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Speice 3A

Independent Study and Mentorship

18, October 2018

Pediatric Optometry and Behind the Scenes

Assessment 7- Research

Date: October 18, 2018

Subject: Pediatric Optometry and Medical Professionals with Children

Works Cited:

Brunk, Doug. "Tips for managing dermatologic surgery procedures in children." *Pediatric* 

News, June 2018, p. S28+. Academic OneFile,

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Pediatric optometry, daily disposables, and napping." Optometry Times, Apr. 2017, p.

38. Health & Wellness Resource Center,

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Assessment:

Inspired by the first interview with Dr. Young, this week's research was geared

toward pediatric optometry and how medical professionals work with kids. Generally,

children often become more nervous, stressed, and uncooperative when in the doctor's

office. The intention was to find articles that described not only the specifics regarding pediatric optometry, but also how medical professionals deal with difficult children in the office.

After interviewing Dr. Young and hearing how passionate she is about pediatric optometry, the article found was centered around that topic. From the reading, it is clear that working with kids can be challenging yet rewarding. As long as the optometrist has the right reasons for helping children see, that concept changes the environment completely. Katherine Schuetz, an optometrist, says that she knows her personality and is able to implement that in her work with kids. Ideally the goal is to help the children relax more, all while trying to make their experience fun and feel less like a "doctor's appointment". Hearing from this interview piece with Dr. Schuetz, it is evident that she is experienced. Having started her own practice "Little Eyes", she is aware of all the components that go into starting up a new business.

After reading more about how pediatric optometrists help kids on a daily basis, this assisted me in realizing that I should and would not like to be a pediatric optometrist.

Although kids can be energetic, exciting, and rejuvenating, they are also a lot of work. Being well aware of my personality, I know that I am probably not capable of working with kids, in a professional occupation. Personally, I think I would enjoy working with adults similar to my age, simply because those types of individuals will most likely be more relatable and easier to work with.

In addition to mentioning children in the article, Dr. Schuetz stated that pediatric optometry differs from adult optometry in that typically contact lenses are not prescribed to

kids. This is because young children are more playful and dirty than the average adult. With kids, contacts are an additional responsibility that can be difficult for either them or their parents to keep track of. This information ties in with the first interview conducted, since Dr. Young gave a tour of her office. She stated that she is extremely proud of her kids selection of glasses. Since many other offices usually focus only on simple adult frames, Dr. Young wanted to make sure that a fun and large selection of frames were given to the kids to choose from. This truly makes the experience more relaxing and enjoyable for the children because they get to have the freedom to choose.

The second article read was based on how medical professionals deal with kids, especially before a procedure is performed. The key to helping kids feel at ease in the doctor's office is to make the doctor seem as less intimidating as possible. By sitting eye level and engaging in personal conversations, kids are more easily distracted and less likely to panic or become anxious. This is important for kids because sharp objects, blood, or loud and new machinery may frighten a child and cause them to resist from the doctor. A simple stuffed animal or sticker may help the kid and result in a happier patient. In optometry, since surgeries are not conducted, the likelihood of a child lashing out on the doctor is slim. These types of behaviors would most likely be more common in an opthamologists' office.

The reason this article was selected as part of this assessment was because I wanted to learn more about how doctors work with young children. There are certain techniques and tricks doctors use, in order to make the kid feel as comfortable as possible. For me, this is interesting to know because I get nervous when getting shots or visiting the dentist's office. From personal experience, trusting a professional to perform a procedure can be

intimidating and nerve-racking. Now knowing the various ways doctors help calm their patients, this information may be beneficial for me, if I decide to pursue optometry. Even though I may not work with children in the future, these ideas can still be applicable to adults in optometry.

With this information, I am able to realize that pediatric optometry may not be the medical branch I want to invest in. Instead, it is possible that something such as family or adult optometry may be more appealing. This research, from a reliable optometrist, has shown that a lot of work goes into working with children, especially in the medical field. Even though I may not be interested in working with children, this information is still beneficial and makes me appreciate what medical professionals deal with, when working with young kids. As the ISM journey continues, the goal is to schedule another interview so a Research Assessment does not need to be written. However, if another must be conducted, the research will most likely be centered around the Original Work ideas that are proposed. This may include topics such as adult optometry, diabetic optometry, or even lens specifications.

Annotated Article 1

**Annotated Article 2**