Optometric practice satisfaction study

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Optometric practice satisfaction study

Abstract
A sample of 2,886 randomly selected optometrists throughout the United States, and Puerto Rico were surveyed regarding practice satisfaction in their previous as well as current mode of practice. We received 662 responses to the survey, representing 13 modes of practice. Overall, 56.4% surveyed were very satisfied in their current mode of practice, 37.9% were satisfied and 5.7% of optometrists were dissatisfied. Specifically, optometrists in partnerships with other optometrists were the most satisfied, whereas optometrists sharing practices with ophthalmologists had the highest rate of dissatisfaction, followed closely by optometrists working for chains and corporations. The study also inquired about practice mode satisfaction in terms of benefits offered, practice management input, patient management control and vacation time.

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Thesis

Degree Name
Master of Science in Vision Science

Committee Chair
Willard B. Bleything

Subject Categories
Optometry

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OPTOMETRIC PRACTICE SATISFACTION STUDY

By

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HOLLY MAH, B.Sc.
VMAN YEUNG, B.Sc.

A thesis submitted to the faculty of the College of Optometry Pacific University Forest Grove, Oregon for the degree of Doctor of Optometry May 2001

Advisor:

Willard B. Bleything, O.D., M.S. Distinguished University Professor of Public Health and Optometry
OPTOMETRIC PRACTICE SATISFACTION STUDY

JACKIE CHAO, B.S.

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VIVIAN YEUNG, B.Sc.

WILLARD B. BLEYTHING, O.D., M.S.
BIOGRAPHY

JACKIE CHAO, B.S.

Jackie is a fourth year student at Pacific University College of Optometry and will be graduating in May 2001. She obtained her Bachelor of Science Degree at the University of Washington in Psychology. Jackie plans to practice primary care optometry in Oregon.

HOLLY MAH, B.Sc.

Holly, a fourth year student at Pacific University College of Optometry will be graduating in May 2001. She earned her Bachelor of Science Degree at the University of Alberta, in Biology. Holly plans to return to Alberta to practice primary care optometry.

VIVIAN YEUNG, B.Sc.

Vivian is also a fourth year student at Pacific University College of Optometry, and will be graduating in May 2001. She received her Bachelor of Science Degree at the University of British Columbia in Cell Biology/Genetics. Vivian plans to practice optometry in the United States before returning to Canada.
ABSTRACT

A sample of 2,886 randomly selected optometrists throughout the United States and Puerto Rico were surveyed regarding practice satisfaction in their previous as well as current mode of practice. We received 662 responses to the survey, representing 13 modes of practice. Overall, 56.4% surveyed were very satisfied in their current mode of practice, 37.9% were satisfied and 5.7% of optometrists were dissatisfied.

Specifically, optometrists in partnerships with other optometrists were the most satisfied, whereas optometrists sharing practices with ophthalmologists had the highest rate of dissatisfaction, followed closely by optometrists working for chains and corporations.

The study also inquired about practice mode satisfaction in terms of benefits offered, practice management input, patient management control and vacation time.
ACKNOWLEDGEMENTS

We thank several people for their contributions to the completion of this thesis.

Jason W. Porrit, Pacific University College of Optometry Class of 1992. Dr. Porrit initially did this study under the advisement of Drs. Nada Lingle and Lee Ann Remington.

Dr. Willard Bleything, for his guidance, expertise and extra hours of counsel. Thank you for giving us the opportunity to follow up Dr. Porritt’s work.

Thank you to Marilyn Dolby and Donna in the mailroom at Pacific University for their administrative help.

Thank you to Pam, Audrey and Bernard, for helping us fold questionnaires and seal envelopes as well as for putting up with the boxes all over the apartment!

Pacific University College of Optometry provided the funding, supplies, and postage for the survey.

A heartfelt thank you to the 662 optometrists who not only took the time to respond to our study, but also paid the postage to return the survey back to Pacific University.
INTRODUCTION

Each year, a new set of graduates is confronted with the important decision as to which practice setting is best to begin optometric practice. Such choices are most often made with information by word of mouth, sometimes research and sometimes, blindly.

