

HISTORY OF OPHTHALMOLOGY IN TENNESSEE AND THE TAO

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INTRODUCTION

In October of 1993 the Board of Directors of the Tennessee Academy of Ophthalmology (TAO) asked me to prepare a history of ophthalmology in Tennessee and the TAO while I still had tenure at the University of Tennessee. The principal source of information was the records of the TAO, which consisted of two parts: one, a ledger with handwritten notes dating back to the late 1940s, and two, typed minutes of meetings and records dating from the early 1970s until the present. In addition, we were able to find considerable material in the University of Tennessee Library and the Vanderbilt University Library, referring to available books and journals. We also contacted the National Library of Medicine, the American Academy of Ophthalmology's Historical Section, the American Medical Association, and the Tennessee Medical Association.

Additional information, particularly about the individual cities involved, was obtained from Drs. Lee Arnold, Dale Teague, John Montgomery, Jr., Steve Feman, Alan McCant, Arpenik Avakian, and William Murrah. We will first describe ophthalmology in Tennessee, then discuss the Tennessee Academy of Ophthalmology, and finally close with a summary and a look at the future.

I. OPHTHALMOLOGY IN TENNESSEE

INTRODUCTION

Ophthalmology in Tennessee is well over 100 years old. In fact, ophthalmology was first practiced in Tennessee, as it was nationally, as part of eye, ear, nose, and throat (EENT) primarily. Some physicians, however, called themselves oculists when they had multiple organ practices, and the others ophthalmologists. Records indicate

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that in the late 1870's ophthalmologists, that is, physicians specializing in the eye, began to identify themselves as such throughout Tennessee. Until the end of World War II, most of the ophthalmology in Tennessee was practiced in five cities, namely,

Chattanooga, Knoxville, Nashville, Johnson City, and Memphis. Therefore, we decided to review its practice in primarily these five cities, and then to allow the references about the Tennessee Academy of Ophthalmology's

activities to cover the last half century. Presently, close to 50 Tennessee cities and towns have ophthalmologists that will be discussed when we take a look at the future.

A. OPHTHALMOLOGY IN NASHVILLE AND MID-TENNESSEE

Simon Pollak, M.D., 1832-1913, a native of Prague, practiced for several years in Nashville, later settling in St. Louis, Missouri, where he continued to practice for .58 years. In 1852 he founded the St. Louis School for the Blind, and in 1860 the Eye Clinic. He died at the age of 81 .

Giles Christopher Savage, M.D., 1850-1933, having practiced in Jackson, Tennessee from 1878 to 1886, joined the faculty of Vanderbilt and the University of Nashville as the first professor of ophthalmology in 1886. In 1911 he retired from the academic faculty in order to pursue private practice, but continued to serve as Acting Chairman at Vanderbilt. All of the other chairmen who followed him at Vanderbilt were also clinical faculty, and no one held the full-time chair until James Elliott, M.D. became Chairman in 1966. Dr. Savage served as President of the Nashville Academy of Medicine, and as Vice-President of the American Medical Association, where for many years he was Chairman of the Section of Ophthalmology. He was also President of the Tennessee Medical Association, organizing the annual scientific meeting. He

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was one of the founders of the Southern Medical Association, and served as its first President; for several years he was editor of the Southern Medical Assn"iatinn .!2IImaI. Dr. Savage was the first ophthalmologist with privileges at Vanderbilt University Hospital, and was on the staff at Vanderbilt at the time the first American Board of Ophthalmology Examination was given. He was a consultant for Vanderbilt during the 1920's and 1930's. Before Dr. Savage, Dr. Eaves, a general surgeon, performed cataract surgery at the Vanderbilt Hospital.

Henry Carol Smith, M.D. who joined the Vanderbilt faculty as an assistant clinical professor of ophthalmology in 1933, and who was promoted to clinical professor in 1946, was instrumental in establishing a Division of Ophthalmology within the Depanment of Surgery in 1954.

Dr. Savage's daughter, Kate Savage Zerfoss, M.D. joined him in practice and she joined the faculty of ophthalmology at Vanderbilt in 1934 and was promoted to associate clinical professor in 1946. The student health clinic on the undergraduate campus is named for her husband, a pediatrician on the staff who was involved in Vanderbilt student activities. She had a son, also a pediatrician, who practiced in the Nashville community.

A resident program of ophthalmology was begun in 1957 and received provisional approval by the Council on Graduate Medical Education at that time. In 1959 the Division of Ophthalmology was reorganized under the

leadership of George W. Bounds, M.D. assisted by Allen Lawrence, M.D. acting chairman of the division for several years. Full approval of the resident training program was obtained in 1962.

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James H. Elliott, M.D. became the first full-time ophthalmologist at Vanderbilt and chief of the Division of Ophthalmology on July 1, 1966.

Ophthalmology at Vanderbilt achieved departmental status in July 1970. At that time the faculty consisted of James H. Elliott, M.D., Dan Jones, M.D., and J. Stevens Andrews, M.D. On July 1, 1992, Dennis O'Day M.D. became chairman of the Department of Ophthalmology at Vanderbilt University. Additional faculty members have been added to the Vanderbilt faculty since that time, with more planned in the upcoming months.

The Nashville Academy of Ophthalmology has been operational for many decades, claiming most ophthalmologists in mid. Tennessee as members. Recently meetings have been held at the University Club on the Vanderbilt campus.

B. OPHTHALMOLOGY IN CHATTANOOGA AND HAMILTON COUNTY Ophthalmology in

Chattanooga began as eye, ear, nose, and throat, as it did in

other parts of the state. The first physician to confine his practice to this area was Dr. R.M. Steele (who was the father of Dr. Willard Steele, Sr. and grandfather of Dr. Willard Steele, Jr.) who opened his office in 1886. The first ophthalmologist to confine himself to the eye was Dr. Alvin Bentz who moved to Chattanooga in 1935. Dr. Bentz practiced for about eight years and then relocated to Michigan and died soon after.

The EENT physicians who practiced in Chattanooga were Drs. R.M. Steele, Willard Steele, Sr., Stewart Lawwill, Sr., Sammy Long, Lester Russell Hackney, Nachesny Hogshead, Ellis Goodlow, D. Isbell, J.E. Johnson, Davis Harold Alper, and Clyde Kirk. The exact dates these men began practicing in Chattanooga is unknown,

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but Drs. Long and Hogshead attended the American Academy meeting held in Chattanooga in 1913.

Apparently some of the other physicians moved to Chattanooga in the early 1900's.

Until 1950.1952 most of the eye, ear, nose, and throat surgery was performed in physician offices or in small clinics. For example, Dr. Lawwill, Sr. had an office with beds in the Medical Arts Building and performed the first intraocular cataract extraction in 1942. Dr. Isbell had a similar office on McCallie Avenue, and Drs. Hogshead, Alper, and Hackney had similar facilities. Some of the others performed eye, ear, nose, and throat surgery at The Baroness Erlanger Hospital or The T.C. Thompson Children's Hospital. Willard Steele, Jr., M.D. moved to Chattanooga after completing his residency in Philadelphia in 1946. I. Lee Arnold, M.D. began practicing in Chattanooga after completing his residency in Memphis in 1949. They performed their surgery at Erlanger Hospital and Children's Hospital, utilizing the same operating rooms as those used for general surgery. Most of the surgery was done under local anesthesia except, of course, in children.

The early eye physicians who also practiced ear, nose, and throat were very active in the medical community.

