



Vision With Attitude

Medicals International

Experienced to Handle Another War

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- **Launching the Biomedics Evolution in Lebanon, Kuwait & KSA**
- **Medicals International is in the process of establishing an office in the Islamic Republic of Iran**
- **Medicals International proudly receives the "Award of Best Service" from Ellex.**

During the first days of war in Lebanon, it was incomprehensible for me to use the word war and my wife was resenting how TV stations and other Media are utilizing mottos such as WAR on LEBANON. We thought it was rude and it cannot be possible, the country is boiling with summer energy, we received friends from various countries and were expecting more. Colleagues from other offices and suppliers are to visit and the festivities schedule at Baalbeck Roman Temples and Beiteddine are full of wonderful events to go to. July was booked with business and leisure activities and we were caught with this nasty war by surprise.

It was not days, however, before all of us, in Beirut team especially, and throughout Medicals, adapted to the new situation and started thinking on how to come out of this forced-on-us war successfully and safely.

Today I can report that Medicals Beirut, with the help of other neighboring subsidiaries and affiliates, was able to maintain a situation of almost "business as usual". We ensured that special orders are attended to and shipments were either taken by hand to Syria or delivered to other offices through Damascus office and vice versa. We are attending to customers queries daily, delivering goods, completing our

newly set routine business cycles to ensure all clients who are still working and not hit by the terrible war are visited and attended to their needs. We are trying to reach our customers by phone or any other mean to ensure that they are safe and sell them when possible.

Yes, it is terrible to live through war again, however it is rewarding for all of us to see customers & suppliers calling and checking on our well being, offering help, being passionate when enquiring and showing us only a beautiful sense of compassion and affection. It is truly pleasing to see that our team at Medicals is made out of guerillas who can make it anytime. It is truly comforting to realize that even if our sales target in Lebanon get affected the rest of the offices are working double to make up for possible loss of business in Beirut office so our well being and our suppliers' goals are both attended to.

Medicals International, in its 12th year of history, has lived through several wars in the region and I can say that we have built some experience. In 1996, the very similar war in Lebanon pushed us to open our second operation in Dubai earlier than planned. The Iraqi war and the troubles in Kuwait, Saudi Arabia (as we were initiating our business), the horrible attempts in Jordan and other countries, strengthened us and



committed us more to the countries we serve. As well, the bond among team members and their dedication to serve their business partners and the organization as a whole proved to us that we could do it even in harder days.

If we have to live through wars that seem inevitable in this part of the world, I believe we started having to accept it empowered by your dedication, compassion and the very positive attitude of our team members and commitment of customers and partners.

Thank you all for being there during hard days. Medicals International is committed to you. We will go through this difficult time together, I promise.

Most sincere regards,

Your partner and friend,
Walid G. Barake,
President and Founder.

How Well Integrated Are the Ellex Integrated Lasers?

Historically, lasers – especially ophthalmic ones – used to be bulky and space occupying. Fortunately, with the advancements in physics generally, and in laser technology specifically, allowed major reductions in size.

The idea of having small user-friendly laser equipment has been welcomed by both, ophthalmic professionals as well as patients. Major breakthroughs have been associated with diode, YAG and Excimer lasers. Yet the biggest challenge holds still for the photocoagulators. The reason is that size and configuration play a major role in having them stable.

Solid state green lasers are most appreciated for their pulse to pulse and across the same pulse stability. Such stability is bound to keeping a special and precise temperature gradient in a manner that each cavity component is operating at its optimal temperature.

Ellex, with a lot of wit and experience, were able to condense the size of the cavity to smaller than a cigarette box while being still able to maintain the required temperature



The Integre Green Laser

balance. The Ellex Integration concept went beyond size. The TEC miniature cooling technology not only helped in reducing the laser cavity size but also allowed having it quiet. The use of an optical shutter and a static color distortion free filter allowed an even quieter configuration.

