BASIC AND ADVANCED SPECIALIST TRAINING

REQUIREMENTS

FOR

OPHTHALMOLOGY
OPHTHALMOLOGY
BASIC SPECIALTY TRAINING

INTRODUCTION

This document provides the objectives and guidelines for the training of doctors to become ophthalmic surgeons. It specifies the training programme and its contents, the venues at which training is recognized and the requirements the trainee must meet to be eligible for the Master of Medicine in Ophthalmology.

OBJECTIVE

The traineeship programme is designed to train the medical officer in all aspects of general Ophthalmology. To a large part it will prepare the trainee for the M.Med examination. It will also lay the ground-work for entry into Advanced Specialty Training (Ophthalmology) after the examination. The candidate will learn during this period, his place in the eye case team, to be a group worker and to do so in a polite and harmonious way with his colleagues.

The training should cover the following procedures:

- Refraction
- Contact lens fitting
- Cataract extraction with intra ocular implants
- Corneoscleral laceration repair
- Laser (retina)
- Enucleation
- Strabismus surgery
- Cosmetic lid surgery
- Laser (glaucoma)
- Orbital fracture repair
- Ptosis repair
- Glaucoma filtration surgery
- Perimetry evaluation
- Fluorescein angiography
- CT interpretation
- MRI interpretation
- Penetrating keratoplasty
- Keratorefraction procedures
- Scleral buckling
- Posterior vitrectomy
- Orbitomy
- Ophthalmic pathology
The training will comprise:

- formal lectures;
- clinical presentations;
- clinical supervision at the outpatient clinics
  (especially during the subspeciality clinics);
- teaching of operative skills in the operating theatre;
- involvement in various local and foreign congresses -
  participation and organization.

This is over and above the normal teaching that is carried out during daily ward rounds and the weekly grand wards rounds.

**Basic Training Programme**

**DURATION**

The length of basic training in Ophthalmology must be at least 36 months. Trainees should have by then, sat for and passed the Joint M.Med (Ophthal) / MRCSEd (Ophthal) Part 3 examination which they are eligible for after 20 months of Ophthalmology training.

Trainees who have passed the Joint M.Med (Ophthal) / MRCSEd (Ophthal) Part 3 examination will be conferred the M.Med (Ophthal) on satisfactorily completing 30 months of Ophthalmology training. There is no further stand alone M.Med (Ophthal) examination from Jan 2004.

*Basic trainees who fail to clear the M Med / MRCSEd (Oph) Part 1 (MCO 1 & 2) Examination within eighteen months of appointment will have their trainees/tip considered for termination by the Specialist Training Committee (Ophthalmology).*

**ENTRY FOR TRAINING**

Graduates who have held a medical qualification for at least one year are eligible to apply to enter the basic training programme.

**CONTENT OF TRAINING**

*General Content*

The ophthalmic trainee must have good corrected visual acuity, binocularity and depth perception. He must have good eye-hand coordination. These are vital for good surgery. The ophthalmic trainee will be required to achieve familiarity and competence in the diagnosis and management of patients from all ophthalmic sub specialities. He/she will participate in the decision making process on therapy. He/she will develop his/her skills to reach competence in basic ophthalmic procedures and surgery.
He/she will assist in the coordination and implementation of special arrangements needed in non-routine cases. He/she will learn to deal with ophthalmic problems and their social ramifications; helping patients to accept and cope with visual disability. He/she will also learn to deal with the families of patients to help in their understanding, acceptance, support and assistance of a visually disabled patient. He/she will become aware of and learn his/her place in the team to work with the organisations working towards the prevention of blindness. The trainee should become aware of conditions which arise from industrial and stress related causes. He/she will also develop an appreciation of the cost of equipment and investigations leading him/her to make cost effective decisions in his daily practice.

Subspecialty Rotations

The trainee will attend and examine patients in the following services:-

**Cornea Service**

The trainee will learn to diagnose and manage corneal disease which he might encounter in his daily clinics. He will achieve a sound basic understanding of the physiology, anatomy and pathology of the cornea. He will deal with the corneal trauma and their primary repair. He will learn to recognize corneal diseases and degenerations, their causes and management.

He will also become familiar with the principles of corneal surgery, especially in the fields of corneal grafting and refractive surgery. He will become familiar with the acquisition of donor materials and the arrangements for their utilization. He will become familiar with the use and interpretation of all diagnostic apparatus concerned with corneal function, thickness and clarity.

He will learn to diagnose and treat common contact lens associated problems and complications. He will learn the indications for all types of contact lenses and the simple fitting of contact lenses. He will practise and refine retinoscopy and refraction in the course of his duties in this division as well as achieve familiarity in the various types of contact lens material and their indications. The trainee will develop a professional relationship with and an understanding of the optometric body in the course of his training.

**Oculoplastic Service & Orbital Service:**

He will achieve competence in the diagnosis and management of commonly seen oculoplastic diseases. He will achieve familiarity with anatomy and pathology of the lids and orbit and orbit and ocular adnexae. The trainee shall learn the indications and techniques for commonly perform them in a supervised situation. He will follow up such patients to appreciate the results of surgery.