The following were past presidents of the

Chattanooga and Hamilton County Medical Society:

Dr. Willard Steele, Sr.	1922
Dr. Sammy Long	1939
Dr. Stewart Lawwill, Sr.	1945
Dr. D. Isbell	1946
Dr. I. Lee Arnold	1974

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David Turner, M.D. was president of the Tennessee Medical Association in 1977 1978.

THE CHATTANOOGA OPHTHALMOLOGICAL FOUNDATION:

The idea of the Chattanooga Ophthalmological Foundation was proposed by I, Lee Arnold, M.D, The first planning and organizational meeting was held in 1967 with attorney John Stop he I and Stewart Lawwill,

Jr., M.D. attending.

On July 25, 1969, the Chattanooga Ophthalmological Foundation was chartered with the following directors: I. Lee Arnold, president; Ms. W.E. Brock, Jr., vicepresident; John C. Stophel, secretary; Stewart Lawwill, Jr., treasurer; W. Max Finley, director; Ira M. Long, director; Ralph Sutton, director; and David Turner, M.D. director. The purpose of the foundation was to raise funds for educational, scientific, and charitable purposes; to support the residency program, the hospital charity patients, and the eye clinic; and to build a facility strictly limited to eye care. The foundation grew over the years and on June 3, 1980, included a president, vice-president, secretary, treasurer, and eleven additional directors.

The most notable accomplishment of the foundation was the establishment of the Miller Eye Center. By 1975 various staff members working with local donors and foundations noticed a ground swell of approval and support for the local eye service, the quality of care, and a successful training program as well as the unusual cooperation among local eye staff. The idea of a freestanding independent eye center in Chattanooga was to become a reality. Dr. Lawrence Lassiter work successfully with donors. Dr. Lassiter and Dr. Stewart Lawwill worked closely with the architect in designing the Miller Eye Center. Dr. Lawwill and Dr. David Turner were efficient as

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treasurers of the Chattanooga Ophthalmological Foundation. All of the ophthalmologists donated effort and money and were extremely helpful in securing funds and in planning for the Miller Eye Center. The Willie D. Miller Eye Center, dedicated June 3, 1979, was opened and the first patients admitted for surgery on June 10, 1979. Attorneys John Stophel, Jim Hitchins, and Cranston Pierce perfected an excellent contract between Erlanger Medical Center and the Chattanooga Ophthalmological Foundation. The 30 bed, 5 million dollar facility provides an unprecedented level of eye care for area residents in Chattanooga and Hamilton County. It contains four operating rooms, patient admitting areas, patient floors, and teaching facilities. This center serves some three quarters of a million residents of Chattanooga and the surrounding 13 counties in Tennessee, Alabama, and Georgia. It also supports an

ophthalmology residency training program, which began in 1960. OPTHALMOLOGY TRAINING IN CHATTANOOGA

In the late 1950's several local ophthalmologists, including Drs. Lee Arnold, Stewan Lawwill, Jr., and Ira Long, became interested in staning a training program for ophthalmologists to utilize the huge volume of clinical material seen at Erlanger Hospital for teaching purposes. This would encourage all of the local ophthalmologists to panicipate and work together as a team to provide indigent care as well as to improve the quality of care in the community. Thus, in 1960 a two-man training program began with the approval of the R.R.C. and other authorities. The eye clinic was extremely busy and was staffed by local ophthalmologists and EENT specialists. All of the local ophthalmologists panicipated in the program, and, as a result, many competent ophthalmologists trained there have passed their boards and have served

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well their respective communities.

Ed Flowers, M.D., as an intern, was very interested in ophthalmology and was a motivating factor in starting the program and became its first resident. After the residency program began in t 960, Erlanger Medical Center rewarded the ophthalmologists with a floor on central seven and an eye operating room on the sixth floor west wing. Most of the eye surgery was performed at Erlanger. Later, as other hospitals were built, some eye surgery was performed at Memorial Hospital, Parkridge Medical Center, Humana East Ridge, and the Chattanooga Surgery Center. Over the years the program has trained a total of 54 residents who have either completed or are currently in training. Many of the graduating residents moved to the cities surrounding Chattanooga. At one time fifteen of them practiced in Chattanooga. Harry Lawrence, M.D. was the Educational Coordinator between t970 and t982. Robert W. Ridley, M.D. was the Program Director in 1980-1981. Deborah Sendele, M.D. was the Chairperson of the Department of Ophthalmology from 1982 to 1993, and Ed Feinberg, M.D. has been Chairperson of the Department since 1993.

Erlanger Hospital became affiliated with the University of Tennessee College of Medicine, and the Chattanooga program is called the Chattanooga Unit of the University of Tennessee College of Medicine. Key faculty members hold university appointments as part of their responsibilities at the Center. On June

14, 1982, Dr. Deborah Sendele became the first full-time chairperson of the ophthalmology training program of the University of Tennessee College of Medicine, Chattanooga. There are nine fellowship-trained ophthalmologists in Chattanooga at the present time.

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The Chattanooga Academy of Ophthalmology began in 1923 and continues today. It holds meetings in the Miller Eye Center and sponsors periodic educational courses. The American Academy of Ophthalmology and Otolaryngology meeting was held in Chattanooga in 1913.

C. OPHTHALMOLOGY IN EAST TENNESSEE AND KNOXVILLE

The earliest trained ophthalmologist in Knoxville was Swan Moses Burnene, M.D., born in 1847 in New Market, Tennessee. He graduated from the Bellevue Hospital Medical College in New York and practiced in Knoxville for five years. He left Knoxville and went to Washington, D.C., where he became a prominent specialist in ophthalmology and otolaryngology and Professor of Ophthalmology at the Georgetown University College of Medicine in 1889.

James M. Masters, M.D., born in 1852, graduated from medical school in Cincinnati, Ohio, and moved to Knoxville in 1882. He became the first Professor of Eye, Ear, Nose, and Throat at the Tennessee Medical College, established in Knoxville in 1889.

B.F. Young, M.D. succeeded Dr. Masters at the medical college, which later was affiliated with Lincoln Memorial University and which was ultimately designated as the medical school. Dr. Young was born in 1851 and did his post-graduate work at Bellevue and Manhanan Eye and Ear Hospital. He performed the first cataract operation in Knoxville in 1887 and continued to practice there until his death in 1933. He was very active in the community, and Young High School in South Knoxville was named in his honor.

The next professor of Ophthalmology at the Lincoln Memorial University Medical School was C.H. Davis, M.D., a Knoxvillean who graduated from medical school at

Tennessee Medical College. He did post graduate work at Chicago's Mt. Sinai Hospital and the New York Eye and Ear Hospital. Dr. Davis was prominent in the American Medical Association and chairman of the Eye, Ear, Nose, and Throat section in 1906 and 1907.

Another of the first modern eye, ear, nose, and throat specialists in the East Tennessee area was Henry Kincaid, M.D., born in 1869. He was a graduate of the University of Michigan Medical School and received specialty training at the University of Vienna in Austria, a prominent place for training in those days.

Frank Leroy Young, M.D., born in 1879 and the son of S.F. Young, M.D., graduated from Princeton University, trained at Bellevue Hospital Medical School, and interned at Johns Hopkins, specializing in eye, ear, nose, and throat. He returned to Knoxville as a professor at LMU Medical School and later practiced with his father for many years.

