

Letterhead of The College of Ophthalmologists of Hong Kong

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5th April, 2000

The Hon. Michael Ho
Chairman, Legco Panel on Health Service
Legislative Council
Jackson Road, Central
Hong Kong

(Attn: Ms. Joyce Ho)

Dear Sirs,

Re: Training Curriculum

We would like to submit the Training Curriculum of our College of Ophthalmologists of Hong Kong, the Curriculum of Medical Degree of the Chinese University of Hong Kong and the University of Hong Kong for your reference.

Thank you for your kind attention.

Yours sincerely,

Dr. Siu-Ping Hui
President
The College of Ophthalmologists of Hong Kong

Encl.: (1) Training Curriculum of the College of Ophthalmologists of HK
(2) Curriculum of Medical Degree of CUHK & HKU

THE COLLEGE OF OPHTHALMOLOGISTS OF HONG KONG

TRAINING CURRICULUM

(A) Curriculum

- a) The training programme should be a minimum of 6 years in a College recognised training post.
- b) The training program is divided into two parts - Basic and Higher Training.
- c) The Basic Training will last for at least 2 years. It should consist of at least 20 months of training in ophthalmology with an optional 4 months of training in a recognised training post in other related specialties to be approved by the College.
- d) Basic Training is considered to be completed only after the trainee has passed the intermediate examination.
- e) Higher Training will last for at least 4 years after completion of the basic training.
- f) Higher Training is considered to be completed only after passing the exit examination.

In addition, the following guidelines should be observed:-

- 1) The period of training should preferably be continuous. A cumulative absence of less than 12 months throughout his training period is acceptable. Annual leave from the hospital is not considered an absence from training.
- 2) Any break of training for more than 12 cumulative months is not encouraged but the trainee may apply to the College for approval.
- 3) Research in the field of ophthalmology is encouraged but whether the period of research could be considered as part of the training period will be left to the decision of the College and will be judged on individual basis. However, generally such period should not be accredited for more than twelve months in lieu of the clinical training.
- 4) Overseas training in the field of ophthalmology is encouraged but whether the period could be considered as part of the training will be left to the decision of the College and will be judged on individual basis.

B) Objective

1. Basic Training

Training in Basic Ophthalmology aims for the general acquisition of ophthalmological knowledge and surgical skills plus clinical judgment, as a continuous process, in stages under supervision that enable the Ophthalmic trainee, at the end, to handle general ophthalmological problems competently and at a high professional standard.

2. Higher Training

Training in Advanced Ophthalmology aims for acquisition of more advanced ophthalmic knowledge and surgical skills in various subspecialties, such that at the end the trainee can handle more difficult ophthalmic problems competently.

After completion of his training, the candidate is expected to be competent enough to become a general ophthalmologist with or without a special interest in a subspecialty. Management and communication skill should also be emphasized throughout the period of training.

C) Entry Requirement

1. Basic Training (2 years)

- (a) The candidate should be a graduate of an accredited medical school and registrable in Hong Kong and have a genuine intention to complete the full course of training.
- (b) Trainee applicant should preferably have good corrected eyesight, colour vision and good binocularity to facilitate their training and their future career in ophthalmology.
- (c) Candidate may enter into the Training Program any time after the completion of their internship. However, definite advantage will be given to those who have passed Part A of the intermediate examination.

2. Higher Training (4 years)

- (a) The Candidate must meet all the requirements as for Basic Training.
- (b) Candidate should have completed his/her Basic Training successfully and passed the intermediate examination.

D) Examination Structure

			<u>Format</u>	<u>Time to be taken</u>
1.	Intermediate exam. -	Part A)	Basic Science (MCQ)	- any time after internship
		Part B)	i) optics, refraction & methods of clinical examination (MCQ and practical)	- completed at least 12 months of basic ophthalmic training
			ii) clinical ophthalmology, ophthalmic surgery and pathology (MCQ, oral, clinical)	- completed at least 20 months of basic ophthalmic training
2.	Exit exam. -	Part C)	written, oral and clinical	- completed after at least 3 years of Higher Training
		Part D)	log book inspection & assessment	- completed after at least 4 years of Higher Training

After failure for 4 times in Part A or Part B examination after entering into recognised ophthalmic training post, the candidate may not be allowed to sit for the examination unless with special permission of the Education Committee.