A survey of optometric students, done by Donna Marino found that the primary reasons for entering optometry school were to work with the public, to be independent and to work in the health care field. Similarly, Kloos concluded that recent graduates selected practice location by proximity to home, good job offers, favorable economics and a low optometrist to population ratio. She found that the two most common choices immediately after graduation were retail optical outlets and solo private practice.

Another issue confronting young graduates today is growing debt. Brownlow and Jens argue that older optometrists no longer understand the cost of education, loan payments and living expenses. The authors compared tuition and living expenses obtained from Illinois college of Optometry (ICO), a privately funded college and Indiana University, a publicly funded setting. Their data revealed that tuition in 1991 was 715% more expensive for ICO and 531% more expensive for IU compared to tuition in 1971. Brownlow & Jens also found that the cost of living was five times as expensive for the students in 1991 than 1971. They argue that tuition has increased astronomically and student income and optometrist income has not kept pace during the twenty year period studied. Forty-eight per cent of graduates say loan repayment is the most serious problem faced at graduation. New practitioners face powerful commercial chains, managed care, rising overhead costs and high student loans such that graduates are forced to remain in positions of employment for longer periods to repay school debt. Brownlow and Jens go on to say that the choices are no longer which private practice to choose, buy or start cold as there are alternate competitive modes of practice and running a solo practice has become impossibly expensive.

Six hundred and sixty-two optometrists responded to our survey, enabling us to analyze and compare 13 modes of practice in terms of satisfaction. The information is intended to help graduates make educated decisions about which mode is suitable, to educate those optometrists hiring new graduates about issues facing young doctors and as well, study the general satisfaction of optometrists.
The following modes of practice are defined as they are employed in this survey.

**SELF EMPLOYED MODES**

A  **SOLO PRACTICE:** sole optometrist

B1 **SHARED EXPENSE ARRANGEMENT WITH ONE OR MORE OPTOMETRISTS:** two or more optometrists share overhead but maintain separate practices

B2 **SHARED EXPENSE ARRANGEMENT WITH ONE OR MORE OPHTHALMOLOGISTS:** two or more doctors share overhead but maintain separate practices

C  **PARTNERSHIP WITH ONE OR MORE OPTOMETRISTS:** joint ownership by two or more optometrists

D  **PARTNERSHIP WITH ONE OR MORE OPHTHALMOLOGISTS:** joint ownership by two or more doctors

E  **FRANCHISE OWNER:** optometrist purchased franchise rights

F  **OTHER:** other forms of self employed practice

**EMPLOYED MODES**

G  **ASSOCIATESHIP:** one optometrist employed by another

H  **OPHTHALMOLOGIST/MEDICAL CLINIC:** an optometrist is employed or under the direction of an ophthalmologist in a medical clinic

I  **HMO:** optometrist employed by health maintenance organization

J  **GOVERNMENT/MILITARY:** optometrist employed by federal government or armed forces

K  **CHAIN/CORPORATE:** optometrist employed or associated with commercial or corporate firm

L  **OTHER:** education, research or other forms of employment
METHODS

We mailed surveys to 2,866 optometrists throughout the United States and Puerto Rico based on a stratified sample representing 2% of all practicing optometrists. Each state was proportionately represented and all of the contacted optometrists randomly chosen. Optometrists were asked directly and indirectly about their satisfaction in different modes of practice. Several variables were also explored and evaluated as they relate to satisfaction in various modes of practice. The study was mailed January 15th, 2000 and accepted replies until Feb 15th, 2000 inclusive.

RESULTS

A total of 662 optometrists, representing 2.6% of all practicing optometrists responded to the survey. All states and Puerto Rico were represented. All optometry schools in North America were represented with the exception of the University of Montreal. The gender make up of our respondents was 82% male and 18% female.

Table 1. depicts demographics of the respondents by year of graduation.

Ninety-one per cent of respondents offered spectacle services, 92% contact lenses, 41% low vision, 53% pediatric services, 17% vision therapy, 16% sports vision. Seventy-seven per cent provided preoperative and postoperative comanagement. Approximately half of the respondents were not licensed to prescribe orals. Interestingly, 38.7% of respondents practiced 52% disease. Seventy-eight percent of our respondents (n=490/628) worked 200 or more days in 1998.

