As we finalize this issue of *Optometric Education*, we are facing many changes in our society, our profession, and even at the journal itself. In the words of the immortal Bob Dylan, the times certainly are “a-changin’.”

The battle over health care reform dominates the news. Opposing views, controversy, and uncertainty cloud the issues. Advocacy to ensure access to comprehensive optometric care as an integral part of health care reform legislation is a high priority. Other legislative initiatives also have the potential to impact the provision of optometric services. The Schakowsky-Hall Optometric Equity in Medicaid Act (HR 2697) seeks to enhance the role of optometry in state Medicaid programs by including optometrists in the definition of “physicians,” as has been previously incorporated in federal Medicare legislation. The National Health Service Corps Improvement Act of 2007 (HR 1884) strives to amend the Public Health Service Act to provide for the participation of optometrists in the National Health Service Corps scholarship and loan repayment programs.

These changes to our national legislation all have the potential to influence the clinical education of our students. The ultimate impact remains uncertain, but in this issue of *Optometric Education*, Fleming, Stroud, and Nowakowski describe a framework for considering strategic approaches to growing patient volume from the unique perspective of the academic setting. Strategic planning and evidence-based decision-making will certainly serve our clinical education programs well, regardless of the changes on the horizon.

More changes have taken place on a profession-wide level. Our profession recently made the historic move to endorse a plan for board certification. Respondents in this issue’s Think Tank feature anticipate the potential impact that board certification may have on optometric education.

Specific to our profession of optometric education, ASCO welcomes a new leadership team. Dr. Melvin Shipp took the helm to serve as president of the association in June. Readers can learn more about Dr. Shipp and his vision for the organization in this issue’s Focus on the President.

Our educational philosophies continue to shift away from memorization to embrace the development of critical thinking skills and clinical reasoning skills that can be applied in the patient care setting. These are skills that will serve our students long after graduation and skills that set the foundation for the life-long learning required to remain current in contemporary optometric practice. This change is embraced and described in a guest editorial by Dr. José De Jesús.
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One of the changes I have worked to incorporate in my role as editor of the journal has been to introduce a new article format, the teaching case report. This article format is designed to produce publications that can be used as teaching resources for our readers. The case presentation format is structured so that it can be used for different curriculum levels and in different teaching and learning settings, ranging from small group discussions to the classroom. This edition of the journal includes our third teaching case report, presented by Denial and Hendricks.

We have all seen the tremendous changes taking place in our methods for communication and dissemination of information, first through e-mail and now through other forms of Web-based technology. This issue’s ASCOTech column describes the changing role of social networking in health care education and provides new insights into ways to utilize the latest technology.

Despite all of these changes, one thing seems to remain constant: the special relationship that forms a bond between students and faculty. Dr. David Damari reminds us of this constant when he shares fond memories of his best day in optometric education.

I hope you enjoy this issue of the journal, and I hope it gives you some new perspectives on the “changin’ times” in which we live.

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