E) Log Book

- 1) Log books should be obtained as soon as an ophthalmic trainee is accepted for training.
- 2) Entries in Log books should be made regularly and not retrospectively.
- 3) Log books must be made available for inspection by the Trainers regularly.
- 4) Yearly review of the log book is required.

F) Acquisition of knowledge and skills for various stages

1. Basic Training (2 years)

(a) **Diagnostic skills** - Acquisition and exposure to skills and knowledge in performing the following and accurate interpretation of clinical signs observed by such:

- 1) Visual function tests:-
 - i. accurate assessment of patient's visual acuity and trial of lenses.
 - ii. colour vision examination.
 - iii. visual field examination.
- 2) Retinoscopy and refraction.
- 3) General ophthalmic examination techniques.
- 4) Biomicroscopic methods - such as slit lamp, operating microscope, applanation tonometry, gonioscopy and slit lamp fundoscopy.

- 5) s such as direct and binocular indirect ophthalmoscopy with scleral indentation.
- 6) Detection, correlation and interpretation of relevant clinical findings and instigation of proper management of patients. Discussions with patients and/or their relatives regarding their medical conditions and bedside etiquette to enhance a patient-doctor relationship is emphasized.
- 7) Updating and understanding the knowledge of various new investigative instruments/operative instruments is strongly encouraged.
- 8) Exposure to other investigative/therapeutic procedures such as contact lens fitting, low vision aids, orthoptic instrumentations, fundus photography, fluorescein angiography, ultrasonography and electro-diagnostic techniques are to be expected.
- 9) Trainees are required to learn basic principles of structural and microscopic changes of tissues in various eye diseases and pathology and the approach to therapy.

(b) **Surgical skills and operations**

The Trainee is expected to have exposure to the following operations mainly as an assistant:

- 1) Emergency operations
- 2) Intraocular operations including cataract extractions and antiglaucoma operations
- 3) Paediatric ophthalmic operations like squint surgery

They may on occasions be allowed to perform operations under the supervision of their trainers.

At the end of this stage, the trainee is expected to achieve the following clinical skills:

- i. Competence in pre and post operative management of ophthalmic patients.
- ii. Acquisition of knowledge of giving premedication to ophthalmic patients and of obtaining preoperative informed consent by giving careful explanation to patients and/or their relatives of the possible outcome and complications of individual operations.
- iii. Doing minor procedures.
- iv. Acquisition of aseptic technique, proper draping, avoid external pressure on eyeball during operations, etc.
- v. Knowledge of ophthalmic surgical instruments and their respective usage. Careful handling of instruments will be strongly stressed.
- vi. Acquisition of microsurgical techniques, instrumentation, and understanding of the maintenance and operation of the microscope.
- vii. Performance of a proper suturing technique.
- viii. Attendance of eye emergency.
- ix. Acquisition of various techniques of ophthalmic anaesthesia.

(c) **Exposure to various subspecialties**

- (1) Anterior segment Eye Diseases
- (2) Posterior segment Eye Diseases
- (3) Glaucoma
- (4) Paediatric Ophthalmology
- (5) Oculoplastic and Orbit
- (6) Medical-ophthalmology
- (7) Neuro-ophthalmology
- (8) Ophthalmic Pathology
- (9) Others

(d) **Possession of proper professional ethics and conduct.**

2. Higher Training (4 years)

Mainly a consolidation of the experience gained in both Diagnostic skills and Surgical skills during the basic training period. Some supervision may be needed in the early stages. However, more and more surgical independence may be granted as time goes by. Trainees are expected to rotate through various subspecialties to consolidate their training, these include:

- Cornea and External Eye Diseases
- Vitreo-retinal diseases
- Glaucoma
- Paediatric Ophthalmology
- Oculoplastic and Orbit
- Medical-ophthalmology
- Neuro-ophthalmology
- Others

During higher training, the trainee may choose a subspecialty of his special interest to prepare himself for specializing in a specific field. A period of overseas training and attendance to overseas conference is highly desirable during this stage. Research is also encouraged.

At the end of higher training, the surgical experience should include a minimum of:-

1. 100 cataract operations
2. 15 squint operations
3. 15 glaucoma operations
4. 60 laser operations
5. 5 vitreoretinal operations
6. 3 keratoplasty operations

The operative results and the complications should be entered into the log book for inspection during the exit exam.