Table 2. represents information compiled about the first mode of practice chosen by the respondents immediately after graduation. Of note is the relative number of responses per mode of practice as some have less representation. Our data reveals that the most common choice of practice mode after graduation is associateship (26.7%) and solo practice (25.5%). The choices are also presented by gender. Female optometrists were most likely to choose employed modes of practice rather than self-employed modes. The median number of years spent in the first practice mode are also examined. Optometrists working in employed modes of practice were less likely to stay in that mode of practice. Whether debt load influenced the decision to enter the first mode of practice is analyzed by specific mode of practice. Debt load was an influencing factor for those optometrists choosing employment in chain and corporations. Over 79% of respondents indicated that debt load was not a factor in choice of practice mode. Graph 1. depicts the level of indebtedness of our respondents at time of graduation. Interestingly, the majority (58.4%) of respondents had less than $20,000 debt at graduation.
Respondents were asked about lifestyle factors that influenced practice mode choice. Table 3. illustrates the importance of family, geography, level of income, travel/leisure hobbies and teaching in choosing practice mode. Geography was the most common lifestyle factor that influenced practice mode choice. Family was second at 32.4%. Males and females had parallel responses except hobbies were more popular with males and teaching was chosen more often by female optometrists.

Table 4. summarizes statistics on the distribution of optometrists by mode of practice, median number of years in the current mode of practice, and the median income per mode of practice. The most common current mode of practice was solo practice (48%), followed by optometrists in partnership with other optometrists (19.8%). For both these modes of practice, the median number of years in this current mode was 15-19 years. Self-employed modes of practice had higher median incomes. Associateships had the lowest income of all practice modes, with a median income of $50,000-74,999. Interestingly, the degree of satisfaction increased with income.

Graph 2. illustrates the relative satisfaction of optometrists by mode of practice. The answers available were as follows:

A. Very Satisfied, No Desire to Change
B. Satisfied, Change Is Always a Possibility
C. Unsatisfied, Considering Changing Mode of Practice

Overall, 56.4% of respondents were very satisfied (n=368/652), 37.9% were satisfied (n=247/652) while 5.7% of optometrists were unsatisfied (n=37/652) and considering a different mode of practice. Optometrists in partnership with other optometrists (70.5%) were the most satisfied while optometrists in shared-expense arrangements with ophthalmologists (16.7%) and optometrists employed by chains or corporate firms were the least satisfied (16.1%). When analyzing satisfaction in terms of self-employed optometrists compared to employed optometrists, we found that self-employed optometrists overall had the highest percentage of "very satisfied" responses (Table 5).

Respondents were asked: **If you had to do it over again, would you enter the field of optometry?** Table 6 compiles the results, analyzed by mode practice. Overall, 37.6% of (n=246/654) respondents would definitely enter optometry again while 45.3% (n=296/654) of respondents would probably enter optometry again. 14.8% of optometrists surveyed (n=97/654) would not likely enter optometry again and 2.3% (n=15/654) of respondents would never optometry again. Optometrists most likely to enter optometry again were those in partnership with an ophthalmologist, teachers, researchers, those in shared expense arrangements with other optometrists and as well, in private practice. Respondents least likely to become optometrists again worked in franchise settings, HMO's, chains, and associateships.
When asked if respondents would recommend the field of optometry to their sons or daughters, 19.3% (n=1251648) would most definitely recommend the profession, while 43.2% (n=2801648) would probably recommend optometry. Interestingly, 32.3% (n=209648) of those surveyed would not likely recommend optometry and 5.2% (n=43648) would never recommend optometry.

Satisfaction was indirectly evaluated in the survey by analyzing benefits available in the different modes of practice. Table 7 illustrates health benefits, dental insurance, life insurance, retirement benefit and disability by practice mode. Of the employed optometrists, associates had the least benefits and of the self-employed optometrists, solo practitioners had the least benefits. Optometrists employed by ophthalmologists and optometrists employed by HMO’s received the most benefits.