He will also become competent in the selection of appropriate orbital imaging investigations and their principles and surgical approaches.
Vitreo-Retinal Service:

The trainee will learn to visualize, recognize and manage retinal diseases in the service.

The trainee will learn to use the direct ophthalmoscope competently in the course of his training. He will also learn the indications for and competent use of fundal contact lenses, 90 Dioptre fundal lenses and other means of visualizing the retina which will allow him to diagnose and treat retinal conditions.

He will learn to assist in and perform basic retinal detachment surgery. He will also learn the principles of, indications for and assist in complex vitreo-retinal surgery.

He will develop a sound knowledge of medical retinal disease and their management, and to work with the physician as a team in the management of such patients. In his second year he will learn to use the Argon/Krypton laser photocoagulator for the treatment of retinal disease under appropriate supervision. He will learn to perform flourescein angiography and he will learn the indications for and the interpretations of such angiograms. He will also learn to perform and interpret ultrasonic imaging with the B scan.

Implant and Refractive Service:

The mainstay of the cases seen by the ophthalmic trainee will be visual loss secondary to lens opacification. As such he will learn to achieve competence in the diagnosis, workup and surgical management of patients with cataracts. He will learn to access retinal function in the presence of lens opacity. He will learn about implant technology and the indications for implants in the eye. The trainee will begin to perform under supervision cataract surgery with lens implants in his second year of training. He will learn to be competent with the selection, materials calculation and implantation of intraocular lens implants. He will learn to recognize and deal with post operative complications and the refraction of post-operative cases. He will also learn to deal with lens induced ocular disease and the common syndromes which are associated with cataracts.

The trainee will also learn about the common types of refractive ocular surgery available and their advantage and indications.

Other Clinics

In the course of this training he will also learn to cope with traumatic ocular conditions and their repair and visual rehabilitation.

The trainee will also learn about paediatric ocular disease and their systemic associations, so as to recognize, diagnose and manage patients in the visually formative early years of life.
First Year Training Programme

The first year trainee should be trained in and expected to perform the following:

a) All duties of the ward ophthalmic medical officer.

b) To help run the general ophthalmic outpatient clinics.

c) They will learn the use of all ophthalmic equipment like the indirect ophthalmoscope, the Goldmans tonometer, A Scan, B Scan, refractometer, Hess Chart and manual refraction.

d) To perform minor surgical procedures like:

   - Removal of corneal foreign bodies
   - Incision and drainage of chalazions
   - Repair of simple lid lacerations

e) Be able to recognize and treat all eye emergencies; and carry out the necessary measures, e.g. in alkali the trainee should perform night duties to cover the eye emergencies at the Accident & Emergency. Department and in the eye wards.

f) To observe and sometimes assist in major ophthalmic surgical procedures. They are to maintain a log book on all surgical procedures they have assisted in or done themselves.

g) Attend and participate in tutorials given by unit staff and visiting consultants,

h) To assist and learn from the sub-specialist surgeon.

i) Learn to refract patients and prescribe spectacles.

j) Monthly presentation of topics on basics science in ophthalmology.

k) To present monthly topics on clinical ophthalmology.

Second Year Training Programme

The second year trainee will perform all the duties of the first year trainee and in addition:

a) Rotation programme through the respective subspeciality clinics like the corneal, oculoplastic, glaucoma, neuro-ophtalmology vitreo-retinal and paediatric ophthalmic clinics.

b) Assist in at least 100 major ophthalmic operations.
c) Supervised surgery in squint, glaucoma and cataract surgery with and without intraocular lens implantation. They will also learn operative procedures in traumatic eye injuries.

d) Perform minor surgery in:

- Pterygium
- Simple entrap ion and entropion surgery
- Excision and xanthelesma and other "lumps and bumps" around the eyelids.

e) Supervised training in the Argon and YAG laser for the treatment of diabetic retinopathy, glaucoma and posterior thickening.

f) They will participate in monthly mock examination in preparation for the higher examinations.

g) Participate in journal club.

**Third Year Training Programme**

The third year trainee should be able to perform all the previous duties stated and in addition:

a) Perform all forms of minor surgery.

b) Perform 50 major eye operations under supervision as:

- i) Cataract extraction with intraocular lens implantation (20)
- ii) Glaucoma surgery, e.g. trabeculectomy, peripheral iridectomy (3)
- iii) Squint surgery- horizontal squints only. (3)
- iv) Simple retinal cryopexy. (1)
- v) Examination under anaesthesia. (5)
- vi) Entropion and extropion survey (3)
- vii) Traumatic eye surgery and the removal of magnetic intraocular foreign bodies.

Combination of (c), (d), (e), (f) and (g): 20

c) Perform at least 20 laser treatments, under supervision, for diabetic retinopathy, glaucoma and posterior capsule thickening

d) Participate in local and foreign meetings as part of the organizing committee and present scientific papers.

e) Participate in surveys or studies and submit these papers to local and foreign journals.
HOSPITALS ACCEPTED FOR TRAINING

The list of recognized hospitals will be drawn up by the Board from time to time. At present they include;

Singapore National Eye Centre, National University Hospital
Tan Tock Seng Hospital and Changi General Hospital.