In addition, an array of other measures

made the overall laser function a pleasant experience to both the patient and the doctor. Overall thinness of the laser arm, the thin profile of the power supply, the goose-neck fixation lamp and the non-obstructing delivery objective, allows the user to establish the comforting eye contact with the patient. Ambidextrous controls, optimal working distances, as well as the comfortable rubber elbow rest make using the laser a joyful experience.

The Ellex integrated lasers best rest on the patented wheel chair stand. Many clinic patients are diabetic and most likely do have feet problems as well. It is not rare to have a patient coming in on a mobile wheel chair. Having this particular patient treated from the convenience of his chair is a blessing.

Noise and size reductions, ease of use and functionality associated with no compromise on efficiency, made those units favorite for the in-clinic set up.

Mohamad Zaatari;
Sr. Product Specialist-
Medicals International, KSA.

1st Astra World Congress

The first Astra world congress was held in the inspiring city of New York, under the theme of "Get Inspired".

During 3 days, on the 6th, 7th and 8th of April, 2006, around 80 well renowned speakers, such as Prof. Tomas Albrektsson, Prof. Jan Lindhe from Sweden, Prof. Wilfried Wagner, Germany, and Prof. Dennis Tarnow, USA presented their latest clinical and experimental research to more than 1600 dentists who came from 23 countries to participate in this event.

A group of 10 Lebanese dentists had the opportunity to participate in this major event and had very positive feedback.

The subjects discussed involved bone regeneration, soft tissue sculpturing, the Osseo speed surface and its excellent results, esthetic considerations during immediate implantation, biological width on different implant materials, and other interesting subjects.

A large number of candidates were nominated for the Astra Tech Scientific Award for research in "Tissue Integrated Prostheses." It wasn't an easy task for the committee to select the winner, but after intense discussions the committee decided to share the award among three young, promising, clinically oriented scientists; Nikolai Attard, Malta, Reva Barewal, USA,



Ghada Achkar, Dr. Elie Azar Maalouf, and Dr. Fatme Hamasni

and Andreas Thor, Sweden. The winners received their awards at a ceremony during the congress and they also got a personal greeting from Prof. Per-Ingvar Branemark from his Institute in Bauru, Brazil. The Scientific Award Committee included Prof. Per-Ingvar Branemark, Sweden, Prof. George Zarb, Canada, Prof. Tomas



Dr. Kamil Rihani & Dr. Amine Choueiry

Albrektsson, Sweden, and Prof. Magnus Jacobsson, Sweden.

The exhibition presented the new products that Astra is planning to launch, in addition to different areas: poster presentations, training and education, research and development where you can "meet the inventor", laboratory demonstrations, Cresco System, clinical research....

Big thanks are extended to Astra team who worked hard to prepare such an organized event and for their help at all times.

Looking forward to see you in the second Astra world congress in 2008, in Washington.

Ghada Ashkar;
Sr. Territory Manager, Dental
Medicals International- Beirut



Right to left: Pr. Antonio Berberi, Dr. Bassam El Bourji, Dr. Claude Rahayel, and Dr. Elie Stambouli.

SEIKO: A Ground Breaking Technology

It is not very often that one can truly describe technology as ground breaking, but this is most certainly the case for SEIKO 'internal design' progressive lenses. This technology was first patented by SEIKO in 1997 and they have been refining it ever since.

The most significant feature of SEIKO P-1SY progressive lenses is that the progressive surface is worked on the surface of the lens nearest to the eye, not the front. This means that the field of clear vision for the

wearer is increased by about 30% when compared with front surface design progressive lenses. The reason for this is that the 'active' surface is, on average, 3mm closer to the wearer's eye. In addition to widening the field of vision, P-1SY lenses also reduce distortion when looking through the edge of the lens.

As you would expect from the specialists in high index lenses, SEIKO offers the P-1SY lenses in 1.74, 1.67 and 1.60 indices meaning that they can be up to 50% thinner than

ordinary progressive lenses. The lenses are MAR coated as standard and always benefit from the new Super Clean Coat which makes the lenses resistant to grease and dust keeping them clear and vision sharp. In addition the complete range of P-1SY lenses absorb up to 395nm UV. For further information on SEIKO P-1SY internal design lenses contact Elyse El-Choueifaty at echoueifaty@medicalsintl.com ■ David Nicoll- International Sales, Seiko

Why To Choose Biomedics Evolution?