Vacation time was evaluated by the survey as a measurement of satisfaction. Respondents were asked to rate their ability to take time off:

A. Very Good, Time Off Whenever Wanted
B. Good, Time Off When Needed
C. Fair, Sometimes Get Time Off When Needed
D. Poor, Seldom Get Time Off When Needed

Table 8 displays the responses of vacation time by practice mode. Optometrists in partnership with other optometrists had the most difficulty taking vacation time while those optometrists employed by HMO’s were the most able to take time off when wanted.

Respondents were asked about control over the practice, such as hiring and firing of employees, fees, bookkeeping, advertising, etc. The answers available were as follows:

A. Very Good, Total Control
B. Fair, Partial Control
C. Poor, No Control

Table 9 summarizes the responses by practice mode. Employed optometrists had the least amount of practice control. Specifically, optometrists working in the government and military had the least amount of control, followed by respondents working in associateships.

In addition to practice management, respondents were asked about control over patient management. Factors such as time spent with the patient, patient education, additional testing, contact lens fits, referrals, etc were studied. The responses available were as follows:

A. Good, Total Control
B. Fair, Partial Control
C. Poor, No Control

Table 10 presents statistics on patient management by practice mode. Optometrists employed have the least amount of control of patient management. In addition, optometrists in partnership with other optometrists have the least amount of patient control among the self-employed optometrists. Respondents employed by HMO's had the least amount of patient control of all practice modes.
DISCUSSION

We surveyed optometrists throughout the United States and Puerto Rico to gather data on practice satisfaction. The information attained is intended to help new doctors decide which mode of practice is best suited after graduation. In addition, optometrists changing modes of practice as well as those looking to hire new graduates may also find this data helpful. The general satisfaction of optometrists across the country was also studied.

Our results indicate that approximately 60% of self-employed optometrists are very satisfied in their current mode of practice. Employed optometrists had a slightly lower rate of satisfaction. Overall, optometrists in partnership with other optometrists had the highest rate of satisfaction while optometrists employed by corporations and in shared-expense arrangements with ophthalmologists were least satisfied. These findings may be of interest to new graduates as many young doctors begin practice in employed modes of practice, notably, some under the employment of chains and corporations.

Our data did not support the argument that debt was a determining factor in choice of practice mode after graduation. Over 79% of respondents indicated that debt load did not influence their choices. We did find however that optometrists employed by chains and corporations were influenced by debt load. Interestingly, income was only the third most important lifestyle factor for the respondents. Our data may have supported the argument that debt has been a factor in choice of practice mode had we surveyed recent graduates instead of a random sample all practicing optometrists.

Self-employed optometrists reported higher median income than employed optometrists. Associates reported the lowest income of all practice modes. However, the employed positions reportedly offer flexibility in time off as well as better benefits. Optometrists employed by ophthalmologists and optometrists employed by HMO's received the most benefits and were best able to take time off when wanted. Unfortunately, these modes of practice also had the least amount of patient control. The employed optometrists, in particular, associates, and those working in the government/military had the least amount of practice control. Again, this information is of significance to young doctors seeking positions in employed modes of practice.

Each mode of practice has advantages and disadvantages that must be extensively investigated. The decision of which mode of practice suited after graduation is best made after careful consideration of which advantages and disadvantages are most important to the individual practitioner, be it patient control, practice autonomy, income, benefits or vacation time.
REFERENCES


ADDITIONAL REFERENCES


Graph 1: Level of Indebtedness at Graduation

- >$150,000: 0.3%
- $100,000-$150,000: 3.5%
- $75,000-$99,999: 3.7%
- $50,000-$74,999: 8.9%
- $40,000-$49,999: 7.6%
- $30,000-$39,999: 6.4%
- $20,000-$29,999: 11.2%
- <$20,000: 58.4%
Graph 2: Relative Satisfaction by Current Mode of Practice

- A. Very Satisfied
- B. Satisfied
- C. Dissatisfied

Percent of Satisfaction

Current Mode of Practice

- Solo (n=312)
- Shared OD (n=19)
- Shared MD (n=6)
- Partner OD (n=129)
- Partner MD (n=5)
- Franchise (n=1)
- Self-Other (n=34)
- Associate (n=33)
- Employed MD (n=39)
- HMO (n=16)
- Government (n=8)
- Chain (n=31)
- Employed-Other (n=25)
### TABLE 1: Respondent Demographics By Year of Graduation