Overseas (generally):

For overseas hospitals, candidates' training will be reviewed on a case basis and training will be recognised from those hospitals or institutions which, in the opinion of the Specialist Training Committee, have a training programme which is equivalent to the requirements of the M.Med.

EDUCATIONAL ACTIVITIES TO BE INCLUDED IN THE TRAINING

As this is a training programme, there should candidates are expected to participate in actively reviewing of current knowledge, in the form of journal reviews, seminars and wards rounds. The candidates are expected to participate in continuing medical education programmes, particularly in the speciality. They should be registered with the Singapore Medical Association CME programme.

LEAVE

A candidate should not take more than fourteen (14) days leave, including sick leave during each six-month period. The period spent on full time courses will not be counted towards postings.

LOG BOOK

The learning experiences of a trainee should be properly recorded and countersigned by his supervisor at regular intervals (at least every six months). This should include surgical procedures, interesting cases managed, CME activities, etc.

An overall certification for each 6-month posting by the head of the Department must be obtained. This is to ensure that the doctor has completed the training to their satisfaction and has held a position during the training that is recognised post in the unit.

The log book will be available for purchase from the school.
EXAMINATIONS

Schedule & Venue

The Final examination is usually held in March and November. The oral examination will be held at the National University of Singapore.

ELIGIBILITY

A trainee for the degree of Master of Medicine (Ophthalmology) is required to pass the Parts 1, 2, & 3 of the Joint M.Med (Ophthal) / MRCSEd (Ophthal) examinations.

A trainee may be admitted to the Part 1 of the Joint M.Med (Ophthal) / MRCSEd (Ophthal) examinations provided that he has held a medical qualification for at least one year.

Upon passing the Part 1 examinations, trainees then can proceed to the Part 2 Joint M.Med (Ophthal) / MRCSEd (Ophthal) examinations provided that he has at least 12 months of Ophthalmology training.

And upon passing the Part 2 examinations, trainees then can proceed to the part 3 Joint M.Med (Ophthal) / MRCSEd (Ophthal) examinations provided that he has at least 20 months of Ophthalmology training.

The trainee will then be conferred the M.Med title upon successfully completing 30 months of Ophthalmology training. Of the 30 months, 6 months may be spent in either clinical or research posts in Ophthalmology or disciplines (eg neurology and neurology) related to the study of Ophthalmology.

A trainee must submit details of each posting including periods of leave taken, duly certified by the Heads of Departments concerned.

EXEMPTIONS

Holders of Part 1 Examination of any of the recognised Royal Colleges of Surgeons will be exempted from the M.Med (Ophthal)/ MRCSEd (Ophthal) Part 1 Examination.
SYLLABUS

Final Examination Syllabus

(1) Basic Sciences

A thorough knowledge of the anatomy, embryology and physiology of the visual apparatus; optics and pathology and microbiology in relation in Ophthalmology.

(2) General Medicine and Neurology in relation to Ophthalmology

A general knowledge of the principles concerned in the diagnosis and treatment of diseases which may affect the visual pathways or present ocular features.

(3) Ophthalmic Medicine and Surgery

It is expected that each trainee, as a result of his/her clinical experience and systematic reading of current work in the field of Ophthalmology, will have sound clinical judgment, and a clear understanding of the pathogenesis and principles of management of ophthalmic conditions.

Good techniques in clinical examinations, including the use of ophthalmoscope (direct and binocular indirect), retinoscope, slit lamp biomicroscope is essential. The trainee must be conversant with neuro-ophthalmic and basic neurology examination, including the use of the tangent screen.

FORMAT OF EXAMINATION

The Master of Medicine examination consists of:

Part 1 - Basic Sciences:

There will be two multiple choice question papers of two hours each. MCQ 1 (anatomy, physiology, genetics and molecular and cell biology). MCQ 2 (pathology, microbiology, immunology, pharmacology and the basic principles of ophthalmic surgery). Each paper will stand alone. There is no limit to the number of times a candidates may sit the papers.

Part 2 - Applied Basic Sciences, Optics, Refraction and Methods of Clinical Examination;

There are four sections to the examination. A two hour multiple choice question paper (MCQ3), a twenty minute oral examination, an Objective Structured Examination (OSCE) lasting 40-45 minutes, a practical refraction examination (30minutes), and a practical test on methods of clinical examination (30 minutes).

Candidates must pass both the practical refraction, and the methods of clinical examination sections, Unsuccessful candidates must re-sit all sections

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Part 3 - Clinical Ophthalmology, Ophthalmology in Relation to Medicine and Neurology and Ophthalmic Surgery and Pathology:

There are five sections to this examination. A two hour multiple choice question paper (MCQ4), a twenty minute oral examination in clinical Ophthalmology and Ophthalmology in relation to Medicine and Neurology, a twenty minute oral in Ophthalmic Surgery and Pathology, a clinical examination in Ophthalmic Medicine and surgery (30 minutes), and a clinical examination in Ophthalmology in relation to Medicine and Neurology (30 minutes). Candidates must achieve a minimum mark (not necessarily a pass mark) in the MCQ and oral components in order to proceed to the clinical examinations.