Patient satisfaction with refractive correction is critical, irrespective of the correction modality. In contact lens fitting, too often, success is rated according to the fitter's perspective, rather than the subjective success from the patient's angle.

Now, through detailed ocular aberrometry assessment, combined with innovative manufacturing techniques, the prospect of incorporating this form of advanced optics into a contact lens is now a reality. The

Biomedics Evolution is born!!

The Biomedics Evolution combines:

- 1) Front aspheric curve that will provide your patients with a crisper, clearer and sharper optics. (To get a perfect retinal image the aberrations of the eye and the contact lens need to be corrected.)
- 2) Patented round edge technology; 20% thinner than old Biomedics 55 design; this treatment enhance patient overall satisfac-

tion .

- 3) Lenticulated parallel carrier which allows better lens insertion and removal, even at low powers.

Biomedics Evolution assures you total patient satisfaction. It's your lens of choice.

Mireille Gemayel; Associate Sales Manager
Medicals International- Dubai

What Can The Fitter Do To Ensure Patient Gets Maximum Comfort From Their Rose K Lenses ? By Pr. Paul Rose

On many occasions over the years I have been referred keratoconus patients by Ophthalmologists as a last ditch attempt to see if I can possibly get them to tolerate contact lenses before the Surgeon proceeds with a corneal graft ,as for most Surgeons a graft is never an option ,until contact lenses have been eliminated as a possibility.

I have found that in a large percentage of these cases, by taking time to communicate with the patient and to get an accurate Rose K lens fit , these patients can often succeed with lenses whereas they have failed in the past, often on several occasions.

So what are the most common reasons that I see, which cause the patient to fail with their Rose K lenses.

Firstly fitting issues:

1. Edge Lift Insufficient

This would be the most common reason for a poorly fitted keratoconus lens. Fitters often achieve a very satisfactory central fit but ignore the peripheral fit and simply order a Rose K standard lift. The correct amount of edge lift has a huge impact on the comfort , location and movement of the lens. It is more important than an accurate central fit. Remember with the Rose K lens

you have a huge range of edge lift options, ranging from 1.2 decreased lift right through to 3.0 increased lift.

NB.The standard decreased lift is 0.5 whereas the standard increased lift is 1.0.

2. Ignored Corneal Astigmatism

Many keratoconus patients have with the rule astigmatism outside of the cone. ie their cornea is flat around the 180 meridian. This causes the lens to ride lower, be less stable and comfortable, and often produces 3 and 9 o'clock staining. By simply ordering a Rose K toric periphery , where only the last 1mm of the lens is toric, these problems can often be overcome. These lenses are very easy to fit and a trial lens is not required. Simply fit with a spherical Rose K lens, and order a toric periphery to loosen the fit at the edge of the lens in the 180 meridian.

3. Reluctancy to Try Piggybacks

About 10 to 15% of patients will not tolerate rigid lenses onto their eyes no matter how perfect the fit is. These patients however can often wear piggyback lenses without any major problems. I estimate that by

using a soft lens under the Rose K lens, that the sensation of the Rose K lens is reduced by over 50%. If a patient is not able to build up reasonable wearing time with their Rose K lenses over the first month , I will inevitably refit them with a piggyback lens using a Rose K design over the top of a disposable soft low minus lens.

4. Reluctance to vary the diameter

Diameter is critical in achieving the correct fit. Even though the Rose K trial set normally comes in an 8.7mm diameter, this will typically not optimally fit more than about 60% of cases. Correct diameter is critical for correct location and movement. A diameter change as little as 0.3 mm can have a significant affect on the performance of a Rose K lens.

In the next newsletter I will be covering what the patient can do themselves to help ensure the ongoing success with their Rose K lenses.

