

**HISTORY OF OPHTHALMOLOGY IN TENNESSEE AND THE TAO**

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## INTRODUCTION

The Board of Directors of the Tennessee Academy of Ophthalmology (TAO) asked me to prepare a history of ophthalmology in Tennessee and the TAO in 1994. The principal sources of information were the records of the TAO, the libraries of the University of Tennessee and Vanderbilt University, and the Tennessee Medical Association (TMA).

Additional information was obtained from Drs. Lee Arnold, Dale Teague, John Montgomery, Jr., Steve Feman, Alan McCartt, Arpenik Avakian, and William Murrah.

## OPHTHALMOLOGY IN TENNESSEE

Ophthalmology in Tennessee is well over 100 years old. In fact, ophthalmology was first practiced primarily in Tennessee and nationally as part of eye, ear, nose, and throat (EENT). Some physicians called themselves "oculists" when they had multiple organ practices, and others, "ophthalmologists". Records indicate 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 ophthalmology in Tennessee was practiced in five cities: Chattanooga, Knoxville, Nashville, Johnson City, and Memphis. Presently, close to 50 Tennessee cities and towns have ophthalmologists.

## 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. 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 academic faculty to pursue private practice, but continued to serve as acting chairman at Vanderbilt. All

of the other chairmen who followed him at Vanderbilt were 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 he was Chairman of the Section of Ophthalmology for many years. He was also President of the Tennessee Medical Association, organizing the annual scientific meeting. He 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 Association Journal*. Dr. Savage was the first ophthalmologist with privileges at Vanderbilt University Hospital. Before Dr. Savage, Dr. Eaves, a general surgeon, performed cataract surgery at the Vanderbilt Hospital.

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

Dr. Savage's daughter, Kate Savage Zerfoss, M.D., joined him in practice and joined the faculty of ophthalmology at Vanderbilt in 1934. In 1946, she was promoted to associate clinical professor.

A resident program of ophthalmology was begun in 1957, and received provisional approval by the Council on Graduate Medical Education. 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.

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. The program in ophthalmology at Vanderbilt has grown tremendously with support from the Lions and others in the mid-Tennessee area. Many of the residents remained in Tennessee after graduation, and have contributed greatly to the profession in the state and in the nation.

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.

#### OPHTHALMOLOGY IN CHATTANOOGA AND HAMILTON COUNTY

Ophthalmology in Chattanooga and other parts of the state began as eye, ear, nose, and throat. The first physician to confine his practice to this area was Dr. R.M. Steele, 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, 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 they began practicing in Chattanooga are unknown, but Drs. Long and Hogshead attended the American Academy meeting held in Chattanooga in 1913.

Until 1950-1952, most 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 Baroness Erlanger Hospital or 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 surgeries at Erlanger and Children's Hospitals, utilizing the same operating rooms as those used for general surgery. Most 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. Drs. Steele, Long, Lawwill, Sr., Isbell, and Arnold were past presidents of the Chattanooga and Hamilton County Medical Society. David Turner, M.D. was president of the Tennessee Medical Association in 1977-1978.

#### THE CHATTANOOGA OPHTHALMOLOGICAL FOUNDATION

The idea for the Chattanooga Ophthalmological Foundation was proposed by I. Lee Arnold, M.D. On July 25, 1969, the Chattanooga Ophthalmological Foundation was chartered with I. Lee Arnold as president. 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 limited strictly to eye care.

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 unusual cooperation among local eye staff. The idea of a freestanding independent eye center in Chattanooga was to become a reality. 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. The 30-bed, five 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.

#### OPHTHALMOLOGY TRAINING IN CHATTANOOGA

In the late 1950's, several local ophthalmologists, including Drs. Lee Arnold, Stewart Lawwill, Jr., and Ira Long, became interested in starting a training program for ophthalmologists, utilizing the huge volume of clinical material at Erlanger Hospital for teaching purposes. Thus, in 1960 a two-man training program began with the approval of the RRC and other authorities. All local ophthalmologists participated in the program and, as a result, many competent ophthalmologists trained there, passed their boards, and have served their respective communities well.

Over the years, the program has trained a total of 54 residents who have either completed their residency or are currently in training. Many of the graduating residents moved to the cities surrounding Chattanooga. At one time, fifteen practiced in Chattanooga.