Candidates who fail the clinical examination in clinical Ophthalmic Medicine and Surgery will be deemed to have failed the whole examination, and will not be permitted to proceed to the clinical examination in Ophthalmology in relation to Medicine and Neurology.

Candidates who achieve a pass mark in the MCQ and oral components but fail the clinical examination section will be required to re-sit that section only, but if unsuccessful in the next diet, candidates must then re-sit all five sections.

REQUIREMENTS TO PASS THE EXAMINATION

Candidates are required to obtain a minimum total mark for the whole examination in order to pass the examination.

EXAMINATION FEES

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<thead>
<tr>
<th>Part</th>
<th>Fee</th>
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<tbody>
<tr>
<td>Part 1: MCQ Paper 1</td>
<td>S$530.00</td>
<td>(inclusive of GST)</td>
</tr>
<tr>
<td>MCQ Paper2</td>
<td>S$530.00</td>
<td>(inclusive of GST)</td>
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<tr>
<td>Part 2</td>
<td>S$1100.00</td>
<td>(inclusive of 5% GST)</td>
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<tr>
<td>Part 3</td>
<td>S$1110.00</td>
<td>(inclusive of 5% GST)</td>
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A late fee of S$50.00 is charged for applications received not more than one week after the closing date.

Applications will not be accepted seven days after the closing date.
WITDRAWAL FROM EXAMINATION

At the discretion of the Division, a candidate withdrawing from the examination may receive a full refund of the examination fee, excluding the registration fee of S$52.50, provided that such withdrawal is received in writing prior to the date on which entries close.

A candidate withdrawing an application on or after the closing date, or who fails to appear for an examination for which application has been accepted, may be refunded a proportion of the fee paid on production of medical or other evidence of compassionate grounds within seven (7) days of withdrawal or failure to appear.

The abovementioned regulation also applies when transferring to a subsequent examination.

APPLICATION

Applications to sit for the examination must be made on a form obtainable from the Secretary Division of Graduate Medical Studies, Block MD 5, Level 3 National University of Singapore 12 Medical Drive, Singapore 117598.

The application form must be completed and returned to the Secretary before the closing date together with the entry fee, log book and other materials pertinent to the application.

ADVANCED SPECIALTY TRAINING (AST)

Candidates must have completed 3 years basic training and obtained the M.MED. or equivalent qualification to be eligible to apply for admission into AST. Basic training is the period of supervised training from the date of formal appointment as a trainee. The Division may recognize relevant pre-traineeship posting up to a maximum of 6 months. Recognition of training for MOs who did not obtain traineeship appointments or were trained overseas may be accorded on a case by case basis.

Candidates must register with the Division for AST in the M.MED. Specialties (except Family Medicine). For AST in subspecialties, applications should be made to the Ministry of Health or Academy of Medicine.

VERIFICATION

All candidates must realise that the above arrangements are under continual review and that it is their responsibility to check the current position with the Secretary of the Division.

AMENDMENT TO RULES, REGULATIONS AND FEE

The above rules, regulations and fee are subject to change without notice. All rules and regulation published herein are accurate at the date of publication. Candidates are advised to check with the Division at the point of application.

May 2001

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TRAINING PROGRAMME FOR

ADVANCED CERTIFICATION IN

OPHTHALMOLOGY
OPHTHALMOLOGY
ADVANCED SPECIALTY TRAINING

INTRODUCTION

The Division has been conducting postgraduate medical courses and examinations since 1969. Training requirements for the conferment of the M.Med title was been restructured in Jan 2004 and effected together with the implementation of log books to record basic training received.

Basic training is defined as the period of training required for admission to the respective M.Med examinations. It should commence one year after full medical registration and normally lasts for a period of 3 years before the doctor is eligible to sit for a postgraduate examination, e.g. the M.Med examination that the Division conducts.

Postgraduate training of doctors in Singapore has been endorsed by the Division of Graduate Medical Studies, Academy of Medicine and the Ministry of Health as a continuum of training for 7 years following registration. During this period, the doctors would have to sit for and pass the M.Med examinations or equivalent after completion of basic training required before commencing on advanced training in the respective disciplines, culminating in the certification of these doctors as specialists by the Singapore Medical Council.

Advance training is designed to provide a structured programme of learning which facilitates the acquisition of knowledge, understanding, skills and attitudes to a level appropriate to an ophthalmic specialist who has been fully prepared to begin his/her career as an independent practitioner (Consultant) in this specialty. Advance Training would normally be a period of 3 years after successful completion of the respective basic training programmes and obtaining a postgraduate medical degree of M.Med or equivalent. This period of training may be undertaken in the following manner, the form of which is as determined by the various specialists in the pages that follow:-

(a). The entire 3 years may be spent in accredited training departments in approved institutions in Singapore.

(b). Two years training may be spent in accredited training in approved departments in institutions in Singapore and one year in approved institutions overseas.

(c). One year training may be spent in accredited departments in approved institutions in Singapore; (preferably, the period spent is not less than 6 months in each department and 2 years in approved institutions overseas preferably, not less than 6 months in each institution).