<table>
<thead>
<tr>
<th>Year of Graduation</th>
<th>Percent Respondents</th>
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<tr>
<td>1940-1949</td>
<td>2%</td>
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<td>1950-1959</td>
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<td>1960-1969</td>
<td>11%</td>
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<td>1970-1979</td>
<td>30%</td>
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<tr>
<td>1980-1989</td>
<td>35%</td>
</tr>
<tr>
<td>1990-1999</td>
<td>16%</td>
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</table>

n = 6601662

**TABLE 1: Respondent Demographics By Year of Graduation**
<table>
<thead>
<tr>
<th>MODE OF PRACTICE</th>
<th>n = 659</th>
<th>%</th>
<th>(n = 541) % MALE</th>
<th>(n = 118) % FEMALE</th>
<th>(n = 623) MEDIAN # YEARS IN MODE</th>
<th>(n = 649) DEBT LOAD INFLUENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>SELF EMPLOYED</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Solo</td>
<td>168</td>
<td>25.5%</td>
<td>29.6%</td>
<td>6.8%</td>
<td>15 - 19</td>
<td>91.5</td>
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<tr>
<td>Shared OD</td>
<td>20</td>
<td>3.0%</td>
<td>2.8%</td>
<td>4.2%</td>
<td>0 - 2</td>
<td>77.3</td>
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<td>Shared MD</td>
<td>2</td>
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<td>0.4%</td>
<td>0.0%</td>
<td>10 - 14</td>
<td>50.0</td>
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<td>Partner OD</td>
<td>75</td>
<td>11.4%</td>
<td>12.2%</td>
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<td>10 - 14</td>
<td>91.8</td>
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<td>Partner MD</td>
<td>0</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0</td>
<td>0.0</td>
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<tr>
<td>Franchise</td>
<td>0</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0</td>
<td>0.0</td>
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<tr>
<td>Self-Other</td>
<td>23</td>
<td>3.5%</td>
<td>2.8%</td>
<td>7.8%</td>
<td>0 - 3</td>
<td>65.2</td>
</tr>
<tr>
<td>EMPLOYED</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Associate</td>
<td>176</td>
<td>26.7%</td>
<td>25.0%</td>
<td>34.7%</td>
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<td>Employed MD</td>
<td>44</td>
<td>6.7%</td>
<td>5.5%</td>
<td>11.9%</td>
<td>0 - 2</td>
<td>70.5</td>
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<tr>
<td>HMO</td>
<td>20</td>
<td>3.0%</td>
<td>2.8%</td>
<td>4.2%</td>
<td>6 - 9</td>
<td>70.0</td>
</tr>
<tr>
<td>Government</td>
<td>69</td>
<td>10.5%</td>
<td>12.0%</td>
<td>3.4%</td>
<td>0 - 3</td>
<td>72.5</td>
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<tr>
<td>Chain</td>
<td>39</td>
<td>5.9%</td>
<td>4.8%</td>
<td>11.0%</td>
<td>0 - 2</td>
<td>31.6</td>
</tr>
<tr>
<td>Employed-Other</td>
<td>23</td>
<td>3.5%</td>
<td>2.4%</td>
<td>8.5%</td>
<td>0 - 2</td>
<td>91.3</td>
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</table>

TABLE 2: FIRST MODE OF PRACTICE STATISTICS
<table>
<thead>
<tr>
<th>LIFESTYLE FACTORS</th>
<th>%</th>
<th>% MALE</th>
<th>% FEMALE</th>
</tr>
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<tbody>
<tr>
<td>Family</td>
<td>32.4</td>
<td>32.1</td>
<td>33.9</td>
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<tr>
<td>Geography</td>
<td>41.7</td>
<td>41.9</td>
<td>41.1</td>
</tr>
<tr>
<td>Income</td>
<td>9.7</td>
<td>9.6</td>
<td>9.9</td>
</tr>
<tr>
<td>Travel/Leisure</td>
<td>7.5</td>
<td>7.7</td>
<td>6.8</td>
</tr>
<tr>
<td>Hobbies</td>
<td>4.9</td>
<td>5.5</td>
<td>2.6</td>
</tr>
<tr>
<td>Teaching</td>
<td>2.9</td>
<td>2.2</td>
<td>5.7</td>
</tr>
<tr>
<td>Other</td>
<td>0.1</td>
<td>0.1</td>
<td>0</td>
</tr>
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</table>