Forest S. Letellier, M.D. was born in 1893 and received training at New York Eye, Ear, Nose, and Throat Hospital. He and Edgar Ford, M.D. were also early area practitioners. Other prominent eye, ear, nose, and throat physicians were Edward Grubb, M.D., W.W. Potter, M.D. and J. Ralph Hamilton, M.D. the father of the prominent Memphis ophthalmologist, Ralph S. Hamilton, M.D.

There were several proprietary eye, ear, nose, and throat hospitals in Knoxville in the early 20th century. One of the first was opened by Henry Christenberry, M.D., who was born in 1884 and began practicing eye, ear, nose, and throat in Knoxville in 1915. In 1917 he opened his eye, ear, nose, and throat infirmary which he operated with his two sons, H.E. Christenberry, Jr., M.D. and Kenneth W. Christenberry, M.D. About the same time, in 1922, R.G. Reaves, M.D. who was born in Greene

County, Tennessee, in 1887 of an early pioneer family of East Tennessee, graduated from the University of Virginia Medical School and trained at Massachusetts Eye, Ear, Nose, and Throat Infirmary in Boston. He and his brother established the Reaves Infirmary. He was joined in 1926 by one of the first physicians in Knoxville to practice ophthalmology exclusively, Robert S. Leach, M.D. Dr. Leach graduated from Harvard

Medical School and trained at the Manhattan Eye, Ear, Nose, and Throat Hospital. His original office is now the Knoxville Academy of Medicine Building, a designated historical site. He later moved down Cumberland Avenue, and the Federal Social Security Building now occupies that spot. Dr. Leach died October 10, 1966.

The Knoxville General Hospital was established in 1902 and in later years offered training in eye, ear, nose, and throat. Ed Miller, M.D. prior to World War I, and Cecil Pitard, M.D., afterwards, were two of the graduates of this program.

E.E. Miller, M.D. and E. Ballou, M.D. both had eye, ear, nose, and throat practices. Gordon Ballou, M.D., the son of Dr. E. Ballou, was an ophthalmologist and also practiced in Knoxville.

Cecil Pitard, M.D. also practiced eye, ear, nose, and throat. At the local level he was very active in conservative politics, running for the U.S. Senate on two occasions.

Dr. Trotter had his practice in the Medical Arts Building.

The Trachoma Hospital, directed by Dr. J.E. Smith, was originally located in Upper East Tennessee in Tazewell, but the hospital was moved to Knoxville in 1924 and remained open until 1932.

J.I. Montgomery, M.D., born in 1907, trained at the New Orleans Eye, Ear, Nose, and Throat Hospital and was in 1938 the first physician in this area to become

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a diplomate of the American Board of Ophthalmology as well as a Fellow of the American College of Surgeons. He was followed by Bob Leach, M.D. in 1939.

John Montgomery, M.D. and Leon Hoskins, M.D. maintained a very busy practice on Hill Avenue and employed their own orthoptist as well as other assistants. Dr. Montgomery owned a farm close to Knoxville, but has since retired and moved to a large farm in Athens. Both of these ophthalmologists had sons, John Montgomery, Jr., M.D. and John Hoskins, M.D., who returned to Knoxville to practice

ophthalmology.

After World War II, several prominent, well-trained ophthalmologists moved to this area to practice, beginning in 1950 with Dr. Leon Hoskins who was trained at Columbia Presbyterian Hospital in New York. In 1952, Dr. Walter Benedict, son of Dr. William Benedict, the long-time executive secretary of the American Academy of Ophthalmology, began practicing with a Master's Degree in Ophthalmology from Mayo Clinic and additional training from Wilmer. He was a member of the American Ophthalmological Society. He practiced in the Blount Professional Building for a number of years. He served as the first chief of ophthalmology at the new University Hospital, succeeded by Dr. John I. Montgomery in 1975 and Dr. David Harris in 1994. In 1952 Dr. J. Edward Campbell, trained at the University of Chicago, entered practice and was soon joined by Dr. Reese Patterson. Drs. Ed Campbell and Reese Patterson had a very active practice in the Knoxville area. They built a new, up-to-date building on Main Street across from the Medical Arts Building. They later added Dr. Bill McCoy to the staff. Dr. Patterson became a senior amateur tennis champion

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after his retirement. Later on Dr. Phil Campbell joined their practice and as did Dr. Leslie Cunningham. During this period Dr. O.E. Ballou and Dr. Frank Gaylon from the University of Michigan opened their practices in eye, ear, nose, and throat.

Into the 1960's and 1970's ophthalmology exploded in numbers and in quality in this area. There are now over 40 active ophthalmologists with several subspecialists in such fields as retinovitreal surgery, pediatric ophthalmology, ophthalmic plastics, cornea, and glaucoma.

When Dr. Dale Teague began practicing ophthalmology in 1962, he was the first new ophthalmologist to come to the Knoxville area for ten years. In those days a complete eye examination cost \$15 and a cataract extraction \$250 with five days of hospital stay.

Other ophthalmologists have since joined the Knoxville group, including Drs. William Bailey, Ted Malone, Robert Hall, Jack Rule, Bill Sullivan, Mark Ivens, Jim Kimball, and others. Over the years ophthalmologists have shared call with each other even though they had independent offices. At one time there were 24

ophthalmologists on the roster sharing call.

The Baptist Eye Institute was established at Baptist Hospital with Drs. Bailey, Teague, Hall, Hoskins, Ivens, Kimball, and Sullivan occupying 30,000 square feet in 1984-1986.

The first radial keratotomy was performed in Knoxville by Dr. Dale Teague on January 17, 1981. Dr. John Hoskins was the first retinal subspecialist and Dr. William Sullivan the first corneal subspecialist to move to the Knoxville area.

During the past year a reformation occurred in the former Knoxville Academy of Ophthalmology which is now called the East Tennessee Ophthalmological Society.

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D. OPHTHALMOLOGY IN JOHNSON CITY AND UPPER TENNESSEE

The upper East Tennessee ophthalmic care was provided primarily by dual certified EENT-ophthalmology specialists until approximately 1945.

The history of ophthalmology in the uppermost corner of Tennessee begins in Johnson City with Dr. Thomas P. McKee, an ophthalmologist from Saltville, Virginia. Dr. McKee received his medical degree from the University of Virginia and was an intern and resident at Lennox Hill in the New York Post Graduate Hospital. Dr. McKee moved to Johnson City in 1936 and began seeing patients in the Hamilton Bank Building. In October 1945 he opened the McKee Eye Hospital in a house reconstructed as a hospital with six licensed beds. The McKee Eye Hospital was the only ophthalmology staff hospital between Knoxville and Roanoke, and many patients traveled long distances for examination and surgery. The first surgery performed in the hospital was an intracapsular cataract extraction with a complete iridectomy. The patient was Thad Hill who had sold to Dr. McKee the house which later became the hospital. The cataract surgery was performed without sutures, and the patient was kept immobilized with the use of sandbags until the incision had healed. Early intraocular surgery for cataract or retinal problems resulted in patients being hospitalized for fourteen days.

Dr. John Wilson joined Dr. McKee in 1946. Dr. Wilson came from Bethesda Naval Hospital after

completing his residency. In 1967 the hospital was called the McKee-Wilson Hospital.

Dr. E. Malcolm Campbell joined the staff in 1948 and Dr. Alfred N. Costner in 1954 who brought corneal transplantation expertise to the hospital from Duke

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University. A new hospital unit was built on the second level in 1954, and the doctors held equal shares in the hospital after the renovation with 41 licensed beds. Dr. McKee retired in 1975.

