A DAY IN THE LIFE: GLAUCOMA SPECIALISTS AND FACULTY



GT asked three ophthalmologists to share insights into their roles as clinicians and educators.

WITH SHIVANI KAMAT, MD; IRFAN N. KHERANI, AB, MD, FRCSC; AND TIMOTHY TRUONG, MD

Glaucoma Today: Describe your current position.

Shivani Kamat, MD: I am a glaucoma and cataract surgeon at the University of Texas Southwestern Medical Center in Dallas, where I lead the glaucoma service and the glaucoma fellowship program. I oversee the clinical, surgical, and educational aspects of glaucoma care, while mentoring and training future glaucoma specialists—my favorite part of my job! I also work to implement innovative technologies into our glaucoma service and expand academic and research opportunities that strengthen our program's impact locally and beyond.

Irfan N. Kherani, AB, MD, FRCSC: I am a surgical glaucoma specialist with a full-time academic appointment in the University of Toronto's Department of Ophthalmology and Vision Sciences. My clinical practice is based at University Health Network and Kensington Eye Institute, complemented by a part-time practice at Trillium Health Partners and the Prism Eye Institute, all located in the Toronto area. In addition to patient care and advanced glaucoma surgery, I am deeply involved in education through the Glaucoma and Advanced Anterior Segment Surgery Fellowship and the glaucoma residency program. In this role, I lead the program's didactic, clinical, and surgical training. I also direct several investigator-initiated clinical research projects, thereby ensuring that my work integrates clinical innovation, teaching, and scholarly contributions.

Timothy Truong, MD: I am a comprehensive ophthalmologist and glaucoma specialist at Alameda Health System, a network serving the East Bay region of the San Francisco Bay Area. I am one of the site directors for the resident clinic at Highland Hospital in Oakland, California, the capstone of the California Pacific Medical Center ophthalmology residency program and where our residents first engage in intraocular surgery.

GT: What drew you to ophthalmology and, specifically, to glaucoma?

Dr. Kamat: I chose ophthalmology because it offers one the unique privilege of directly affecting a patient's quality of life by preserving and restoring their vision while also blending medicine, surgery, and advanced technology. Within ophthalmology, I was drawn to glaucoma because it presents both an intellectual challenge and a chance to foster deep, long-term relationships with patients as we navigate a chronic, progressive disease together. The complexity of balancing medical, laser, and surgical treatments combined with the opportunity to innovate

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and improve care delivery on both individual and population levels makes glaucoma a field where I feel I can make the greatest impact as a clinician, educator, and leader.

Dr. Kherani: I was drawn to ophthalmology because of its unique combination of microsurgical precision, rapidly advancing technology, and potential to have a profound effect on a patient's quality of life. Among its subspecialties, glaucoma appealed to me the most because of its complexity and nuance: It is a disease that requires both long-term clinical stewardship and technical surgical expertise. The opportunity to preserve sight through delicate surgeries, while also navigating evolving therapies and devices, provided an intellectually stimulating and deeply rewarding career path.

Dr. Truong: I grew up with exposure to a whirlwind of languages: Teochew and Vietnamese with the elders and Cantonese and Mandarin with my parents. Medicine became yet another language where I could explore the next *-itis*. While this academic intrigue was important, I was drawn mainly to the opportunity to connect with patients and deliver high-quality care that could affect their lives in a meaningful way. As an undergraduate, I learned compassion and empathy while caring for unhoused communities in Berkeley, California, through The Suitcase Clinic. Later, I observed large health disparities and unmet needs for specialty and ophthalmic care while leading the ECHO Free Clinic and researching ocular trauma in the Bronx, New York. I carried these lessons forward as I pursued my training in ophthalmology.

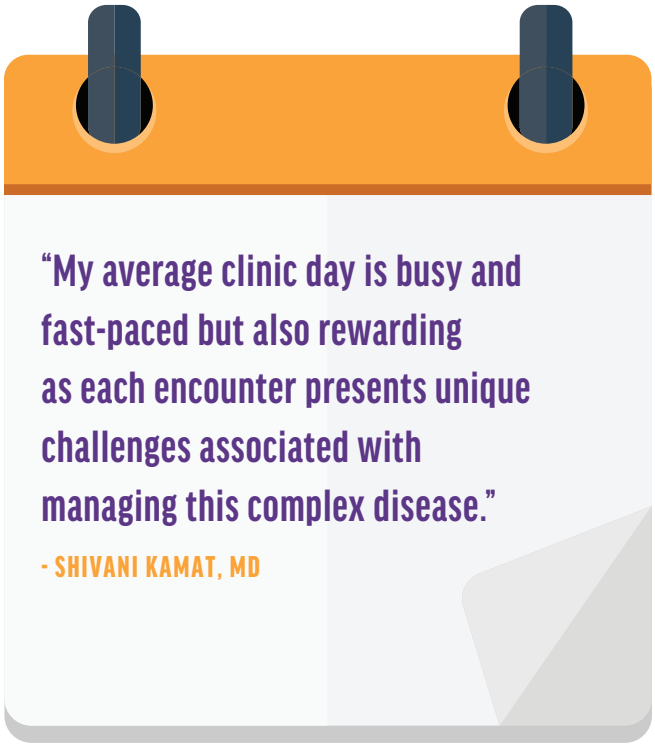
During residency, my most cherished relationships were with patients with neovascular glaucoma who often presented to our emergency rooms with undiagnosed medical issues and significant socioeconomic barriers to care. I would perform careful examinations and offer a complete treatment plan that included not only the initial intravitreal injection, laser, and surgical options but also the important connections to social services, insurance, and primary care. Helping to bring these patients from times of crisis to stability has been one of my most valued career experiences. Hoping to further develop the skill set to care for the complex surgical demands I see in my community, I completed a glaucoma and anterior segment fellowship at the Moran Eye Center in Salt Lake City. The entire field of ophthalmology continues to intrigue me, but caring for patients with glaucoma and complex pathology remains the most challenging and rewarding part of my job.