(d). The entire 3 years may be spent in accredited departments in approved institutions overseas, in this case, the advanced trainee will be subjected to a period of at least one-year assessment by an accredited local department in an approved institution.
REGISTRATION TO COMMENCE ADVANCED TRAINING

ELIGIBILITY

A trainee must -

(a) have obtained a postgraduate medical degree e.g. M.Med or equivalent.

(b) have successfully completed a recognised basic training programme of at least 3 years.

(c) be certified fit to commence on an advanced training programme by the Specialist Training Committee Ophthalmology.

(d) have been accepted by a recognised training institution for advanced training,

(e) have paid the required fee.

PROCEDURE

A register of advanced trainees is maintained by the Division. Registration is necessary if time spent in training is to be approved.

The following documents have to be submitted at the time of registration:

(a) certified copy of the postgraduate degree or diploma obtained.

(b) proof of completion of basic training programme to be certified by Heads of Departments concerned.

(c) certification of fitness to commence advanced training by a specialist in the specialty concerned.

(d) letter of acceptance of the trainee by a recognised institution for advanced training.

WITHDRAWAL FROM TRAINING

Should a trainee decide to withdraw from the advanced training programme that he/she has registered for, he should inform the Division in writing immediately.

Where applicable, if notice of withdrawal is received by the Division at least 4 weeks prior to the commencement of an assessment or interview that has been scheduled, for purpose of certification of successful completion of the advanced training programme, nil refund of the entry fee will be accorded.

Partial refund may be given if notice of withdrawal is given after this date (i.e. 4 weeks prior to commencement of assessment /interview) or if the trainee fails to submit this notice, provided the trainee produces medical or other evidence of compassionate grounds within 7 days of failure to appear for the assessment or interview.
When transferring an application for registration for advanced training in another specialty, at least 4 weeks notice in writing must be received by the Division prior to commencement of transfer.

Notice of transfer must be given prior to the commencement of advanced training in another specialty.

**SPECIALTIES**

The Division has been appointed to be administratively responsible for the advanced training programmes for specialties in:

- Anaesthesiology
- Internal Medicine
- Obstetrics & Gynaecology
- Ophthalmology
- Paediatric Medicine
- Psychiatry
- Surgery
- Public Health
- Occupational Medicine
- Diagnostic Radiology
- Emergency Medicine

A Joint Committee for Specialist Training (JCST) with representation from the School, Academy and the Ministry of Health has been set up with the following objectives:

(a) provision of advanced specialty training in medicine leading to specialty certification; (b) accreditation of training posts for advanced specialty training;

(c) promotion of Continuing Medical Education.

Upon satisfactory completion of the advanced training programmes for the above mentioned specialties, a certificate will be issued by these three bodies. This certificate is a pre-requisite for consideration for registration as a specialist by the Singapore Medical Council.

**RECIPROCITY**

Holders of qualifications from the American Board Certificates, the Canadian Fellowship and the Specialty Fellowships of the UK and Australasian College have no automatic right to certification as specialists in Singapore. The content of the specialty training and duration have to be scrutinized and the standard achieved by the trainees ascertained to conform with the criteria we have set for the specialty before the recommendation for certification as a specialist is submitted to the Joint Committee for Specialist Training.
Where there are specialty qualifications recently introduced, the applicant will be subjected to further local assessment before certification as a specialist can be considered.
ADVANCED TRAINING PROGRAMME

Recognised Basic Qualifications for Entry to Advance Training

- M.Med (Ophthalmology)
- FRCS (Eng, Glas, Ire, Edin)
- FRACO
- FRACS (Ophthalmology)
- FRCSC (Ophthalmology)
- FRC (Ophth)
- Diplomate, American Board of Ophthalmology

Aims

The Advanced Trainee will consolidate his/her clinical skills in general ophthalmic patient management and achieve competence in ophthalmic laser and surgical procedures. At the end of the three year period, he/she should be fully competent to act as an independent specialist and be able to deal with all common ophthalmic elective and emergency problems. He/she should be able to independently evaluate, operate and manage post operatively such cases.

In addition, at the start of the third year, he/she may choose to enter a subspecialty in Ophthalmology. He/she should acquire advanced skills and new scientific knowledge, and be conversant with the current problems, approaches and advances in the subspecialty.

At the end of the 3-year period, he/she should be conversant with most operations except the most complicated procedures, and should assume increasing responsibilities, in patient care both in the wards and outpatients, take an active role in teaching of students and residents and in research. He/she should be able to implement departmental policies, supervise junior staff and maintain discipline.

Duration

Three years of postings in recognised ophthalmic departments and part-time attachments to approved sub-specialty Consultants in Ophthalmology with an optional one year period spent partially or totally abroad for sub-specialty training.