Paul Rose
B. OPT, B. SC, FNZSCLP

Activities by Medicals International

Rose K Promotional Tour by Dr. Paul Rose

Medicals International was proud to hold a series of seminars on the Rose K lens by Dr. Paul Rose in most of our offices. All gatherings proved to be highly successful awith very attentive audience.

Paul Rose was educated at the University of Auckland New Zealand, graduating in Optometry in 1967 and again in 1969 with a Bachelor of Science in Psychology and Mathematics. In 1998 he was elected as an inaugural fellow of the New Zealand Society of Contact Lens Practitioners. He served on the council of the NZSCLP for a period of 10 years including a term as President.

Dr. Rose has presented numerous papers at conferences throughout the world on a variety of subjects including keratoconus, aphakic RGP fitting for babies, case contamination, PRK and dry eye, Intraocular pressure post PRK, RGP lens fitting, toric RGP fits, Piggyback fits and several other topics.

He has lectured at the University of Auckland on his speciality, keratoconus and RGP fittings, and was on the advisory panel for Johnson and Johnson.

He has practiced Optometry in Hamilton New Zealand for the last 35 years, specializing in contact lenses, particularly keratoconus and post graft ,and is the designer of the Rose K lens which is now fitted throughout the world in over 50 countries.

Paul has served on numerous boards of Optical companies and is currently a director of Optical Holdings Ltd and Visique.



Dr. Paul Rose lecturing



The audience in KSA



The conference in Jordan



Dr. Rose with MI team



Crowded audience in Kuwait



Activities by Medicals International

Syria

Syrian Ophthalmic Society

The SOS meeting in Syria this year was one of the most interesting and distinguished, especially for Medicals International, due to the activities it included. With a booth displaying live surgeries on an LCD screen, a qualified personnel, and the honourable participation of Dr. Nada Jabbour from Lebanon and Dr. Hazem Hamzawi, coming espe-

cially for the SOS, Medicals booth was very active. The team organized several lectures by professionals and the biggest event was the live surgery transmission over the satellite in the presence of our Surgicals Sales Manager in Syria, Tony Abou Abboud.

13 Phaco Surgeries in 1 day

Upon the dear request of Dr. Ghazwan Merhi & Dr. Tarek Moussa, our team in Medicals International Syria, Tony Abou Abboud and Shaker Shaker have gladly responded to demonstrate the cold phaco technology using the Swisstech machine with the new CMP sophisticated software.

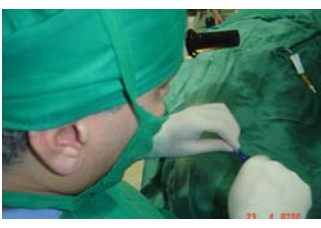
13 successful live phaco surgeries were performed in the same long day by Dr. Merhi and Dr. Moussa, with the assistance and guidance of MI team and in the presence of 9 doctors in Hama Hospital. The pictures below will reflect somehow how successful and integrated the event was.



MI stand with most of the team



Nicolas Aramouni, sales manager CL with clients



Dr. Tarek Moussa loading the Aquasense lens to inject



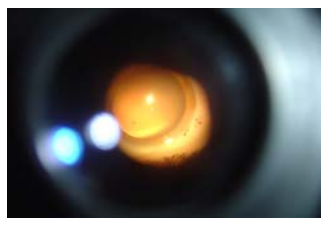
Live Phaco surgeries



SLT lecture by Dr. Hazem Hamzawi



Shaker & Tony with Dr. Nada Jabbour at MI stand



The result after CMP surgery, showing the purity of the lens.



Dr. Merhi & Tony Abou Abboud

Lebanon

Medicals International is pleased to announce the installation of the new AstraScan XL Excimer laser from Lasersight at the Canadian Eye Center, along with the AstraMax, the only elevating three dimensional stereo topography unit in Lebanon. This high-tech corneal diagnostic unit employs 3 camera systems able to measure corneal elevations and map the cornea from limbus to limbus, on three axes as well as it can determine corneal thickness optically and detect any corneal abnormalities.

The Astramax Diagnostic unit enables the surgeon to perform customized topography guided laser treatments.

