need be.

L. William Bell announced that his report of the Constitution and By-Laws committed was not acted upon; motion to accept the report was voted down.

Richard Sherman suggested a full day of business and technical sessions with post meeting discussions scheduled.

Johnny Justice, Jr. moved to adjourn; passed.

SECOND MEETING

Call to order by Don Wong and Earl Choromokos.

President Elect Earl Choromokos announced the appointment of Johnny Justice, Jr. to chair the Nominating Committee.

John Johnson will look into production of certificates for past officers.

Bruce Busse will coordinate an OPS exhibit for next year.

Csaba Martoni will make posters for next year's meeting.

Four Board of Directors Meetings are planned for next year.

Awards Committee still cannot get approval of AAOO.

Regional Chapters discussion assigned to Constitution and By-Laws Committee.

Certification and Education Committee meeting scheduled for Wednesday at 1:00 P.M.

Technical Session material to be published in next Newsletter.

New directory and questionnaire to be sent out.

Positions available: University of Louisville, University of Kentucky, San Francisco, Detroit.

Sustaining Member committee to be chaired by presiding president formed.

William Ludwick suggested we heed the call for assistance by new members for meeting accommodations and information.

ADJOURNED.
TREASURER'S REPORT by Bill Ludwick

Beginning Balance $3972.77

Credits
1973 Registration $325.00
4 Sustaining Members 400.00
58 New Members 1450.00
124 Dues Renewed 1847.96
Total Income $4022.96

Debits
1973 Dallas Expense $679.75
Social Hour 247.37
Equipment Rental 201.88
Exhibit 230.50
Printing 805.65
Postage 146.20
Envelopes & Misc. 71.88
Adv. to Tom VanCader 200.00
Lens for Paris-Ogden Frazier 80.00
Shipping of Exhibit - J. Justice 290.65
New Orleans JCAHPO - D. Wong 280.92
Total Expenses $2555.05

Balance $5440.68

REPORT OF CONSTITUTION & BY-LAWS COMMITTEE by Lloyd William Bell, October, 1974

In the past year I have had the unique opportunity to serve in a dual capacity as chairman of the Constitution and Bylaws Committee and as Society parliamentarian. It has been quite a learning experience for me. I have to admit that before this experience I knew very little about the rules that governed the OPS in the past and present, and about parliamentary procedure in general. Now, as I stand before you, I can say that I have sighted the tip of the iceberg and I am here to report what I saw.

The other members of this committee are Yvonne Magli, Anna Wiley, Tom Van Cader, and Terry Tomer. Our responsibility, as I placed it before them, was to revise our present rules of order. In my letter of 8-16 to them I said, This seems to me to be a very radical thing to attempt for the Society regardless of its possible merits. However, for the following reasons I feel that this committee should attempt to up date these documents (C&B):

1. Our Society needs a bylaws that closely fits the unique character of our profession and the geographic dispersion of our membership.

2. We should have a document that is written (in) a lucid, but standard form that can both accomodate the changing views and ideas that will certainly come with changes in the Society's leadership, and also uphold the basic principles and ideals of those who conceived, organized, and founded the Society.

3. A bylaws should be simple for the membership to understand and use in order that the Society be aided in conducting its business and achieving its purposes.
This will not be a change for change sake or, as another one of our committee members put it, the change in general is not a change of content, purposes, or direction for the Society, but rather a renewal of these.

How might we revise the C&B? Well, the simple answer is, "by amendment." A normal and proper procedure would take these steps.

1. The Report of the proposed revision is submitted at the first session of the annual business meeting.
2. The proposed revision is on the agenda of new business at the second session.
3. The membership-at-large is given notice of the proposed revision. (This notice can come from the minutes of the first or second session, or both.)
4. The revision is presented to the membership at large on an official ballot.

The proposed revision presented to you reflects the consensus of this committee. However, I am obligated to report the following items which represent a difference of opinion of one committee member:

1. The category of Associate Members should be deleted. (Page 3, Subsection c.)
2. The category of Fellowship Members should be deleted. (Page 3, Subsection e.)
3. There should be a reinstatement clause. (Page 4, Section 2.)
4. Amendment should be by a two thirds vote. (Page 11.)

In conclusion, the C&B committee's report includes the proposed revision, a bylaws, of our C&B and has been submitted to our President and the members present at this meeting.