After six additions and numerous code changes, the large old house at 207 East Watauga Avenue was no longer suitable, and new construction ensued. On October 7, 1979, the new facility became operational, and service was expanded to include ENT surgery. The new hospital included three modern surgery suites, a recovery room, 39 beds, state-of-the-art equipment, and the required space, equipment, and personnel for additional services. The facility was renamed in 1982 as the Johnson City Eye and Ear Hospital and was sold to the Hospital Corporation of America. At one time this hospital had a staff of nine ophthalmologists, three otolaryngologists, and a consulting medical staff of 26. The support staff totaled 52 and represented administrative, nursing, dietary, central services, maintenance, and housekeeping services. Laser surgery was added in December 1973, and 24-hour emergency service for ENT continued to be made available. Other services, such as podiatry, endoscopy, and some general surgery, orthopedic, special plastic, and oral surgery were added as well. Retinal specialists and glaucoma specialists joined the staff. This hospital has continued to grow as a specialty hospital and is of significant value to the people of East Tennessee and the surrounding area.

Dr. Barbara Kimbrough moved to Johnson City and became associated with the Quillen College of Medicine in 1979. Two additional ophthalmologists have joined her, Dr. Janet Brown and Dr. Joudon Allison.

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Northeast Tennessee has attracted a significant number of ophthalmologists. In the 1970's Dr. Richard Baker and Dr. Azett J. Mosrie opened their practices in Kingsport, Tennessee. In the same time frame Dr. Sidney Wike and Dr. Fred Slaughter opened their office in Bristol, Tennessee.

For an area of approximately 50,000 people to have 12 practicing ophthalmologists is certainly unusual.

The entire community was saddened by the passing of some great men. Dr. Alfred Costner died in 1990, and ironically, Dr. Tom McKee and Dr. John Wilson, II

died on the same day in 1992.

E. OPHTHALMOLOGY IN MEMPHIS AND WEST TENNESSEE

Dr. Alfred Voorhies from Columbia, Tennessee, graduated from the University of Pennsylvania and arrived in Memphis in 1866. He was professor of ophthalmic surgery at the Memphis Medical College from 1866 to 1872 when it closed.

Dr. Bolin Pope graduated from the University of Bonn in 1859 and moved to Memphis in 1866 as well.

The first man to restrict his practice to eye, ear, nose, and throat was Dr. A.G. Sinclair (1842-1915) who was a charter member of the Memphis Hospital Medical College which opened in 1880 and lasted until it was taken over by the University of Tennessee in 1911. In 1884 he reported three cases performed under cocaine anesthesia, the first in Memphis. He was affiliated with St. Joseph Hospital.

In 1887 Dr. J.t. Minor, a native of Albemarle County, Virginia, opened his office in Memphis after practicing the specialty for several years in New York City. He had

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the distinction of being the first member of the American Ophthalmological Society to reside in this area. Shortly afterwards Dr. Arthur Porter, Sr. and Dr. J.L. Hill began practicing ophthalmology in Memphis. Until well into the early twentieth century it was customary for the specialties of ophthalmology and otolaryngology to be combined or practiced jointly. Even Dr. Edward Coleman Ellett, the most celebrated ophthalmologist, who became well-known nationally and internationally, practiced eye, ear, nose, and throat from 1893 until 1917. Following his return in 1919 from World War I, in which he served with great distinction, he confined his work to ophthalmology.

Dr. Ellett was Professor of Ophthalmology at the College of Physicians and Surgeons, founded in 1905 and later merged with the University of Tennessee College of Medicine in 1911. Dr. Ellett served as Professor of Ophthalmology until his resignation in 1922. Following this, a triumvirate of associate professors served the University, none being Professor or Chairman. They were Drs. Julian B. Blue, J.B. Stanford, and A.C. Lewis. This lasted for 11 years when Dr. A.C. Lewis was named Clinical Professor and held the chair until

his death in 1944.

His brother Dr. Philip Meriwether Lewis became Clinical Professor and Chairman of the Division in 1945 and served until July 1, 1969. Dr. Roger L. Hiatt, who joined in 1964 as the first full-time ophthalmologist with the University, became Professor and Chairman in 1969.

The Memphis Society of Ophthalmology and Otolaryngology was organized in 1913, meeting at first in various members' offices. After the Memphis Eye, Ear, Nose,

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and Throat Hospital opened in 1926, the meetings were held there monthly, excluding July and August. The only officer was the secretary-treasurer, and each member served as chairman for one meeting in alphabetical order. In 1955 the membership of about 52 members divided into two separate organizations with the Memphis Society of Ophthalmology holding meetings in the Eye Clinic at Methodist Hospital monthly, later changing to quarterly.

The two societies jointly sponsored a three-day meeting every March. This meeting was known as the Memphis Eye, Ear, Nose, and Throat Convention and attracted an attendance of about 150 from the surrounding territory over the years. lectures were given over a three-day period by guest speakers of national prominence. The annual meeting started in 1941 and continues today as the Memphis Eye Convention held after the Annual Residents Day meeting. The Mid-South Post Graduate Medical Assembly asked one speaker from Eye and one from ENT to remain past the Memphis Eye, Ear, Nose, and Throat Convention to speak at the Assembly. At the peak of this convention there were about 70 members who practiced either eye, ENT, or both. In 1971 the Memphis Eye Convention broke away into a separate meeting. The otolaryngologists organized their own meeting as well.

Dr. Louis Levy practiced eye, ear, nose, and throat in Memphis from 1912 until his death in 1952 and was instrumental in starting the Memphis Eye, Ear, Nose, and Throat Hospital located at 1060 Madison Avenue. Dr. Ellett served as Chief of Staff from its opening until his death in June 1947. The first residency in ophthalmology in Tennessee, in fact the only one between St. Louis and New Orleans,

began in this

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institution from its inception. The first residents were Virgil Payne of Pine Bluff, Arkansas, and T.L. Holland of Houston, Texas. It was an 18-month combined residency in both ophthalmology and otolaryngology. In 1952 the training was limited to ophthalmology and was lengthened to three years. In 1966 the Memphis Eye, Ear, Nose, and Throat Hospital closed, and the equipment, personnel, and training program were transferred to the Methodist Hospital, which had purchased the Memphis Eye, Ear, Nose, and Throat Hospital in 1942.

From its opening in 1926 until its close in 1966, almost all of the private eye surgery done in Memphis was performed at the Memphis Eye, Ear, Nose, and Throat Hospital. In addition to private patients, a free clinic was operated daily and attracted patients from a wide area.

The Mid-South Eye Bank for Sight Restoration was organized at the Memphis Eye, Ear, Nose, and Throat Hospital in 1940. It served as a repository for wills of people who wished to give their eyes at death and others seeking corneal transplants.

The Lions Mid-South Sight Service began in 1940.

In December 1933 a Memphis orthoptic clinic was established for ophthalmologists, the third such clinic in the United States. The others were in New York and Washington, D.C. The Memphis clinic was the first reading clinic established in the United States.

Another unique service available in Memphis was the Memphis Optical Dispensary. It provided orthoptic services, visual fields, and photography at no charge. It also purchased for the Memphis Eye, Ear, Nose, and Throat Hospital its first photocoagulator.

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The P.M. Lewis Eye Clinic at the University of Tennessee was dedicated on

March 11, 1967, in the Gailor Outpatient Clinic building.