Erlanger Hospital became affiliated with the University of Tennessee, College of Medicine, and the Chattanooga program is known as 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.

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

## OPHTHALMOLOGY IN EAST TENNESSEE AND KNOXVILLE

The earliest trained ophthalmologist in Knoxville was Swan Moses Burnette, 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 ultimately designated as the medical school. Dr. Young was born in 1851 and completed his post-graduate work at Bellevue and Manhattan 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 Knoxvillian 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, the son of B. 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. Other prominent eye, ear, nose, and throat physicians were Edward Grubb, M.D., W.W. Potter, M.D. and J. Ralph Hamilton, M.D., father of 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., born in 1884, who 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 sons, H.E. Christenberry, Jr., M.D. and Kenneth W. Christenberry, M.D.

In 1922, R.G. Reaves, M.D., 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.

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 II, and Cecil Pitard, M.D., afterwards,

were two of the graduates of this program.

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.

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

J. L. Montgomery, M.D., born in 1907, trained at the New Orleans Eye, Ear, Nose, and Throat Hospital and, in 1938, was the first physician in this area to become certified by 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. Their sons, John Montgomery, Jr., M.D. and John Hoskins, M.D., returned to Knoxville to practice ophthalmology.

After World War II, several prominent 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 served as the first chief of ophthalmology at the new University Hospital, succeeded by Dr. John L. 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. Campbell and 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. Dr. Patterson became a senior amateur tennis champion after his retirement.

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

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.

Reformation occurred and the former Knoxville Academy of Ophthalmology became known as the East Tennessee Ophthalmological Society.

#### OPHTHALMOLOGY IN JOHNSON CITY AND UPPER TENNESSEE

Until about 1945, ophthalmic care in upper East Tennessee was primarily provided by dual-certified EENT-ophthalmology specialists.

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 sold to Dr. McKee the house that 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. In 1954, Dr. Alfred N. Costner brought corneal transplantation expertise to the hospital from Duke 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.

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. In 1982, the facility was renamed the Johnson City Eye and Ear Hospital, and was sold to the Hospital Corporation of America. Retinal 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, Dr. Janet Brown and Dr. Joudon Allison, joined her.

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, having 12 practicing ophthalmologists is certainly

unusual.

### 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.

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.

In 1887, Dr. J. L. 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 the distinction of being the first member of the American Ophthalmological Society to reside in this area.

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, which 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, and Throat Hospital opened in 1926, the meetings were held there monthly, excluding July and August. 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 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. 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 institution from its inception. It was an 18-month residency, combining 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

purchased the hospital in 1942.

From its opening in 1926 until closing 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 the first photocoagulator for the Memphis Eye, Ear, Nose, and Throat Hospital.

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 merged with that of the Memphis Eye, Ear, Nose, and Throat Hospital in 1956. 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. That year, 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 (ABO), 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. 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. Three candidates 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.

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 AMA, 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 the campus of Rhodes College, 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. He 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.

Drs. Ellett, Lewis, and Hiatt account for almost 75 years' chairmanship of the 100+ year history of ophthalmology in Memphis.

The Annual Residents Day began 20 years ago, and UT-ARVO 15 years ago. Four of the faculty are members of the American Ophthalmological Society. Papers, written and oral, in any year total about 150. There are 12,000 surgical cases performed by the residents, full-, part-time, and volunteer faculty each year. Affiliations have grown to include Baptist Memorial Hospital, Methodist Hospital, Le Bonheur Children's Medical Center, St. Jude Children's Research Hospital, Memphis Veterans Administration Hospital, The Regional Medical Center at Memphis ("The MED"), and UT Bowld Hospital. The residents are the primary physicians for about 9,000 patients during their three-year training program. 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, the region, nationally, and internationally. Numerous ophthalmologists on the faculty 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 in its mission. The University's Neuroscience Department is active in vision research and supports the department, especially in UT-ARVO.

THE TENNESSEE ACADEMY OF OPHTHALMOLOGY

Very little was available in the way of minutes and records of the Tennessee Academy of Ophthalmology prior to 1949.

#### PRIOR TO 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. Dr. William Murrah was secretary for a number of years.