**TABLE 3: LIFESTYLE FACTORS AFFECTING PRACTICE MODE CHOICE**
<table>
<thead>
<tr>
<th>PRACTICE MODE</th>
<th>% (n=661)</th>
<th>Median Years in Practice (Yrs)</th>
<th>Median Income ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SELF EMPLOYED</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A Solo</td>
<td>48</td>
<td>15-19</td>
<td>75,000-99,999</td>
</tr>
<tr>
<td>B1 Shared OD</td>
<td>2.9</td>
<td>10-14</td>
<td>100,000-149,999</td>
</tr>
<tr>
<td>B2 Shared MD</td>
<td>0.01</td>
<td>10-14</td>
<td>75,000-99,999</td>
</tr>
<tr>
<td>C Partner OD</td>
<td>19.8</td>
<td>15-19</td>
<td>100,000-149,999</td>
</tr>
<tr>
<td>D Partner MD</td>
<td>0.06</td>
<td>15-19</td>
<td>100,000-149,999</td>
</tr>
<tr>
<td>E Franchise</td>
<td>0.02</td>
<td>6-9</td>
<td>75,000-99,999</td>
</tr>
<tr>
<td>F Self-Other</td>
<td>5.3</td>
<td>6-9</td>
<td>75,000-99,999</td>
</tr>
<tr>
<td>EMPLOYED</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G Associate</td>
<td>5</td>
<td>6-9</td>
<td>75,000-99,999</td>
</tr>
<tr>
<td>H Employed MD</td>
<td>5.3</td>
<td>6-9</td>
<td>75,000-99,999</td>
</tr>
<tr>
<td>I HMO</td>
<td>2.4</td>
<td>15-19</td>
<td>75,000-99,999</td>
</tr>
<tr>
<td>J Government</td>
<td>1.2</td>
<td>6-9</td>
<td>75,000-99,999</td>
</tr>
<tr>
<td>K Chain</td>
<td>4.7</td>
<td>6-9</td>
<td>75,000-99,999</td>
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<tr>
<td>L Employed-Other</td>
<td>3.8</td>
<td>10-14</td>
<td>75,000-99,999</td>
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TABLE 4: CURRENT PRACTICE MODE STATISTICS
<table>
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<tr>
<th></th>
<th>SELF EMPLOYED</th>
<th>EMPLOYÉ-D</th>
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</thead>
<tbody>
<tr>
<td>VERY SATISFIED</td>
<td>59.0%</td>
<td>47.3%</td>
</tr>
<tr>
<td>SATISFIED</td>
<td>35.6%</td>
<td>45.9%</td>
</tr>
<tr>
<td>DISSATISFIED</td>
<td>5.3%</td>
<td>6.8%</td>
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**TABLE 5: Relative Satisfaction Comparison Between Self-Employed and Employed Optometrists**
<table>
<thead>
<tr>
<th>PRACTICE MODE</th>
<th>n</th>
<th>DEFINITELY</th>
<th>PROBABLY</th>
<th>NOT LIKELY</th>
<th>NEVER</th>
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<tr>
<td><strong>SELF-EMPLOYED</strong></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>A SOLO</td>
<td>311.0</td>
<td>39.5</td>
<td>43.7</td>
<td>13.8</td>
<td>2.9</td>
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TABLE 6: STATISTICS BY PRACTICE MODE WHETHER RESPONDENTS WOULD CHOOSE OPTOMETRY AGAIN
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**TABLE 7: BENEFIT STATISTICS BY MODE OF PRACTICE**
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**TABLE 8: ABILITY TO TAKE VACATION TIME BY PRACTICE MODE**
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**TABLE 9: STATISTICS ON PRACTICE MANAGEMENT CONTROL BY PRACTICE MODE**
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**TABLE 10: PATIENT MANAGEMENT CONTROL STATISTICS BY PRACTICE MODE**
Practice Mode Survey

Instructions:
1. Please answer all questions.
2. Any and all comments are welcome.
3. Please be honest as possible, your responses are completely anonymous and confidential.
4. Thank you for your time in completing this questionnaire.