An eye residency was started at John Gaston Hospital in 1945 and was merged with that of the Memphis Eye, Ear, Nose, and Throat Hospital in 1956. The first resident was Dr. Grady Wallace of Lubbock, Texas. Residents rotated every six months from one institution to the other for a three-year period. In 1967 a similar arrangement for an ophthalmology resident rotation was made with the Memphis Veterans Administration Hospital. In 1967 the resident training programs were combined, and departmental status was awarded to ophthalmology. Gradually the number of residents increased from six to nine and then to twelve.

The first examination for the American Board of Ophthalmology (AAO), the first of all specialty boards, was given in Lindsley Hall, in Memphis, December 13-14, 1916, following the AAO meeting. In addition to Dr. Ellett who was also a member of the Board of Directors, Drs. Hiram Woods of Baltimore, Wendell Reber of Philadelphia, and the noted Edward Jackson of Denver served on the Examining Committee.

At that time Drs. William Wilder of Chicago and Frank Todd of Minneapolis also were part of the Committee on Examinations and Credentials of the American Board of Ophthalmology. Dr. E.C. Ellett served as one of the examiners and sat on the board for many years. Ten candidates took the first examination, five of whom practiced in Memphis. They and two other Southerners passed, but the three Northerners failed. One of those passing was Dr. W. Likely Simpson who practiced ophthalmology in Memphis until he was 87 years of age, the oldest living board member in the world at that time. He lived for 98 years.

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Over the years many ophthalmologists in Memphis have served in state and national capacities. Dr. Ellett served as Chairman of the Section of Ophthalmology of the A.M.A., President of the Memphis and Shelby County Medical Society, the American Academy of Ophthalmology and Otolaryngology and the American Ophthalmological Society. He also served for five years as Chairman of the American Board of Ophthalmology. Ellett Hall on Rhodes College campus is named for Dr. Ellett.

Drs. Julian Blue and J.B. Stanford were both Presidents of the Memphis and Shelby County Medical Society. Dr. Stanford was President of the Tennessee State Medical Association.

Dr. Rychener served as President of the Memphis and Shelby County Medical Society and the State Medical Society. He was one of the founders of the National Foundation for Eye Care, a forerunner of the American Association of Ophthalmology, serving as its first President until his death in 1962.

J. Wesley McKinney, M.D. served as Secretary-Treasurer of the Pan-American Association of Ophthalmology for fourteen years. Dr. McKinney performed the first corneal transplant in Memphis.

Roland Myers, M.D. was President of the International Association of Secretaries of Ophthalmology and Otolaryngology Societies and a member of THEC at his death.

P.M. Lewis, M.D. was President of the Memphis and Shelby County Medical Society in 1955 and of the American Ophthalmological Society in 1966.⁶⁷

By 1969 there were thirty men and two women practicing ophthalmology exclusively in the city of Memphis.

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History would not be complete without emphasizing the activities of Dr. Ellen. From the transactions of the American Academy of Ophthalmology and Otolaryngology at the 31st Annual Meeting in 1926, the presidential address was given by Dr. Ellett, and a paragraph from his talk is worth quoting:

"We are awake, and through our examining boards, special societies and other agencies, we are striving to see, recognize, and correct our own shortcomings, as has always been the ideal of the medical profession. Our aim should be twofold, to remedy our own defects and to make the medical specialist in ophthalmology the best qualified in fact to render service and to give advice in matters of ocular health, disease, and defects, and also due to the public to know the facts, so that they may judge as to who is best fitted to be entrusted with the great responsibility of the people's eyesight."

Clinically speaking, Dr. Ellen advocated corneal-scleral sutures in cataract extraction, trephine for glaucoma, and intracapsular extraction.

Regarding my 30-year history, I would state first that Drs. Ellen, Lewis, and myself account for almost 75 years'

chairmanship of the some 100 year history of ophthalmology in Memphis.

The Annual Residents Day began 22 years ago, and UT -ARVO 7 years ago.

The faculty has doubled over these years to 8 full-time, 8 part-time and 31 volunteer faculty members. Four of the faculty are members of the American Ophthalmological Society. Papers, wrinen and oral, in any year total about 150. There were 12,000 surgical cases performed by the residents, part, full-time, and

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volunteer staff last year. Affiliations have grown to include Baptist Memorial Hospital, Methodist Hospital, Le Bonheur, Memphis Veterans Administration Hospital, The Med, and U.T. Bowld. The residents are the primary physician for about 9,000 patients during their three-year training program, and they have performed well on the OKAP Exams and the American Board of Ophthalmology.

The leadership of the Memphis Eye Society, the Tennessee Academy of Ophthalmology, and nUmerous national organizations has continued over the years. Memphis and its faculty have served as a referral site for the state and region, nationally and even internationally. There have been numerous ophthalmologists on the faculty who have contributed to ophthalmology around the world in various endeavors. These include Drs. J. Wesley McKinney, Alice Deutsch, Jerre M. Freeman, Ralph S. Hamilton, Tom Gettelfinger, Melvin Deweese, and others.

The department is well supported by technical, secretarial, and research personnel that assist the faculty and staff in its mission. The University's NeuroScience Department is active in vision research and supports the department, especially in UT -ARVO.

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II. THE TENNESSEE ACADEMY OF OPHTHALMOLOGY

INTRODUCTION

As stated previously, very little was available in the way of minutes and records about the Tennessee Academy of Ophthalmology prior to 1949, but a ledger detailing the minutes of the meetings and activities of the T.A.O. beginning in the late 1940's and continuing until 1971 was available as were typed minutes and records from 1971 to the present. The trial which involved four members of the Tennessee Academy of Ophthalmology, in fact four past presidents, will be discussed in a separate section. A. PRIOR Tn 1971

The Tennessee Academy of Ophthalmology and Otolaryngology rotated through the three sections of the state, with the president elected from the section in which they met; that is, East, Middle, or West Tennessee. The dues assessed, in essence, paid for the meeting and the party held the night before. The meeting was later changed to a 2-3 day event. Early in 1950 Dr. Roland Myers was secretary; William Murrah was secretary for a number of years.

The ledger provided a summary of the history of the Tennessee Academy of Ophthalmology and Otolaryngology beginning April 10, 1950. This book covered 21 years and was essentially handwritten with a few typed committee reports and programs. Typical of to day's problems was a report of a legislative committee in 1950 in which they "show concern for the laws regulating the practice of optometry and their possible effects upon the practice of ophthalmology in the state of Tennessee." Further, the report referred to concerns about: one, a prospective bill to

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govern the practice of opticians in the state of Tennessee; two, the attitude of the National Society for the Prevention of Blindness towards the use of optometrists in the care and treatment of eyes; and three, the use of optometry in certain schools such as Peabody College for Teachers in Nashville where reading clinics were operated. Present at this meeting were such common names as Dr. John Wilson of Johnson City; Dr. Lamar Knight of Knoxville; Dr. I. lee Arnold of Chattanooga; Drs. Morris Adair, Herbert Duncan, and Kate Zerfoss of Nashville; and Drs. Philip Lewis, Roland Myers, J. Wesley McKinney, W. likely Simpson, William Klotz, John Shea, Anthony, Richard Miller, J.B. Stanford, and James E. Wilson of Memphis.