GT: What is a typical day in your life?

Dr. Kamat: A typical day in my life starts around 8 AM when I begin seeing a patient population made up predominantly of those with advanced and surgical glaucoma. My average clinic day is busy and fast-paced but also rewarding, as each encounter presents unique challenges associated with managing this complex disease. I usually have fellows working alongside me, and I value the opportunity to teach them not just the fundamentals of glaucoma care but also the practical decision-making that comes with real-world cases. I have 1 surgery day per week, which consists of a variety of cases ranging from combined phacoemulsification and MIGS to more advanced incisional glaucoma surgeries. Around 5 PM, my clinical responsibilities wind down, and I shift gears quickly to get home to my husband, son, and two fur babies, all of whom are the joyful anchors of my day outside of work.

Dr. Kherani: My days are wonderfully varied, which is one of the aspects of my career that I greatly value. I spend 2 days per week in clinic, where I see a wide range of patients with complex cataracts and glaucoma while also teaching medical students, residents, and fellows, whose presence makes the clinical environment dynamic and rewarding. I typically devote 2 days to surgery, where I perform the full spectrum of glaucoma and cataract operations, including MIGS, minimally invasive bleb surgery, traditional glaucoma surgery, and complex anterior segment procedures. I reserve 1 day each week for academic pursuits, which include formal teaching, educational planning, research, and catching up on clinical work. I am an early-to-rise and early-to-finish physician, and whenever possible—often 3 days per week—I make it a priority to pick up my son from school and spend the evenings with my family.

Dr. Truong: Part of the joy and challenge of working in a county system and residency training program is that my days are often unpredictable. I may start my morning by seeing patients at one of our satellite clinics, encountering the typical "Dr. Truong cataracts" that my staff have come to know (bilateral, hand motion vision only, and hypermature) and a flurry of intravitreal injections, laser treatments, and other general ophthalmology patients. I then have a quick lunch before running to work with our cornea specialist to perform a complex anterior segment reconstruction, secondary IOL placement, and tube revision. I end my day at the resident clinic, where I triage urgent glaucoma cases and traumatic injuries and hopefully leave a pearl or two for the learners on rotation. In an average week, I spend 3 days in my clinic seeing patients, 1 day at the resident glaucoma clinic, and 1 day in the OR.



***GT*: What advice can you offer to residents or fellows who are determining their career paths?**

Dr. Kamat: Keep an open mind! Try to learn as much as you can on each rotation as you will never regret the knowledge you gain. Choose a career path that not only excites you intellectually but also aligns with the kind of lifestyle you desire and impact you want to have on the field. Every subspecialty in ophthalmology is rewarding, but it is important to reflect on what energizes you the most, whether that is longitudinal patient care, surgical complexity, research innovation, or teaching. Seek mentors who inspire you and be open to their guidance; they will often become your friends and colleagues for life! Remember that your career is a marathon, not a sprint. Choose a sustainable path that will fuel your passion, challenge you to grow, and allow you to make a meaningful difference in both your patients' lives and the broader field of ophthalmology.

Dr. Kherani: My advice is to pursue a career path that excites you intellectually and sustains you emotionally because the practice of medicine is a lifelong journey. It is important to identify a niche where your skills, values, and passions intersect—whether in surgery, research, education, or leadership—and to pursue that path with dedication. Seek out mentors who will both challenge and support you and learn from them, not only about clinical excellence but also about professional resilience. Above all, remain adaptable and open to growth: Medicine will continue to evolve, and your career should evolve with it.

Dr. Truong: One piece of advice that I found incredibly helpful is to enter each rotation of medical school, residency, or fellowship with specific goals in mind such as, "I want to do (insert skill) like a (insert subspecialist)." For example, you should want to suture lid lacerations like an illustrious oculoplastics specialist, ponder refractive outcomes and tomographic maps like a cornea specialist, or use a gonioscopy lens to find the etiology of an IOP spike like a glaucoma specialist. I strongly believe that, while you may gravitate toward one specialty or another, there is always more to learn and improve upon. The skills you pick up will inevitably make you a better overall clinician and ophthalmologist. These lessons from your teachers and mentors throughout your training will form the foundation on which you build your practice and career, so be sure to write them down while you still remember! ■

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