Content

The present state of advanced training will work as an interim measure until full fellowship rotations and a team system achieve maturity and are implemented in the future. The advanced training programme comprises of 2 aspects:
The Closely Supervised Aspect: The close supervision aspect will be for 1 to 2 sessions a week of 3 or 6 months attachment to specified Consultants of different ophthalmic sub-specialties. These rotations will fast for the 3 years of advanced training. The third year can be spent rotating in a sub-specialty of choice if the Advanced Trainee opts to sub-specialise. The second stage will be a year of consolidation and sub-specialty commencement. The remaining 2 attachments here will be spent either with the remaining subspecialties that the Advanced Trainee has not been sent to if he/she wishes to be a General Ophthalmologist, or he/she can opt to be sent to repeat an attachment in an area previously covered if he/she has a subspecialty interest. At the end of the attachment, the Consultant must certify that the Advanced Trainee has performed satisfactorily and has gained enough surgical and clinical experience from the posting. If the performance of the Advanced Trainee is not satisfactory or if for any reason the Advanced Trainee has not gained the adequate clinical and surgical experience to be signed up, the Consultant may recommend to DGMS that a further attachment be made to that sub-specialty the next year so as to avoid upsetting the rest of the rotations for that year. The attachments should be performed continuously. If an Advanced Trainee is unable to perform this for reasons of illness, pregnancy or personal reasons, a maximum period of 4 years will be allowed before the Advanced Ophthalmology Training is considered invalid and re-registration for AST will be needed again. The Specialist Training Committee for Ophthalmology will decide on a case by case basis in such instances as to what additional training will be required before specialist certification is given.

The Daily Training Aspect

The daily training aspect will include running general clinics and a surgical list as well as participation in unit journal clubs, CME, teaching of basic trainees and papers and presentations. This aspect of training has been the only means by which all Consultants and specialists to date in Singapore have achieved their training, skills knowledge and expertise. It is integral in training of the advanced trainee that a good measure of work under his own initiative with indirect supervision by the unit Head should be a means by which the Advanced Trainee gains a great degree of his general experience.

The unit should exercise some aspects of training in the form of ward rounds, journal clubs, complication rounds and quality assurance. The Advanced Trainee is also responsible for the teaching of basic ophthalmic trainees. The Head of Department and his/her Consultants should remember that there is a responsibility to train their new staff members and this programme will vary from unit to unit, the precise form in which it will take place will be the decision of that unit's administration.
To improve on and monitor this "on the job" aspect of training, a log book will be issued to all Advanced Trainees. The book will be kept by the Advanced Trainees as a record of any surgery he/she has performed or any interesting cases that he may have seen or assisted in. It will also log all cases performed in the 3 or 6-monthly attachments and the presentations made and papers published that year, as well as his/her research projects if any.

**Core Areas**

The mandatory core areas (minimum 6 months each) are:

i) Cornea:

ii) Retina

iii) Glaucoma

iv) Oculoplastics

v) Paediatric Ophthalmology

vi) General / Neuro-Ophthalmology / Research

**Specific Objectives by Subspecialty**

Within each of the subspecialties there is essential experiences that should be attained by the Trainee. They are as follows:

**Cornea:** To have attended 20 special cornea and/or external diseases clinics. To have actively participated in, or assisted at the following:

1) 3 Corneal transplantations
2) 3 Combined penetrating keratoplasty, cataract extraction and implant

**Retina:** To have undertaken a minimum of 40 posterior segment laser treatments. To have attended 50 surgical and/or medical retina clinics. To have actively participated in, or assisted at the following:

1) 20 B Scan ultrasonography for opaque media or tumor evaluation.
2) 20 Vitreo-retinal or conventional retinal surgery.
3) JO Use of cytotoxic and systemic immuno-suppressive drugs in uveitis

**Glaucoma:** To have undertaken a minimum of 20 intraocular surgical cases and 20 anterior segment lasers. To have attended 50 special glaucoma clinics.

**Oculoplastic:** To have undertaken a minimum of 40 surgical cases. To have attended 20 special oculoplastic and/or adnexa clinics. To have actively participated in, or assisted at the following:

1) 3 Ptosis surgery (major) eg. in childhood
**Paediatric Ophthalmology:** To have undertaken a minimum of 20 extraocular muscle surgical cases. To have attended 20 special paediatric ophthalmology clinics. To have actively participated in, or assisted at, the following:

1) Ophthalmoscopic screening of neonates for retinopathy of prematurity

**Neuro-ophthalmology:** To have attended 20 special neuro-ophthalmology and/or adult motility clinics.

**Supervision of Training**

Heads of Departments or Consultants should supervise training. The Supervisor must ensure that the Advanced Trainee is given increasing responsibility, varied exposure and operative experience.

Sub-specialty Consultants should submit a report to DGMS at the end of the 6-month attachment, to comment on the Advanced Trainee's performance and competence.

**Log Book**

The log book should contain lists of operations performed and assisted by the Advanced Trainee, participation and contribution at scientific meetings, teaching activities, research work, publications in scientific journals, and journal clubs.

Advanced Trainees must submit their log books to their Supervisors every month and to Heads of Departments every 6 months for certification. The log book will be requested once a year for evaluation by the Committee for Ophthalmology to ensure that the Advanced Trainee has performed an adequate number of cases.

**Practical Training**

Practical work as determined by Content of Training in Item 4.1 (ii).

**Courses, Seminars and Lectures**

Advanced Trainees should participate in courses, seminars and continuing medical education lectures in Ophthalmology and its sub-specialties throughout his/her training period.