On April 4, 1951, the group met in Nashville at the Hermitage Hotel. Nearly all of the papers presented were discussed by at least one or two other physicians. At this meeting Dr. Henry Carl Smith discussed a

paper on acute glaucoma. One paper was given by Dr. John Montgomery of Knoxville and discussed by Dr. Leon Hoskins of Knoxville. Dr. Lassiter of Chattanooga and Dr. Potter of Knoxville discussed the paper by Dr. Allen Blue on ocular changes in orbital cellulitis. At the business session members discussed a Tennessee state surgical plan, remarking that the fees were so low that it would be almost impossible to operate a medical office, prophetic of today's TennCare. Fifty-five members attended that meeting. That year's legislative committee, appointed by Dr. Hollabaugh, consisted of Drs. Lee Casey, Alan Lawrence, and Phillip Lyle, all of Nashville.

In 1951 Dr. R.H. Campmier, editor of the Tennessee State Medical Association Journal, suggested that the Tennessee Academy of Ophthalmology and

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Otolaryngology avoid meeting times that would conflict with the Tennessee State Medical Association's meetings. This was a recurrent theme over the years. The 1952 meeting was held in Knoxville at the Andrew Johnson Hotel. The 1953 meeting was held at The Peabody Hotel in the Louis XVI Room. At the business meeting in 1953 Dr. Lee Casey, legislative committee chairman, suggested that members must be willing to contact legislators and work for important bills. He suggested that the secretary and members should be kept informed of pending legislation. Dr. Lawwill of Chattanooga was present for the business meeting. It was reported that Drs. Marshall Teague of Knoxville, W.T. Daniel of Nashville, and John Shea of Memphis had died that year.

The 1954 meeting was held at the Maxwell House in Nashville with Dr. Clyde Kirk as president. Dr. Walter H. Bennett of Nashville presented a paper that year on the use of thyroid in the treatment of convergence excess strabismus. There were no visiting speakers, and all of the papers were given by Tennessee ophthalmologists. Dr. Philip Lewis was nominated to be president of the society that year, Dr. Wilson of Johnson City vice president, and Dr. Tom Bryant of Nashville. At the business meeting Dr. Berryhill stated that doctors must spend a little time in politics in order to get things moving.

The 1955 meeting was held in Chattanooga. In the business meeting that year Dr. Lawwill made a motion,

seconded by Dr. Rychener, that members reimburse the state society \$ 50 for part of the expenses incurred during the recent legislative action

in Nashville. Dr. George Bound of Nashville presented a paper on the post operative

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treatment of strabismus. It was discussed by Dr. Fowler Hollabaugh from Nashville. Dr. Harold Mciver of Jackson presented a paper on the care and treatment of posttonsillar abscess which was discussed by Drs. Charles Long, C.W. Blasengame, and W.W. Potter.

In 1956 the Academy met in Memphis, Tennessee, at The Peabody Hotel. At this meeting Dr. Ira Long of Chattanooga presented a case report on central macular hemorrhage treated successfully with para enzyme. Dr. Margaret Horsley gave a case report on toxoplasmosis in a newborn. It was discussed by Dr. Alice Deutsch, an ophthalmologist from Memphis. Dr. Eugene Vaccaro presented a paper on right superior oblique palsy. At the business meeting \$500 was appropriated for the legislative committee's activities. There was a lengthy discussion on the invasion by optometrists in the examination of school children.

The 1957 meeting was held in a hotel in Nashville. At the business meeting Dr. Ralph Rychener gave a report on the establishment of the National Medical Foundation for Eye Care, which he served as the first president.

The 1958 meeting was held in Gatlinburg, Tennessee. An obscure case of glaucoma was presented by Dr. W. W. Wilder of Memphis. Dr. Rychener informed the group that there were A.M.A. pamphlets available to educate the public and the medical profession about ophthalmologists. A motion was made that a committee be formed to work with the Lions Clubs in the sight conservation program. Dr. Rychener stated that all ophthalmologists can be members of the National Medical Foundation for Eye Care with a \$5 membership. That year Dr. J. Wesley McKinney of Memphis was elected president; Dr. W.G. Kennen, vice-president; and Dr. Tom Bryant, secretary.

The 1959 meeting was held at The Peabody Hotel in Memphis with Dr. J. Wesley McKinney as president. Drs. Phillip Lewis and Claude Oglesby of Memphis discussed alpha chymotrypsin in cataract surgery.

The 1960 meeting was held at Nashville, and Academy dues were raised from \$5 to \$10 per year. The second paper of that meeting was presented by Dr. William Murrah of Memphis on contact lenses, and Dr. Ralph S. Hamilton reported on A & V Syndromes associated with esotropia and exotropia.

The 1961 meeting was held in Chattanooga at the Read House with Dr. D. Isabel as president. Dr. Melvin Dewese of Memphis presented a survey of surgical treatments for congenital cataract. Dr. Joseph Scott of Memphis presented a paper on the use of urea in ophthalmology. Other presenters included Drs. Ed Campbell, 'Jr.

and Reece Patterson of Knoxville; Dr. C.L. Lassiter of Chattanooga; Dr. William Kennen of Nashville; and Drs. Alice Deutsch, Melvin Dewese, Ralph Hamilton, and J. Wesley McKinney of Memphis.

The 1962 meeting was held in Memphis, Tennessee. It was reported that there were 103 paid members of the Academy. It was also noted at that meeting that two beloved members of the society had passed away, Dr. Ralph Rychener and Dr. Charles Bassingame. By this time Dr. William Murrah had become secretary of the society.

The 1963 meeting was held at the Holiday Inn in downtown Knoxville. Dr. Fred Rowe was re-elected as councilman for the Academy's National Medical Foundation for Eye Care. The use of primarin was given by Dr. Phillip Deer of Memphis and discussed by Drs. Philip Lewis, Benedict, and Ed Campbell.

The 1965 meeting of the Tennessee Academy was held in Chattanooga with Dr. William Murrah as president. Dr. Roger Hiatt presented a clinical evaluation of

congenital myopia and ocular findings in cerebral palsy. Total expenditures of the Tennessee Academy of Ophthalmology were \$505.

In 1966 the Tennessee Academy met in Gatlinburg with Dr. Ira Lee Arnold as

president.

The 1967 meeting was held at the Sheraton Peabody Hotel in Memphis. Meetings were changed from Monday and Tuesday to Thursday and Friday this particular year.

The 1968 meeting was held in Chattanooga. It was discussed at the business meeting that a carve-out of 20% of the Medicare fee was the suggested amount for a refraction.

The 1969 meeting was held in Gatlinburg. Dr. Ralph Hamilton was nominated as president, Dr. Rowe Driver as vice-president, and Dr. David H. Turner as secretary-treasurer.

The 1970 meeting was held in Memphis. Dr. Lee Arnold gave the Sight Conservation Committee report and Dr. Gunner the legislative council report. It was noted that 115 persons had paid their 1970 dues from a total of 193 members in the state, ophthalmologists and otolaryngologists combined. Dr. Roger Hiatt gave a lengthy, interesting, and informative report on the current status of optometric activity after reviewing the history and evolution of the continuing and growing encroachment of optometry on the practice of medicine. It was reported that topical medications were being used by some optometrists in the state.

The 1971 meeting was held in Chattanooga. The ophthalmology education fund was discussed at length by Drs. Lee Arnold and Philip M. Lewis. Dr. Rowe Driver

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was elected president of the Academy, Dr. David Turner president-elect, and Dr. John Cunningham secretary-treasurer.

B. 1971 TO PRESENT

According to the minutes of August 9, 1975, the Board of Directors of the Tennessee Academy attempted to reorganize and succeeded. On Saturday, August 16, 1975, the Tennessee Academy of Ophthalmology was reorganized and incorporated at a meeting in Nashville, Tennessee. President of the T.A.O. was Dr. Tom Currey, and Robert C. Taylor was attorney for the Academy.

