

MEET OUR DOCTORS

Violeta Radenovich, M.D., M.P.H. is the founder and owner of *The Children's Eye Center of El Paso*. Serving the families of El Paso since 1996, she is El Paso's ONLY female U.S. Residency and Fellowship trained Pediatric Ophthalmologist who is also American Board Certified.



After earning a Master of Public Health degree from the University of Texas Health Science Center at Houston, Dr. Radenovich completed her Residency in General Ophthalmology in 1995. Following completion of a Fellowship in Pediatric Ophthalmology in 1996 she founded *The Children's Eye Center of El Paso*.

Yvette Jockin, M.D. is a Fellowship trained, Board Certified Pediatric Ophthalmologist specializing in the diagnosis and treatment of newborns, infants, and children.



A 1991 graduate of the State University of New York At Buffalo School Of Medicine, Dr. Jockin completed her internship at Maine Medical Center in 1992. Her residency in Ophthalmology was completed at the University Hospitals in Cleveland in 1995. She has twice been a recipient of the *Patients' Choice Award* and has also been honored with the *Compassionate Doctor Recognition*.

Elsie Hearn, O.D. is a Therapeutic Optometrist and is Glaucoma Certified. She graduated from the Illinois College of Optometry in 2001 after earning an undergraduate degree in biology at the University of Central Arkansas.

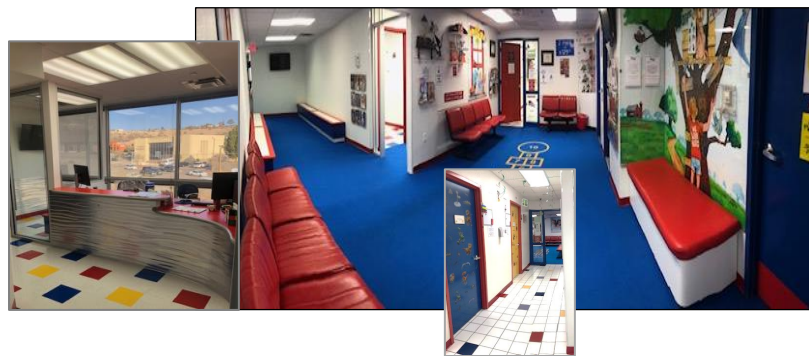


Dr. Hearn specializes in the diagnosis and treatment of pediatric patients. While she has treated children throughout her career, Dr. Hearn began specializing in Pediatric Optometry in 2006.

FOUR NEW HIGH-TECH EXAMINATION ROOMS ADDED ENHANCES CARE - MINIMIZES WAIT TIMES

Dr. Violeta Radenovich recently announced the addition of four high-tech exam rooms. "Since our inception in 1996, our goal has been to provide the highest quality pediatric eyecare available anywhere in the world. To this end, all our exam rooms feature the latest technology for diagnosing and treating eye diseases in addition to providing an environment that helps children and parents feel safe and secure. The additional exam rooms will further minimize wait times as we continue to add staff to ensure the highest level of patient care."

During construction the waiting rooms were enlarged, and significant upgrades made to patient check-in areas and other areas to further enhance the comfort of patients and parents as well as improving operational efficiency.



NEGLIGENT REFERRAL: A LEGAL LIABILITY

When a referral doesn't turn out well for the patient, the question is, "Does the referring doctor have any legal liability?" The short answer is, "Yes," according to the law firm of [Baker & Hostetler LLP](http://www.bakerandhostetler.com).

Citing a recent Texas case, a physician can be found liable for failing to *exercise reasonable care* in making the recommendation/referral. In order to be liable, the referring physician must have knowledge of the referred physician's incompetency or other contributing issue(s) that would preclude a reasonable and responsible physician from making the referral.

The State of Texas allows foreign medical doctors to obtain an unrestricted medical license without completing a U.S. residency in their specialty. If your doctor refers you to another physician, be sure to ask if that physician completed a residency in their specialty in the U.S.

COMMON SUMMER EYE AILMENTS

CHALAZIONS AND STYES

The eyelid glands, known as meibomian glands, normally produce an oily substance that contributes to the natural tears on our eyes. If these glands become blocked, they could develop into a chalazion or a sty (i.e., hordeolum).



A **chalazion** is a large, non-infectious cyst in the eyelid that often takes several weeks to develop. It can be caused by either inflammation of the meibomian glands or it can start as a hordeolum. A chalazion is not painful and usually occurs on the upper eyelid. This is likely because the upper eyelids anatomically have more glands (about 50 versus only 25 glands in the lower lid). Symptoms may include eyelid drooping (ptosis), redness, and on rare occasion lid swelling.

Chalazions typically take weeks to fully develop and depending on the treatment, can take more than a month to go away.



A **hordeolum**, also known as a sty, is often more acute and can be secondary to a bacterial infection of the eyelid glands. Styes are contagious but tend to be smaller, more painful, and more tender to the touch than a chalazion. Symptoms can include eyelid swelling, pain, and tearing. If a sty is present for several weeks, it may develop into a chalazion.

On average a sty lasts one to three days. Once the sty has drained, the healing phase can last approximately 7-10 days.

Treatment

The doctor will first confirm that the lesion is truly a chalazion or sty and not another type of skin lesion. In general, the recommended treatment includes:

- **WARM COMPRESSES:** APPLY A WET, WARM TOWEL ON THE (RIGHT) (LEFT) EYE 4 TIMES A DAY FOR 5 MINUTES EACH TIME.
- **LID SCRUBS:** MIX A COUPLE OF DROPS OF JOHNSONS AND JOHNSONS BABY SHAMPOO WITH WARM WATER. USING A Q-TIP, GENTLY SCRUB EYELASHES TWICE A DAY, THEN RINSE WITH WARM WATER.
- **ERYTHROMYCIN/MAXITROL/BAC1TRACIN OINTMENT:** APPLY OINTMENT TO AFFECTED EYELIDS TWICE A DAY.

How to Prevent Chalazion or Styes

Practicing good hygiene is the best prevention. This includes frequent hand washing and keeping the skin clean in general. Daily cleaning of all eyewear, including contact lenses, is essential in preventing these common eye ailments.

BLOCKED TEAR DUCT (Dacryostenosis)

The lacrimal gland produces tears that help clean and lubricate a child's eyes. Tears from the lacrimal gland go into the eye through tiny ducts along the eyelid and drain through two small openings at the inner corner of the eyelids. From there tears drain into a larger passage from the eye to the inside of the nose called the nasolacrimal duct (tear duct).

What causes a blocked tear duct in a child?

In some babies, the openings into the tear duct don't form the right way, causing a blockage. This can happen in one or both eyes. The blockage may be there at all times or may come and go. Symptoms can include:

- Tears pooling in the corner of the eye
- Tears draining down the eyelid and cheek
- Mucus or yellowish discharge
- Child rubbing the eye, reddening the skin

Symptoms may only appear with the child cries or in cold or windy weather when tears are stimulated. Symptoms of this eye health problem may be like symptoms of other conditions, so diagnosis by a competent pediatric ophthalmologist is recommended.



Treatment

The treatment of this condition will depend on the child's symptoms, age, and general health. It will also depend on the severity of the condition.

The most common treatment for a blocked tear duct is gently milking or massaging the tear duct 2 to 3 times a day.