1. What year did you graduate from optometry school? 19_____
2. From which college or school of optometry did you graduate? __________________________
3. In which state are you currently practicing? __________________________
4. Please circle your gender. Male    Female
5. Which of the following would best describe your FIRST practice mode after graduation?

SELF EMPLOYED
[ ] A. Solo Practice
[ ] B. Shared-Expense Arrangement (Drs. sharing overhead with separate practices.)
   [ ] 1. with one or more optometrist
   [ ] 2. with one or more ophthalmologist
[ ] C. Partnership with one or more optometrists (Joint Ownership)
[ ] D. Partnership with one or more ophthalmologists (Joint Ownership)
[ ] E. Other __________________________

EMPLOYED
[ ] G. Associateship (Employed by an Optometrist)
[ ] H. Ophthalmologist / Medical Clinic (Employed by an MD)
[ ] I. HMO (Health Maintenance Organization)
[ ] J. Government / Military
[ ] K. Chain or Corporate
[ ] L. Other __________________________

6. How many years did you stay in this mode of practice? ________
7. What was your estimated indebtedness at graduation? (including undergraduate)

[ ] A. Less than $20,000
[ ] B. $20,000 to $29,999
[ ] C. $30,000 to $39,999
[ ] D. $40,000 to $49,999
[ ] E. $50,000 to $74,999
[ ] F. $75,000 to $99,999
[ ] G. $100,000 to $150,000
[ ] H. More than $150,000

8. Relative to the mode of your first practice, was your debt load a compelling factor in your choice. Please circle. YES   NO

9. What lifestyle factors influenced your choice of mode of practice?

[ ] A. Family
[ ] B. Geographic Location
[ ] C. Disposable Income
[ ] D. Travel and Leisure
[ ] E. Hobbies
[ ] F. Teaching
[ ] G. Other __________________________
10. Which of the following would best describe your **CURRENT** practice mode?

**SELF EMPLOYED**
- [ ] A. Solo Practice
- [ ] B. Shared-Expense Arrangement (Drs. sharing overhead with separate practices.)
  - 1. with one or more optometrist
  - 2. with one or more ophthalmologist
- [ ] C. Partnership with one or more optometrists (Joint Ownership)
- [ ] D. Partnership with one or more ophthalmologists (Joint Ownership)
- [ ] F. Other __________________________

**EMPLOYED**
- [ ] G. Associateship (Employed by an Optometrist)
- [ ] H. Ophthalmologist / Medical Clinic (Employed by an MD)
- [ ] I. HMO (Health Maintenance Organization)
- [ ] J. Government / Military
- [ ] K. Chain or Corporate
- [ ] L. Other __________________________

11. How many years have you been in your current practice mode? _________

12. How many years have you been in practice? _________

13. Of the areas listed below, mark all those services you routinely provide?

- [ ] A. Spectacle Lenses
- [ ] B. Contact Lenses
- [ ] C. Geriatric or Low Vision
- [ ] D. Pediatrics
- [ ] E. Full Scope or Comprehensive Care
- [ ] F. Vision Training or Therapy
- [ ] G. Sports Vision
- [ ] H. Pre. & Post. Operative / Pathology
- [ ] I. Other __________________________

14. It is important to understand your practice history. Please indicate any and all previous practice modes.

**SELF EMPLOYED**
- [ ] A. Solo Practice
- [ ] B-1 Shared-Expense w/OD
- [ ] B-2 Shared-Expense w/MD
- [ ] C. Partnership w/one or more ODs
- [ ] D. Partnership w/one or more MDs
- [ ] E. Franchise Owner
- [ ] F. Other __________________________

**EMPLOYED**
- [ ] G. Associateship
- [ ] H. Ophthalmologist / Medical Clinic
- [ ] I. HMO
- [ ] J. Government / Military
- [ ] K. Chain or Corporate
- [ ] L. Other __________________________