**Teaching Commitments**

The Advanced Trainee will undertake teaching for undergraduates, medical officers, basic trainees, nursing and paramedical staff.
Research, Publication and Papers Presented at Meetings

Trainees must demonstrate their involvement in research, at least by providing evidence of their capability to critically review new developments and research findings in science and medicine as they apply to ophthalmology. By the end of their training, all Advanced Trainees are expected to complete a total of 12 papers (2 per year for the 6 years of training, both basic and advanced) in the form of—

- case reports;
- scientific papers published in a refereed, regional or international journal for which he/she is the main author;
- papers presented at approved regional or international meetings

EVALUATION

All trainees will be required to maintain log books and ensure that these are completed and certified by their Sub-specialty Supervisor and Head of Department at the end of every 3 or 6-month attachment.

The Supervisor shall submit a report to DGMS as to the progress of the Advanced Trainee and his performance and competence at the end of each posting. He should mention also the strengths and weaknesses of the trainee in the report to DGMS. Yearly evaluation of the progress will be made by the Committee for Ophthalmology based on the 6-monthly reports and the log book. An Advanced Trainee who has, by poor character, immoral actions or by professionally improper behaviour, been found lacking by the Committee for Ophthalmology may not be recommended for specialist certification.

On completion of the Advanced Training programme, the Advanced Trainee is to submit the log book to the School for assessment by the Board of Assessors. There will also be an exit examination conducted by the Board of Assessors.

Exit Examination

This examination will be in the format of a certain number of table vivas, each of 20 minutes, with two examiners. In these vivas, the emphasis will be on clinical and practical problem solving, using clinical scenarios and structured questions. They are designed to assess the trainees’ practical knowledge over a wide area.

May 2001
CONTENTS

SECTION 1

General Instructions to Trainees
Personal details
Training Attachment to Consultants
Membership and activities in professional organisations
6 Months Proforma
Overseas attachment
Weekly Timetable
Research Projects
List of Courses, Seminars and Conferences attended
Teaching Experience
Papers published
Papers presented

SECTION 2

Ophthalmic subspecialties
Record of Operations
Supervisor’s Comments

SECTION 3

Leave Records

SECTION 4

Certification

SECTION 5

Summary of Operative Procedures
SECTION 1

GENERAL INSTRUCTIONS TO TRAINEES

The purpose of this Log Book is

i) to help the Trainee record his training in brief detail so that experience can be recorded and deficiencies identified and remedied.

ii) to help Mentors/Supervisors assess overall training and provide the extra experience for trainees in the areas where it is most needed.

The Timing of the Log Book

Entries into the Log Books should be made from the beginning of the trainee's appointment as a trainee in a recognised posting (any queries concerning recognition should be referred to the Secretary of the Graduate School of Medical Studies).

Trainees should consult the School on current regulations.

If the Trainee is in doubt about the acceptability of his Log Book, he should seek advice from the School as soon as possible.

Trainees are strongly advised to carry their Log Books with them at all times and to fill it in on a regular basis. This will avoid much retrospective record hunting. Trainees should discuss the progress of the Log Book with their Mentors/Supervisors at least every month and a summary of experience must be signed every six months by the Head of Department. This regular assessment allows deficiencies in either experience gained or experience available to be remedied early in the posting.

Confidentiality

Trainees must not identify patients by name. Cases should be recorded by hospital number and/or patients' NRIC number or initials.
Supervision of Training

A formal monthly review of the trainee’s progress is required.

The aim of such a review is to ensure that the trainee is exposed to and is taught all aspects of the specialty available in any department.

Deficiencies in training both theoretical and practical should be recognised and appropriate steps taken to overcome them. If it is possible it should be stated and reason given. Any apparent deficiencies in training which have been dealt with outside the Log Book ‘year’ should be noted by yourself so that the information is available to the School.

Instructions to Supervisors

A formal monthly review of the trainee’s progress is required.

The aim of such a review is to ensure that the trainee is exposed to and is taught all aspects of the specialty available in any department.

Deficiencies in training both theoretical and practical should be recognised and appropriate steps to overcome them. If it is impossible it should be stated and reason given. Any apparent deficiencies in training which have been dealt with outside the Log Book ‘year’ should also be noted by yourself so that the information is available to the School of Postgraduate Medical Studies.
General layout of the Log Book

SECTION 1
This section requires details similar to those of a curriculum vitae.

SECTION 2
This section is to record cases seen. This may be a helpful guide to trainee’s reading to consolidate clinical experience.

SECTION 3
A record of leave taken for every 6 months posting has to be completed and certified.

SECTION 4
This section requires certification by the Head of Department or Mentor every 6 months on the Trainee’s training as one done to his satisfaction.