A ledger provided a summary of the history of the Tennessee Academy of Ophthalmology and Otolaryngology beginning April 10, 1950, and covered 21 years. It was essentially handwritten with a few typed committee reports and programs. Typical of today'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." Present at this meeting were 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, R. 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. Dr. Henry Carl Smith discussed a paper on acute glaucoma. 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.

In 1951, Dr. R.H. Campmier, editor of the Tennessee State Medical Association Journal, suggested that the Tennessee Academy of Ophthalmology and Otolaryngology avoid meeting times that would conflict with the Tennessee State Medical Association's meetings. This was a recurrent theme over the years. At the business meeting of the TAO 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.

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. Dr. Philip Lewis was nominated to be president of the academy that year. Dr. Wilson of Johnson City was nominated vice president, and Dr. Tom Bryant of Nashville was nominated secretary.

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 academy \$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 treatment of strabismus. Dr. Harold McIver of Jackson presented a paper on the care and treatment of post tonsillar abscess, which was discussed by Drs. Charles Long, C.W. Blasengame, and W.W. Potter.

In 1956, the Academy met in Memphis, 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. Dr. Eugene Vaccaro presented a paper on right superior oblique palsy. 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, for which he served as the first president.

The 1958 meeting was held in Gatlinburg. An obscure case of glaucoma was presented by Dr. W. W. Wilder of Memphis. 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.

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.

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 presented by Dr. Phillip Deer of Memphis.

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 annual expenditures of the Tennessee Academy of Ophthalmology were \$505.

The 1970 meeting was held in Memphis. Dr. Lee Arnold gave the Sight Conservation

Committee report and Dr. Gunner gave the Legislative Council report. It was noted that 115 of 193 members (ophthalmologists and otolaryngologists combined) paid their 1970 dues. Dr. Roger Hiatt gave a 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.

### 1971 TO PRESENT

On Saturday, August 16, 1975, in Nashville, the Tennessee Academy of Ophthalmology (TAO) was reorganized and incorporated. Dr. Tom Currey was president, and Robert C. Taylor was attorney.

At the December 4, 1975 meeting of the Academy at the TMA office in Nashville, discussion centered around the state health regulatory boards. Also, Ed Sear, President of 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.

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

Mr. John Lylle became the legislative counselor for the TAO in March 1979, and he served until 1994. It was also announced that the Chattanooga Miller Eye Center would open that year.

The minutes of the academy were contained in folders, beginning in 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.

In early 1981, the Academy continued to employ J. B. Hogan and Company for public relations. At the December 5, 1981 meeting, 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.

The Academy continued to meet with the TMA 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, with a visiting speaker being invited from outside Tennessee. During the early 1980's, a part-time secretary in the TMA 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 statewide telephone hookup were common during the 1980's and early 1990's. Also in the 1980's, the Tennessee Academy organized a political action committee (PAC), which continues today.

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

The 1987 issue of *Insights* contained an interview with Dr. James H. Elliott, who was 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 academy in *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 to restructure the Tennessee Academy of Ophthalmology.

At the Friday evening meeting, 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 AAO 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 Tennessee.

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. That evening, Dr. Paul Wittke discussed PRO, ophthalmology nationally, and the role of the TAO. The next morning, the overview was again presented by Dr. Hiatt, followed by reports from Dr. Paul Wittke, Rich Paul, and Dr. Bill Offitt. 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, dues, how to increase membership, new residents, and people relocating to Tennessee;
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 PPO 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; and

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 Parke, 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.

The participants left the meeting 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 strength, vigor, and promise.

Dr. Hiatt, 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, resulted in the Distinguished Service Award and Best Paper Award being instituted as annual events. Also, the graduating 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 the "case of the month" in the TMA 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 various committees of the academy.

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

state.

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

Recent committees have considered topics such as 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 also been very active, 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 have also been one of the main thrusts in recent months and during the last decade.

In 1991, Sue Chasteen was hired as the first Executive Director of the Academy 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 third, the revision of the "Therapeutic Bill" in the spring of 1993. These actions drained a great deal of time, energy, and money from leaders of the Academy and had a tremendous effect on the organization.

As we look to the future, we must learn from the contributions of so many pioneers in Tennessee who have given so much to medicine and ophthalmology. It is hoped that we, too, may contribute our part in the future.

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