15. How would you recommend your current and previous (if applicable) practice modes to other optometrists? (please enter letter from selections below if applicable)

- A. Strongly Recommend
- B. Recommend
- C. Discourage
- D. Strongly Discourage

**SELF EMPLOYED**
- _____ Solo Practice
- _____ Shared-Expense w/OD
- _____ Shared-Expense w/MD
- _____ Partnership w/one or more Optometrists
- _____ Partnership w/Ophthalmologists
- _____ Franchise Owner
- _____ Other __________________________

**EMPLOYED**
- _____ Associateship
- _____ Ophthalmologist / Medical Clinic
- _____ HMO
- _____ Government / Military
- _____ Chain or Corporate
- _____ Other __________________________
16. What is the population of the city or town in which you practice?

[ ] A. Less than 10,000
[ ] B. 10,000 to 24,999
[ ] C. 25,000 to 49,999
[ ] D. 50,000 to 74,999
[ ] E. 75,000 to 99,999
[ ] F. 100,000 to 199,999
[ ] G. 200,000 to 300,000
[ ] H. More than 300,000

17. Which of the following is best representative of your 1998 NET annual PRACTICE income?

[ ] A. Less than $20,000
[ ] B. $20,000 to $29,999
[ ] C. $30,000 to $39,999
[ ] D. $40,000 to $49,999
[ ] E. $50,000 to $74,999
[ ] F. $75,000 to $99,999
[ ] G. $100,000 to $150,000
[ ] H. More than $150,000

18. How many days did you practice or see patients in 1998? _______

19. Of your patient visits in 1998, how many were comprehensive exams? _______

20. Of your patient visits in 1998, how many were new patients? _______

FOR QUESTIONS 21 - 25 PLEASE SELECT A LETTER FROM THE PERCENTAGES BELOW

A. Less than 10%
B. 10% to 25%
C. 26% to 50%
D. 51% to 75%
E. 76% to 100%

Of your patients seen in 1998, please estimate:

21. What percentage received a basic visual examination? _______

22. What percentage received contact lens fits or care? _______

23. What percentage received vision training or therapy? _______

24. What percentage did you treat for disease? _______

25. Of those presenting with disease, what percentage was referred for treatment? _______

26. Are optometrists permitted to prescribe oral medications in your state? please circle YES NO

27. If yes, for what percentage did you prescribe oral therapy?

[ ] A. Less than 1%
[ ] B. 1% to 2%
[ ] C. 3% to 5%
[ ] D. About 10%
[ ] E. About 15%
[ ] F. About 20%
[ ] G. More than 25%

28. How would you rate your ability to get or take vacation time or time off?

[ ] A. Very Good, Time Off Whenever Wanted
[ ] B. Good, Time Off When Needed
[ ] C. Fair, Sometimes Get Time Off When Needed
[ ] D. Poor, Seldom Get Time Off When Needed

29. In regard to practice management, how would you describe your control over your practice, such as hiring and firing of employees, bookkeeping, fees, advertising, etc.?

[ ] A. Very Good, Total Control
[ ] B. Fair, Partial Control
[ ] C. Poor, No Control
30. In regard to patient management, how would you describe your control over your practice, such as time spent with patient, contact lens fits, referrals, etc.?

[ ] A. Very Good, Total Control  [ ] B. Fair, Partial Control  [ ] C. Poor, No Control

31. What benefits are offered to you as a practitioner which have no affect on your take home pay?

[ ] A. Health Insurance  [ ] E. Disability  [ ] G. Other
[ ] B. Dental Insurance  [ ] F. None
[ ] C. Life Insurance  [ ] D. Retirement Plan

32. How satisfied are you with your CURRENT practice setting?

[ ] A. Very Satisfied, No Desire To Change  [ ] B. Satisfied, Change Is Always A Possibility  [ ] C. Unsatisfied, Considering Changing Mode Of Practice

33. If you had to do it all over again, would you enter the field of optometry?


34. With the future trends in mind, would you recommend the field of optometry to your son or daughter?


Thank you once again for your time and effort in completing this questionnaire.

COMMENTS:

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