OPS STANDARDS COMMITTEE REPORT by Tom Van Cader

As a result of discussion held during the Board of Directors' meeting in Sarasota last May, the Standards Committee was assigned the task of gathering data on members of the society who are professional ophthalmic photographers in an effort to establish background material to be utilized in the formulation of training and evaluation programs. This committee composed a survey sheet which would render the information felt necessary to achieve this task. Although there are many facets to our profession, much can be learned from the nature of the data received. One-hundred-sixty survey sheets were sent out and sixty-seven returned.

The data submitted was examined from many directions to draw as much information as possible from the survey. One of the first areas considered was the level and type of education these members represented. A remarkably high level of education is given by the responding members. An average of 2.25 years of college, photographic or trade school was noted. Much of the pure photography instruction came from trade schools as relatively few colleges offer courses beyond basic or photo journalism.

Another area of investigation was the extent of services performed by these members; as this represents a fair representation of the members capabilities and provides insight into a member's overall interest and motivation. As one would expect those members employed by medical schools offer the widest range of services. Only one response did not perform at least retinal, external and slit lamp photography, the majority of which did these three at minimum. Many more performed additional work in the areas of motion pictures, video and audio and art work. Naturally those working in a private office would not be expected to have the need or facilities to perform such a wide range of professional tasks. This is also indicated by the fact that a larger percent of time is spent doing ophthalmic photography by medical school person, 86% as opposed to hospital based persons, 72% or private office ophthalmic photographers, 65%.

Since the ophthalmic photographer must possess both technical photographic experience and at least one aspect of medical competency, these two areas were closely examined. On the average, the survey respondents show the members to have a photographic background of 10.2 years and a medical oriented background of 6.8 years. Comparing these two figures
with the average experience as an Ophthalmic Photographer, 3.6 years, indicates that many of our members have been gainfully employed in other areas of photographic and medical endeavors; and additionally brings with him a good background in the many allied areas of medicine and photography.

It is further gratifying to note the number of professionally trained specialist (optometrist, opticians) doing ophthalmic photography. Although they perform only 20 to 25% of their work day in the ophthalmic photography field, they contribute valuable backgrounds to the profession. Since the value of an individual cannot be measured by his responsible profession alone, it was necessary to evaluate any related performances of the members. These duties fell into the categories of:

1. Administration
2. Patient Examination
3. Education
4. Public Relations
5. Research

Though not involving many of those surveyed, consultation, pathology, prosthetics, and surgical assistant appeared as collateral duties of those surveyed.

In summary, the "average" ophthalmic photographer has 10.2 years of photographic experience, been in medicine for 6.8 years, an ophthalmic photographer for 3.6 years, with 2.25 years of college credit, photographs 1,097.3 patients per year, performs numerous non-photographic tasks, and lastly earns $12,059.00 annually.

OPS BOARD OF DIRECTORS MEETING - October 9, 1974

In attendance:

Don Wong
Earl Choromokos
James Ferguson
William Ludwick
John Johnson
Thomas Merrill
Marshall Tyler
Thomas Van Cader
Gerald Hoover

Meeting was called to order by President Earl Choromokos at 3:00 p.m.

OPS Chapter Organization discussion:
Re-write policy to include explicit BOD controls; rebate of membership dues, chapter dues, membership responsibilities and chapter name.

Exhibit Award Committee; Marshall Tyler announced that the OPS exhibit award should go to the Retina Foundation Exhibit and the Board approved that the award be presented the following day.

To maintain OPS business status, a resident agent in the state of registration of chapter was needed; the Secretary, Thomas Van Cader being a resident of Florida, the state of OPS registration, was appointed resident agent of the OPS.

Standards Committee has concluded much of its work, but asked to be maintained for further purposes. The board approved that its chairman be a member of the Education and Certification Committee since much of the Standards Committee's work was toward the same end. It was approved that the Certification and Education Committee open another avenue of certification in the event nothing is derived from the JCAHPO program.

Meeting adjourned at 4:45 p.m.
FLUORESCENCE PHOTOGRAPHY OF THE IRVINE-GASS SYNDROM by Scott Wong

Cystoid macular edema secondary to cataract extraction, commonly known as the "Irvine-Gass Syndrome", is a retinal condition that is appearing with greater frequency in the patient population being referred for fluorescein angiographic evaluation. Although the incidence of "Irvine-Gass" among cataract extraction patients is relatively low (5% to 10%), ophthalmologists' growing awareness of the symptomatology in their patients has resulted in a proportionate increase in numbers of patients being sent to the florographic lab. Ideally, the ophthalmic photographer should be familiar with the dye flow patterns pathognomonic of "Irvine-Gass", so as to be better equipped to substantially demonstrate that cystoid macular edema does indeed exist in the subject eye.