The fine details of the patient corneal topography are measured using the AstraMax topography unit enabling full coverage of the cornea. The data is then transferred automatically to the computer, where the

doctor will plan the surgery accordingly and choose the best treatment parameters customized for each patient.

After the custom ablation planning is complete, treatment data is loaded onto the AstraScan XL Excimer Laser for the surgical procedure.

The latter, having a Gaussian beam of less than 0.5 mm coupled with fluence less than 100mj/cm2 ensures the most accurate application of the treatment. The fine and high vertical and horizontal resolution position the laser as favorite for customized treatments.

On the other hand, the fast repetition rate and the blistering fast eye tracker together guarantee that customized treatments are not possible, but also possible with very short treatment times.

With these special features, the AstraScan is

able to maintain the cornea's natural PRO-L A T E shape, and preserve smooth corneal surface and thinning, by removing only the necessary tissue with minimal energy and small spot size to the cornea leading for better clinical outcomes.

Medicals International is proud to be the chosen partner of the CEC for the second time. Wishing CEC more and more success. ■ Richard Bechaalany, Service Engineer- Medicals International



Dr. Maalouf examining a patient, assisted by Richard Bechaalany.



Dr. Maalouf operating the AstraScan

Supplier's Corner; STAAR Surgical AG

Toric ICL; More Than 4000 Lenses Implanted With No Serious Complications



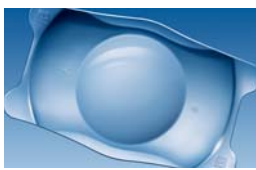
Ongoing follow-up in recipients of the STAAR Toric Implantable Contact Lens (Toric ICL) shows that this phakic IOL continues to provide safe, stable, and accurate correction for moderate to high myopia and astigmatism.

The Toric ICL obtained CE approval in Europe in 2003, was approved for marketing in Canada and in Korea last year, and is currently undergoing FDA review. To date, more than 4,000 lenses have been implanted, and results show the Toric ICL is associated with rapid return of excellent vision, accurate refractive results that are maintained from postoperative day 5 onward, and no serious complications when selected eyes undergo careful preoperative biometry to guide lens selection and to make sure they meet the anatomic criteria for implantation.

"By providing astigmatic correction, the TICL closes the gap in phakic refractive lens surgery. When the anatomic conditions are suitable, it is the ideal device for correcting combined refractive errors in eyes with a thin cornea, even in those with previous excimer laser surgery, and it also has an important role when used in combination with other refractive procedures to enable them to be performed within their respective safety zone," said Dr. Tobias Neuhann from Germany, the first surgeon worldwide to implant the lens in 1999.

The foldable, small incision Toric ICL is a single-piece implant and available in half-diopter increments for both spherical power correction (range, -3.0 to -23.0 D) and cylindrical power correction (range, +1.0 to +6.0 D).

Appropriate candidates for Toric ICL implantation are patients with at least -3.0 D of myopia



accompanied by 1.0 to 5.0 D of symmetrical corneal astigmatism and at least 2.8 mm ACD. The Toric ICL length is chosen based on the white-to-white (WTW) measurement.

The WTW measurement was considered the most critical factor for proper sizing of this implant. Dr Neuhann and others are now using ultrasound biomicroscopy to measure the actual sulcus diameter for better Toric ICL sizing.

Dr. Neuhann reported outcomes for his own TICL series of 84 eyes with myopia ranging from -4.0 to -14.0 D and regular astigmatism between 1.5 and 8.0 D. In that cohort, for which mean follow-up is about 3 years, 92% of eyes have uncorrected visual acuity (UCVA) of 20/40 or better, no eyes have lost 2 or more lines of best spectacle-corrected visual acuity (BSCVA), while about 40% benefited with a 1- to 4-line gain in BSCVA. Those results are similar to those from the 12-month follow-up visit for 106 eyes enrolled in the FDA trial. In that study, UCVA was 20/20 or better in 84% of eyes, 20/25 or better in 94%, and 20/32 or better in 97%.