OTHER NOTES:
Trainees may print or photocopy any extra pages which they require and insert into their logbook.
PERSONAL DETAILS

Family Name (Surname): _________________     Forenames: _________________

Sex:   Male/Female (circle)     Date of Birth: _________________

Date and Place of Graduation (Specify University): _______________________________

Postgraduate Qualifications (with dates): _________________________________

__________________________________

___________________________________

APPOINTMENTS:

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<th>Supervisor</th>
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Pre-Registration (internship)

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Subsequent Appointments (including basic training)

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<td>Consultant’s Name</td>
<td>Sub-specialty Discipline</td>
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MEMBERSHIP AND ACTIVITIES IN PROFESSIONAL ORGANISATIONS

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<th>Achievements</th>
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## ASSESSMENT OF TRAINEE
(To be completed by the Trainer)

Name of Trainee:………………………………………………………………………

Year of training:………..Hospital:…………………………………………………………

### Clinical Skills

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<td>Taking a history</td>
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<td>Clinical judgement</td>
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<td>Postoperative care</td>
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### Knowledge

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### Attitudes

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<td>To patients</td>
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<td>To colleagues</td>
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<td>To staff</td>
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Brief description of the trainee’s strengths and weaknesses:

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Trainee’s signature:…………………….. Date:::………………………………….
# ASSESSMENT OF TRAINEE
(To be completed by the Trainer)

## Year of training:
Hospital:

## Consultant:

## From: To:

### Clinical Training

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<td>Informal discussions</td>
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<td>Allowed responsibility</td>
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### Operative Training

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<td>Structured tuition</td>
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<td>Supervision</td>
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### Planned Learning

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### Counselling by Consultant

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## Brief description of the trainee’s strengths and weaknesses of the training:

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Trainee’s signature: Date:
OVERSEAS ATTACHMENT (including HMDP)

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SUMMARY OF WEEKLY TIMETABLE

(To be completed for every 6 months posting)

Period of Training: From: ___________________ To: ___________________

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<th>P.M.</th>
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<td>Sunday</td>
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Summary of Weekly Activities

Clinical Duties

a) No. of outpatient sessions/week: ___________________________________

b) No. of operating sessions/week: ___________________________________

c) No. of emergency/duty call sessions/week: ___________________________

d) Half or full day off duty/week: ___________________________________

No. of formal departmental educational activities/week:

a) lectures ____________________________

b) morbidity/mortality rounds ____________________________

c) journal club meetings ____________________________

d) audit meetings ____________________________

e) research meetings ____________________________

f) others ____________________________
RESEARCH PROJECTS

Date of Commencement : ____________________________

Title/Aim of Research: ____________________________________________
_____________________________________________________________________
_____________________________________________________________________

Co-worker (if any) : ________________________________________________

Date of Completion : ________________________________________________

Conclusion & Remarks (List any resulting publications or presentations)
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(Attach an abstract of published papers)
## List of Courses, Seminars & Conferences Attended

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<th>Details</th>
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<td>(State conference title and papers presented by trainee)</td>
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</table>
SUMMARY OF TEACHING EXPERIENCE

Undergraduates, interns, residents, nurses, allied health professionals, consumer groups and organisations.

<table>
<thead>
<tr>
<th>Year of Training</th>
<th>Summary</th>
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<td>(type of audience, topics, duration, etc)</td>
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Section 2

OPHTHALMIC SUBSPECIALITIES

1. Anterior Segment/Cataract
2. Vitreo – Retina
3. Occuloplastics/Orbit
4. Squints
5. Glaucoma
6. Trauma
7. Miscellaneous
SECTION 2

RECORD OF OPERATIONS

Hospital : ________________________________

Department : ________________________________ (From _______ to _______)

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<th>S/N</th>
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<th>MANAGEMENT</th>
<th>OUTCOME</th>
<th>OTHER REMARKS</th>
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SUPERVISOR’S COMMENTS ON CANDIDATES AND HIS TRAINING EXPERIENCE

Period of Training: From:__________________ To: _______________________

______________________________________________________________________
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______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
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______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Signature: ____________________

Name & Designation of Supervisor: ________________________________
### LEAVE RECORDS

<table>
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<tr>
<th>Posting Period</th>
<th>Medical Leave</th>
<th>Study Leave</th>
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Certified by:

Signature: _______________________________  Date: ________________________

Name: ___________________________  Designation: ___________________________
SECTION 4

CERTIFICATION
(to be completed for every 6 months posting)

This is to certify that

Name: ____________________________________________

NRIC/PP No.: ______________________________________

has completed the period of posting from _____________ to _____________

in an approved training post.

________________________________________          _________________________
Signature                                      Date

Head of Department or Mentor

________________________________________

Official Stamp

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SUMMARY OF OPERATIVE PROCEDURES

Hospital: ______________________________________

Department: ______________________________ (From __________to___________)

<table>
<thead>
<tr>
<th>PROCEDURES</th>
<th>NO. AS SURGEON</th>
<th>NO. AS ASSISTANTS</th>
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Certified by:

Head of Department’s Signature: _____________________ Date: _____________________

Name: ________________________________

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CERTIFICATE OF SATISFACTORY COMPLETION OF THE LOG BOOK

This is to certify that:

Name: ________________________________________________________________

Address: ______________________________________________________________

____________________________________________________________

has satisfactorily completed the log book of training as required under regulations for
Advanced Speciality Training.

Signature: _________________________  Date: _________________________
Chairman, Board of Assessors

When the logbook is presented for assessment on completion of Advanced Training, this
certificate will be signed by the Chairman of the Board of Assessors, who will forward a
copy to the joint Committee for the Advanced Speciality Training.