At the December 4, 1975, meeting of the Academy at the T.M.A. office in Nashville, there was discussion

centered around the state health regulatory boards. Also, Ed Sear of the Hogan, Rose & Co., described the progress in the public awareness program. The major item at that meeting was the Physician Assistant Certification Act which was under consideration in the Tennessee legislature.

The *Insights* became the periodic publication of the Academy in 1976 and continues to this day.

One hundred fifty ophthalmologists in Memphis attended the second biannual Aphakia Seminar, June 17 and 18, 1978.

Mr. John Lylle became the legislative counselor for the T.A.O. in March 1979. He served until 1994 as counsel and legislative consultant. It was also announced that the Chattanooga Miller Eye Center would open that year.

The minutes of the society were contained in folders, beginning with 1981. The practice continued through the years to have quarterly directors' meetings somewhere in the state, typically Nashville, and then usually to have a business meeting as part of the annual meeting.

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In early 1981 the Academy continued to employ J.B. Hogan and Company for public relations. At a meeting December 5, 1981, Dr. Sam Wallace, Department of Sociology at the University of Tennessee, Knoxville, was asked to prepare the Wallace Report.

At the June 19, 1982, meeting in Nashville, the Board of Directors founded the Tennessee Ophthalmic Personnel Society, now known as TOPS. It was upon the recommendation of Dr. Tom Gettelfinger of Memphis that this group was established.

A Tennessee-Kentucky joint meeting was approved for the spring of 1983. At the March 14, 1983, meeting the Board of Directors decided to revamp the Tennessee Academy's bylaws.

Dues for 1984 were \$600 per member. The Academy continued to meet with the T.M.A. through the years, whether in Gatlinburg, Knoxville, Chattanooga, Nashville, or Memphis. In the 1980's special speakers were invited to be part of the annual meeting, a visiting speaker being invited from outside the state. During the

early 1980's a part-time secretary in the T.M.A. office functioned as the executive secretary for the Academy. Legislation and communication continued to be issues in the late 1980's, and a representative to the American Academy of Ophthalmology Board of Counselors was approved by the Academy. Conference calls with the Board of Directors on a state-wide telephone hookup were common during the 1980's and early 1990's. In the 1980's the Tennessee Academy organized a political action committee (PAC) which continues at the present time.

The American Academy of Ophthalmology sent a state representative to some of these meetings. On one occasion Dr. Ben Sanderson, one of the counselors of the

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American Academy, attended a meeting. Mr. Richard Paul, Office of State and Subspecialty Relations, American Academy of Ophthalmology, attended on the April 13, 1989, meeting.

The 1987 issue of the *Insights* contained an interview with Dr. James H. Elliott, retiring from Vanderbilt University after having served as the first full-time professor and chairman of the Department of Ophthalmology. It was customary in the 1980's to interview and highlight one member of the state society in the *Insights*. Other regular articles included legislative reports, the president's message, and clinical pearls.

On Friday, Saturday, and Sunday, August 24, 25, and 26, 1990, a momentous meeting was held at Crossville, Tennessee, to restructure the Tennessee Academy of Ophthalmology.

At the evening meeting on Friday, Dr. Paul Wittke, president of the Tennessee Academy introduced Rich Paul from the American Academy of Ophthalmology state affairs committee who discussed current activities in the 50 states. Dr. William Offitt, the A.A.O. state affairs representative for Tennessee, talked about current affairs and the board of counselors from the states. Dr. Roger L. Hiatt gave an overview of the retreat and discussed reasons to belong to a state society and the future of ophthalmology in the state.

The next morning six discussion groups met for three hours and then gave a 10-minute report on

their sessions, followed by a 15-minute discussion by the group. The afternoon was free, and that evening Dr. Paul Wittke discussed PRO,

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ophthalmology nationally, and the role of the TAO. The next morning the overview was again presented by Dr. Hiatt, and reports from Dr. Paul Wittke, Rich Paul, and Dr. Bill Offitt followed. For the next three hours the written reports of the discussion groups were discussed at length, and action items were identified and voted upon. The meeting concluded at noon. The following topics were discussed at length:

1. The structure of the Academy itself;
2. The board, membership, and dues, and how to increase membership, and new residents and people moving into the state;
3. Legislative action, both positive and reactive;
4. Government relations in ophthalmology, including regulatory;
5. Annual meeting and program in detail;
6. Continued education of members, including *Insights* and other tools;
7. The P.P .0. and managed care system for the state;
8. Public service and unmet eye care needs in Tennessee;
9. Public education and communication, such as a speaker's bureau;
10. Ophthalmology's association with the rest of medicine;
11. Survey of services the Academy can provide;
12. Office manager's help in training staff and training residents in hospitals.

Numerous handouts were provided the participants, including material from the Tennessee Academy, the American Academy of Ophthalmology, such as the strategic plan summary of September 1989, and numerous other documents and materials supplied by the state affairs committee of the American Academy. Dr. Dave Park,

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chairman of the state affairs committee, was also present and offered his wisdom, thoughts, and experience throughout

the meeting. Elements of a state society and what comprises a model state organization were also discussed in some detail.

Following this meeting, the participants left feeling that they had covered all of the issues and that they had charted a course that would take the organization into the next decade and into the year 2000 with some strength, vigor, and promise.

Dr. Hiatt, the planner for the retreat, said "This was the single most enjoyable professional activity in which I have been engaged in my 30 years of association with ophthalmology in Tennessee."

The November 18, 1990, meeting of the Board of Directors following the retreat at Crossville, Tennessee, resulted in the Distinguished Service Award and Best Paper Award being instituted as annual events. Also, the residents beginning practice would be given OPHSTART in addition to the course they had attended that particular weekend.

The newsletter was started as was publication of "a case of the month" in the T.M.A. Journal. The new officer structure was established, and a part-time executive director's position was approved. *Insights* was to be published regularly and membership expanded. A speaker's bureau was organized. A Public Information Committee was established, and the Legislative Committee was re-emphasized. Ophthalmologists were encouraged to be a part of the PPO board and to continue participating in the different committees of the organization.

The 1990 *Insights* reported plans to sponsor a program for residents throughout the state annually.

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The 1991 *Insights* recorded that the board voted to restructure the Academy by amending the constitutional bylaws to hire a part-time executive director, among other actions.

Recent committees have considered things like RBRVS changes, managed care, Tennessee Eye Injury Registry, the national eye care project, Diabetes 2000, and Expect Med Eye Care. Also, the counselor to the American Academy of

Ophthalmology gave a report at each of the directors' meetings. The Third Party Committee has been very active also, and in 1993 the Tennessee Academy of Ophthalmology was awarded the Model State Society Award by the American Academy of Ophthalmology. Efforts to strengthen the scientific program has also been one of the main thrusts in the recent months and during the last year.

Sue Chasteen was hired as the first Executive Director of the Academy in 1991 and continues today, managing the

office of the Academy in Franklin, Tennessee.

The following three major legislative actions by optometrists were opposed by ophthalmology: first, the so-called "Diagnostic Bill" in 1975; second, the "Therapeutic Bill" which ran from 1984 to 1987; and three, the revision of the "Therapeutic Bill" in the spring of 1993. These drained a great deal of time, energy, and money from leaders of the Academy and had a tremendous effect on the organization.