The Middle East Experience

Dr. Alaa El-Danasoury presented early results of a prospective study at ASCRS San Francisco and concluded that "the Toric ICL is effective, highly predictable and relatively safe in the correction of compound myopic astigmatism with Keratoconus".

With the evolution of corneal topography technology, it has become easier to detect Keratoconus patients or suspicious corneas. This has become of even greater value after a \$7.5M legal decision against a US surgeon. The claim made by one of the surgeon's

LASIK patients who developed corneal ectasia is the largest in US refractive surgery history. His "funny" cornea could have been detected as Keratoconus if proper corneal assessment had been performed preoperatively.

Today, rather than turning away such patients, we can implant a phakic IOL through a small incision without further damaging their

Toric ICL™ for the correction of compound myopic astigmatism in patients with stable Keratoconus

cornea. "Never touch a suspicious cornea" became the rule for Dr. Alaa El-Danasoury a long time ago.

"In my practice in Saudi Arabia, about 30% of refractive patients have some form of Keratoconus or a suspicious looking cornea. This is why I feel way more comfortable using a Phakic IOL. Even to correct low myopia".

Dr. El-Danasoury studied 19 eyes with preoperatively stable topography for at least one year and stable manifest refraction for at least two years with BSCVA of 20/40 or better. At day one, 90% had uncorrected visual acuity of 20/40 or better, climbing to 100% at 6 months. From a mean SE of -7.75 ±4.75D, 70% were within ±0.5D of emmetropia.

Dr. Carlo Lovisolo, Italy, reports similar outcomes with excellent stability with a follow-up of up to 6 years in 25 eyes.

The TICL offers safe treatment for eyes with compound myopic astigmatism with stable Keratoconus.

* T. Neuhann, Ophthalmology Times, Feb. 2006.



Dr. Alaa El-Danasoury

Launching MEACO 2007 Together

I am very happy to have in Vision with Attitude a brief launching of the MEACO 2007 activities that will take place in Dubai from March 29th until April 1st, 2007. MEACO (Middle East African Council of Ophthalmology) will gather all of us under the roof of Dubai Convention Center for the second time on the row next year and for 4 complete scientifically rich days.

I am indebted for a personal friend, Dr. Mohammad Alaa, head of the scientific committee of MEACO 2007, who allowed

us at Vision with Attitude to partner with them in bringing together this launching exercise of the event. Big thanks remain for the founder of this meeting Dr. Akef Magrabi who was able to bring Middle East Ophthalmology to the world scene.

We wish to see MEACO 2007 becoming a true international venue where already 100s of International Speakers are booked to attend and put us abreast of novelties in ophthalmology in all segments and specialties. MEACO 2007 will be as well an industry

venue were exhibitors will gather to show cases of the latest innovation in the ophthalmic field.

We wanted in this note to get you to book this event in your calendar and please communicate with the organizer to ensure your talks are accepted if you wish to speak or your hotel rooms are booked if you are attending.

See you there, ■ Walid G. Barake; President & Founder

Why Doing Preventive Maintenance?

Most machines that we daily use seem to work properly day after the other. However their functionality may not be up to the standard level of manufacturer specifications and performance. In this case, we will not be using our machine at its optimal performance and we will not be getting the best expected outcomes.

Simultaneously, sometimes users may get used, day after day, to a small drift of the performance of their units without noticing minor changes in their general function until time comes when the machine is totally out of order and the repair is mandatory and therefore becomes costly.

Doing regular preventive maintenance and keeping your machine in professional technical engineers' hands, who will be using

special tools and equipments to monitor any drift in the performance; will help alerting you about possible break down of the system in question and possible interruption. As well, doing preventive maintenance will not only reduce the down time of your unit, but also will reduce your repair bills.

We, at Medicals International, recommend that you check your machines regularly and ask our specialized engineers to do the needed preventive maintenance as scheduled by the manufacturer. This will of course result in an optimized performance of your machine and a controlled lesser cost. A typical schedule for preventive maintenance would be once every three months.



For more details, please do not hesitate to contact our representative service engineers available locally next to your practice, or write me directly to head office service department at mkleib@medicalsintl.com Looking forward to receive your requests and offer you our best service.

