



Singapore National Eye Centre

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**SNEC ADVANCED SURGICAL TRAINING PROGRAMME
- OCULOPLASTIC SURGERY ROTATION**

PURPOSE AND OBJECTIVES

- a) To provide comprehensive ophthalmic training for advanced trainees.
- b) To ensure the continuing competence of all trained ophthalmologists in managing common oculoplastic conditions.
- c) To upgrade the quality of eye care in this region

PROGRAMME OUTLINE

- a) The duration of training programme is 6 months.
- b) The scope of training includes clinical teaching, surgery, education, research and publication.

SUBJECT AREA

The exposure in oculoplastic surgery covers a wide spectrum of operative procedures for treatment of orbit and ocular adnexa (i.e. eyelids, lacrimal drainage system etc) conditions ranging from congenital malformation to diseases/disorders, trauma, tumours.

Clinical teaching

- a) Trainees are assigned to work with their supervising consultants in the running of outpatient session (at least 1 time/week) to acquire and develop skills and clinical acumen in the examination of cases, interpretation of investigatory results, diagnosis of clinical problems as well as the planning of management and treatment. They will be responsible for clerking of new cases, reviewing follow-ups and presentation of new and old cases to the respective consultants and participate in discussions of cases and management.
- b) Emphasis will be placed on common disorders e.g. congenital/ acquired ptosis, senile entropion/ectropion, epiphora, nasolacrimal duct obstruction, common lid tumours, anophthalmic sockets, orbital inflammation/ tumours, Thyroid Eye disease, etc.
- c) Trainees will learn examination techniques on assessment of eyelid ie: examination of orbital and lacrimal disease.

- d) Trainees will participate in the interpretation of common orbital imaging studies ie: x-rays, CT Scans, MRI, ultrasonography, DCG and report results to their supervising consultants.
- e) Trainees are required to familiarise themselves with the techniques of Intubation Dacryocystography for NLD obstruction.
- f) They are required to actively participate in diagnosing and addressing clinical problems and formulate management protocol for patients. The final decision /execution of treatment for patients should be approved and supervised by their consultants. They are not allowed to make independent decision without informing their supervising consultants.

Surgical teaching

- a) Trainees are to be involved in OT sessions at the SNEC with their supervising consultants. They are advised to read up relevant information and revise the surgical procedures before OT sessions. His/her duty will involve review of all cases pre-operatively, assist / perform surgery and be responsible for post-operative care of patients.
- b) They will have to assist at least 2 cases before they can have hands on surgery on patients. At the end of the training period, each trainee should be able to perform the following simple oculoplastic procedures:
 - Involitional entropion operation
 - Repair of aponeurotic (senile) ptosis
 - Simple DCR
- c) The ideal number for each procedure that trainee would perform during the training period is 5 (subject to availability and suitability of cases). They will also have the opportunity to be exposed to other major/complicated oculoplastic surgery during their rotation period.
- d) Trainees will also have hands on training on basic suturing techniques used in oculoplastic surgery and other minor procedures e.g. Lateral canthotomy tarsorrhaphy, excision of lid (benign) tumours, simple lid laceration repair, syringing and probing, cryotherapy, etc.

Ward round

- a) Trainees should review all cases which are admitted for treatment, investigation or post-operation, post-op review in the ward should be done before ward round and findings to be presented to consultant in charge. For orbital cases, VA, colour vision,

pupillary signs, amount of drainage fluid drain should be checked and reported to consultant in charge.

- b) They are to participate actively in-patient care, i.e. dressing, monitoring, treatment and be responsible for presentation of patients' conditions at the grand ward round.

OCULAR TRAUMA / EMERGENCY

- a) Trainees will participate in the management of emergency cases e.g. orbital haemorrhage, orbital fracture, cellulitis, lid trauma etc as well as preoperative assessment, admission, investigation, arrangement for surgery in the theatre.

EDUCATION

- a) Trainees should assist in resident/medical student teaching and tutorial during ward round and in clinic, conducting lectures for nursing and paramedical staff, selecting cases for CME presentation.
- b) They will be involved in CME presentation and monthly oculoplastic conferences, journal club and regional publications.

RESEARCH AND PUBLICATIONS

- a) Trainees will be involved in ongoing research projects, quality assurance audit, paper publications etc.
- b) They are to submit one paper (eg: case report) at the end of their rotation.

DOCUMENTATION AND VERIFICATION

A log book should be kept and made available at the end of their training period for review and should record:

- (1) all major / minor surgical procedure performed
- (2) all presentation made at CME, oculoplastic conference / journal club
- (3) all paper / research project involved

PROGRAMME SUPERVISORS

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