The following people served as president of the TAO:

1949 Sam Sanders	1964 William Murrah	1979 Roger Hiatt
1950 William Garrett	1965 I. Lee Arnold	1980 Harry Lawrence
1951 C. Fowler Hollabaugh	1966 Fred Rowe	1981 John Montgomery
1952 Roland Myers	1967 Charles King	1982 Richard Drewry
1953 Clyde Kirk	1968 Lee Casey	1983 Ralph Wesley
1954 Phillip Lewis	1969 Ralph S. Hamilton	1984 William White

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1955 Olan Ballou	1970 Ralph S. Hamilton	1985 Leo Beale
1956 H. Duncan	1971 Rowe Driver	1986 Ward Close
1957 John Wilson	1972 David Turner	1987 Francis Reid
1958 J. Wesley McKinney	1973 Allen Lawrence	1988 Bruce Herron
1959 Thomas Bryan	1974 Dale Teague	1989 Gary Jerkins
1960 D. Isabel	1975 Tom Currey	1990 Paul Wittke
1961 Alice Deutsch	1976 Stewart Lawwill	1991 Tom Gettelfinger
1962 William Kennon	1977 John Cunningham	1992 Steve Feman
1963 William Murrah	1978 Charles Parker	1993 Steve Feman

C. THE TRIAL

On December 16, 1982, suit was filed in court by the Southern College of Optometry (SCO) against the following defendants: Sam Wallace, Ph.D., a sociology professor at the University of Tennessee, Knoxville; the Tennessee Academy of Ophthalmology; and four ophthalmologists who were past presidents of the Academy, namely Richard Drewry, John Montgomery, Harry Lawrence, and Roger Hiatt. The counts

included libel, alleged interference with the business of SCO, and interference with contracts for certain services executed with SCO. Monies sought in actual and punitive damages totaled in the range of 16 million dollars, the largest judgment ever sought against an ophthalmologist or group of ophthalmologists in the United States. Over the ensuing five years, 52 depositions were taken, over 1,000 exhibits collected, and 10,000 pages of testimony collected. The trial began on labor Day, September 8, 1987, and lasted until near Christmas Day. It was the longest trial on record in any court in Memphis and Shelby County. No defense was given by the TAO itself or by the three physicians named

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as defendants. Harry Lawrence was dropped as a defendant in the case just prior to the trial. In the testimony by the three physicians there was no cross examination by defense attorneys. No one testified on behalf of the Tennessee Academy of Ophthalmology or for the three physicians involved. Cost to the plaintiffs in the trial was estimated at 2.2 million dollars, and in the end the plaintiffs recovered a total of \$200,000 from the TAO and defendant ophthalmologists, \$90,000 from Sam Wallace paid by CNA, and \$20 from Roger Hiatt and the TAO on count number two for a total of \$290,020. The legal fees for the physicians and the Tennessee Academy amounted to \$510,000 with an additional \$200,000 to SCO for a total of \$710,000 in costs. One hundred seventy thousand dollars was donated by the Tennessee Eye Defense Fund, another \$140,000 came from a court settlement with SVMIC, and the remainder was paid by the Tennessee Academy of Ophthalmology. After three hours of deliberation on Friday before Christmas in 1987, the jury ruled on count one, the Wallace Report, that Sam Wallace was guilty of libel and awarded compensatory damages of \$1,100 plus \$250,000 in punitive damages. The court found the Tennessee Academy of Ophthalmology guilty and awarded \$1,000,000 in compensatory damages and \$1,000,000 in punitive damages. The jury found all of the defendant physicians not guilty. On count two the jury found the Tennessee Academy and Roger L. Hiatt guilty and awarded damages of \$10 in compensatory and \$10 in punitive damages for a total of \$20. The other defendants were found not guilty. On instructions of the judge, after the jury confirmed its verdict, the judge stated they could not find against the Tennessee Academy without finding against

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individual defendant physicians. He asked the jury to reconsider its decision on count one. The same 12

members who had just 20 minutes earlier found all three physicians not guilty now found them all guilty, and a judgment of \$1,100 compensatory damages and \$3,000 punitive, for a total of \$4,100 each, was rendered, and the court adjourned. The judge then ruled that in view of the fact that the Tennessee Academy had been fined more than any of the defendants, there would have to be a re-trial. Sam Wallace then settled out of court for \$90,000. The Tennessee Academy of Ophthalmology and physicians settled out of court for \$200,000. The judge then granted an injunction against the Tennessee Academy of Ophthalmology and Roger L. Hiatt .to not do anything with reference to referring of patients between ophthalmologists and optometrists and against any wrongful interference with the externship program at SCO and from discouraging as a matter of policy any ophthalmologists teaching at SCO.. An appeal was filed in the western section in Jackson, and the three-judge panel ruled in favor of the TAO and Roger L. Hiatt. The State Supreme Court confirmed it, and the legal proceedings came to a close.

During the year 1988 a suit against State Volunteer Mutual Insurance Company resulted in their settling out of court for \$140,000. In May of 1991 Drs. Richard Drewry and Roger L. Hiatt sued the CNA Insurance Company for failure to support them during the long eight-year trial. The trial lasted three days. The court ruled that on seven of nine counts the two plaintiffs were functioning .within the scope of employment. as faculty members of the University of Tennessee. They subsequently

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ruled on the second day that this could have been easily ascertainable had they investigated it adequately, and finally on the third day they ruled that the plaintiffs were entitled to \$140,000 which was to be given to the TAO to repay some of its expenses. However, in a subsequent ruling by the same court, and confirmed by the court of appeals, it was ruled that there was no existing debt and that CNA did not have to pay the award. The final chapter on this long ordeal was closed.

III. A LOOK AT **THE** FUTURE

As we look at the future, many changes are occurring in ophthalmology in Tennessee and in the nation. There is an estimate that managed care will involve 70% of the population by the year 2000. Government

controls and the influence of insurance companies and hospitals will continue to increase. Ophthalmologists will probably have a lower income and will confront major issues. These include primary care and access to patients. Advenising has appeared on the scene in recent years, and the cost of medical care has been of major concern to the providers of care as well as to the recipients. Of concern to all of us is the quality of eye care as well as the outcomes of our work and the productivity of our offices and clinics. We believe that all Tennesseans should have access to basic eye care, that we should stabilize costs, and that ophthalmologists should be the leaders, the advocates, and the guardians of sight. It is envisioned that organizational medicine, such as the Tennessee Academy of Ophthalmology, will be even more imponent in future decades than in the past. There needs to be increased communication between the patient and the doctor and between the doctor and the third pany payers. A good surgeon/physician/doctor will be sought after by those wanting the best in care, and

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Solo practices will probably become less common, but the social, economic, and political issues that face medicine will proliferate as group practices become more and more common. **In** addition to the local and state organizational bodies in ophthalmology, the national bodies, such as the American Academy of Ophthalmology, will have an increasing role. It will be necessary for us to respond to policy and to give direction to policy as it affects state and federal laws regulating medicine and its practice. The local society and the state society will need to continue to provide fellowship to its members, to offer them continuing education, and to help solve local problems. Public education and information dissemination are vital roles that can be played by each state society. Also, there are the additional needs to train physician staffs and to combine efforts to supply some of the unmet eye care needs in the state. **If** we are to keep pace with practice changes that will occur in our state in the coming decades, we will need continuing education that is readily available, whether by meetings, tapes, videos, satellite, or fax machines. Our local and national libraries will need to provide quick access to scientific and other publications. The challenge is to be a physician first and an ophthalmologist second, to preserve the doctor-patient relationship, and in spite of the changing

world to promote excellence.

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