Michel Kleib; Chief Engineer. Technical Department - Medicals International

Office ID...

Qatar Office

Medicals International – Qatar W.L.L. was established on 30/06/2005 in Doha. The operation started on 10/11/2006 with the issue of our first invoice for Optic Centre. It is really a time to be remembered for us MI – Qatar team.

The operation needs to be fulfilled fast and of course with the best service. We are talking about getting the order from our regional offices with no time and delivering it to our clients in a couple of days. As a start, it was really a big headache, but with the help of all MI regional offices especially from Dubai and Saudi and mostly from our MI – Mother Company, we have managed to surpass successfully this tough period.

Since March 2006, MI – Qatar started to cover a new territory, Bahrain. Our sales team regular visits are now on the run in conjunction with our day to day order deliveries. Nowadays, we are very happy in receiving on a daily basis different kind of calls from our esteemed clientele both in Qatar and Bahrain.

Our logistic efforts were lately supported by a new member who joined us in the position of a delivery officer.

“We at MI – Qatar had since the beginning the Dream of success”. And as we all know success does not come true by itself. It needs lots of daily efforts, cooperation and most of all a belief in what you are doing.

Sure we have started the first mile and will be looking for the million miles ahead.

Thank you for all who made a start to this dream.

CHEERS!!!
Henry Sayegh; Managing Partner

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A Team Member's Point of View

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We Think of The Patient First

When I first came to Medicals International headquarters to apply for a job, I was asked to complete a lengthy employment application form that is usually handed out to every new applicant.

It was the longest Job application I've ever filled !!! Thereafter, I was called for an interview, and then a presentation, and then a second interview, and then a second presentation... And every time that I had "another" interview, I knew that thru this extensive selection process, the company is looking for distinctive individual profiles.

Finally, after a total of 5 interviews, and 2 presentations, I had the honor to meet Medicals' professional team, that in all modesty, I classify as consisting of "class A" employees.

It is fascinating to observe Medicals International growing as fast as it had grown in a relatively short period of time, expanding into several countries and increasing its customer base. This is due to the dedication of the company's management and employees who demonstrated courage and professionalism in introducing the company and maintaining a healthy and honest relationship with its customers.

Being a member of Medicals International continues to give me the ease and comfort of growing within a professional environment that encourages education and skill development amidst this successful growing company.

My experience with Medicals International has been so far both rewarding and pleasurable. I have been with this company for less than half a year. Yet, I've had several training sessions, including two sessions outside Lebanon. I believe there will be additional trainings so as to keep up with the technological innovation, a typical trait of the company.

This is a real investment in me; it gives me pleasure, responsibility, and commitment to deliver my best to the company thru excellent service, great support, and effective engineering expertise for our valuable customers.



By Eng. Richard Bechalany

What's Going On Inside of MI?

Training is always the key for a better development and that is what Medicals International aims at. Within the guidelines of this policy, a series of training and staff exposure took place in the last quarter such as attending the BCLA in Birmingham, and in-house training to our product specialists provided by various suppliers.

BCLA

For the second year, Medicals International was present at the 30th Clinical Conference and Exhibition organized by the British Contact Lens Association (BCLA) on 10-21 May, 2006 at the Hilton Metropole Hotel, Birmingham, UK.

Mireille Gemayel, Rita Chehwane and Joseph Nachawaty attended this meeting, benefiting from the information given during the conferences and were able to witness the launching of a variety of products. We would like to take this opportunity to thank CooperVision for their generous contribution in this event. Rita Chehwane; Sales Manager- Beirut



Medicals team : Mireille and Rita from Beirut Office and Joseph Nachawaty from Kuwait Office in the BCLA, dining after a long fruitful day.

Ellex Sales Training

Our product specialists in the Levant offices attended an in-house training organized by Ellex, a supplier of a broad line of ophthalmic lasers.

The training covered the Sales of Ellex products, and it was provided by the Vice President Sales Greater Europe, Christine Warren.



During the Ellex training provided by Christine Warren