Cystoid macular edema results from the perifoveal leakage of serum from a hyperpermeable retinal capillary bed. The lack of extracellular space in the internal retina does not allow seropermeation to occur; consequently, the serous exudate travels posteriorly to the plexiform layer of Henle's nerve fiber layer where it finally distributes itself in the cystoid spaces in between the long axons.

Although the accumulation of this fluid is funduscopically obscure (except for the diminished degree of foveal depression), its presence can be graphically and dramatically demonstrated with fluorescein staining. During the arterio-venous phase of dye transit, profuse circumfoveal extravasation of fluorescein from the retinal capillaries can be visualized.

But more primary for the confirmation of the clinical diagnosis is the subsequent (post-venous) appearance of an exquisite petaloid pattern of dye retention in Henle's nerve fiber layer. This fluorescent flower accumulates more dye for an hour or more. As the post-venous background fluorescence fades from the rest of the fundus outside of the macular zone, this perifoveal flower acquires an apparition-like appearance by contrast.

Since this petaloid fluorographic pattern is so definitive of cystoid macular edema, serial photography of the early phases of fluorescein dye transit becomes superfluous. In view of the clinical diagnosis, it would be quite appropriate to have the physician give the patient a slow injection of sodium fluorescein (after the control photograph is taken), then ask the patient to return to the camera at 30 to 60 minutes post-injection for one or two leisurely late photographs. There are many benefits to be reaped from such a plan of action; this type of procedure reduces the stress that the patient experiences (who is emotionally stressed enough after tolerating an anterior segment operation, only to have a secondary retinal problem wreak havoc on his functional vision!). Another advantage is that the ophthalmic photographer's work load is minimized in the darkroom --- from his single post-venous negative, he can produce an 8 x 10 inch high contrast enlargement that dramatically demonstrates the fluorographic manifestation of the cystoid macular edema.

The last but not least advantage of this manner of material presentation is that it shows that the ophthalmic photographer knows enough about the pathologic mechanics of the Irvine-Gass syndrome to photograph and present a fluorescein angiographic study in a befitting fashion.
OPS AWARDS RETINA FOUNDATION - by Marshall E. Tyler

The OPS Award for Photographic Excellence, 1974 AAOO exhibit, was presented to Francois Delori, Ph.D. and Oleg Pomerantzeff for their work displayed in the Retina Foundation exhibit, following the AAOO meeting in Dallas, Texas, October 1974.

Oleg Pomerantzeff's work demonstrated the utilization of a fiber optics illumination system and a contact lens optical system for photographing almost 150° of the human retina.

Francois Delori's work demonstrated the advantages of viewing and photographing the retina with narrow wave bands of illumination. This technique permits one to visually penetrate various features of the retina. Through selective filtering (Spectrotech interference filters) one receives data from only a small portion of the spectrum. By careful selection of these wave-bands of light one can draw anatomical correlation to what is being visualized.
EDITOR'S NOTE

Due to circumstances beyond my control, this issue is reaching you much later than what I had planned. Therefore, I am combining the November issue with the January issue of the OPS Newsletter. Please accept my apology for not having sent notification of this change.

OPHTHALMIC PHOTOGRAPHY WORKSHOP TO BE HELD IN APRIL

Mr. Ogden Frazier has informed me that he will be holding an OPHTHALMIC PHOTOGRAPHY WORKSHOP April 21-25 at Iowa City. Those interested in attending should contact either Lee Allen or Ogden Frazier by writing to the Department of Ophthalmology, University Hospitals, Iowa City, Iowa 52240.

CALL FOR PAPERS AND NEWS FOR THE OPS NEWSLETTER

Anyone wishing to submit papers on any aspect of Ophthalmic Photography or having news concerning what is happening in your area I would appreciate hearing from you so I may publish it in the next Newsletter. Send your information to me, John Johnson - Retina Service, 3601 West 13 Mile Road, Royal Oak, Michigan 48072. If you are submitting photographs, please send 5 x 7 size. Articles should be typed single spaced with 1-inch margins.