G) Criteria for the recognition of a Training Post in Ophthalmology by the College of Ophthalmologists

- 1) The post must be in a Service Unit (hereafter referred as "unit") with minimum 3 full time trainers* specializing in the field of ophthalmology.
- 2) There must be a minimum trainer to trainee ratio of 1:3.
- 3) The post must be in a unit in which the workload is in the field of Ophthalmology. It must provide adequate experience in both out-patient clinics and in-patient care.
- 4) The post must give sufficient experience of ophthalmic surgery and there must be opportunities to operate under supervision. Holder of the post should be involved in a duty roster which exposes him/her to adequate continued medical and surgical ophthalmic emergencies.
- 5) There shall be a training programme preferably occupying one whole half day each week and consisting of lectures by visiting speakers, journal club meetings, case presentation and Grand Rounds.
- 6) A trainee in training programme should have experience in the major specialized areas of Ophthalmology including ocular motility, paediatric ophthalmology, vitreo-retinal diseases, anterior segment diseases, external diseases, oculoplastics, orbit and neuro-ophthalmology diseases and rotations may be allowed so that such experience can be gained by the trainee, but the rotational program must be pre-approved by the College.
- 7) For a trainee in higher training, time may be allocated for research projects. One of the trainers should be responsible for supervising research.
- 8) Some forms of regular medical surgical audit are essential and a trainee must keep a log book or record of his/her operative experience and overall general performance. The log book or record should regularly be inspected and commented by his/her respective trainer.
- 9) The training post must be closely associated with a hospital providing twenty four hours accident and emergency service and should have no limitation to the management and admission of patients with ophthalmic diseases and emergencies.
- 10) The training post must be in or closely associated with a hospital in which there are twenty four hours anaesthetic, laboratory, radiology and other diagnostic services.
- 11) The training post must be in or closely associated with a hospital consisting of medical, surgical, paediatric and other related specialties.
- 12) There must be suitable library facilities.
- 13) The training unit must possess a reasonable up-to-date ophthalmic equipments and instruments for the normal running of the unit.
- 14) The training unit must inform the College of any changes in the institution affecting the above criteria.

A trainer must be a fellow of the HK Academy of Medicine (Ophthalmology)

Letterhead of FACULTY OF MEDICINE
THE CHINESE UNIVERSITY OF HONG KONG

March 1, 2000

Dr S P Hui
President of the College of
Ophthalmologists of Hong Kong
Room 802, 8th Floor,
Hong Kong Academy of Medicine Jockey Club Building,
99 Wong Chuk Hang Road,
Aberdeen,
Hong Kong

Dear Dr Hui,

Enclosed herewith the information is for your reference.

Thank you very much.

Yours sincerely,

Dr Alvin K H Kwok
Director of Medical Student Teaching
Department of Ophthalmology & Visual Sciences
The Chinese University of Hong Kong

c.c. Professor Dennis S C Lam
Chairman of Department of Ophthalmology & Visual Sciences
The Chinese University of Hong Kong

AK/II

The curriculum of the two medical schools in Hong Kong is similar. It is divided into pre-clinical and clinical sections.

In the first few years that comprise the pre-clinical session, various disciplines related to the physiological and pathological conditions of the human body are taught. As the eye is an important structure of the human body, it is included in this comprehensive teaching approach of various disciplines. For example, the eye structures are detailed in anatomy, the functions are taught in physiology, the neural connections are discussed as part of the brain, the organisms involved in eye infections are included in microbiology and basic immunological principles related to eye diseases are part of the immunology programme.

During the subsequent clinical session that occupies the last few years of the curriculum, there is a two-week period in which intensive eye training is given, which includes examination of patients with eye diseases, exposure to live surgery and laser treatment and small group tutorials. Emphasis on ocular manifestations of systemic diseases is particularly revisited during their rotation in other clinical specialties. For instance, the importance of disc swelling in neurosurgical diseases, visual field deficits in endocrine and neurosurgical diseases, retinopathy in diabetic patients are only a few of the many examples.

CURRICULUM OF MEDICAL DEGREE

THE CHINESE UNIVERSITY OF HONG KONG

The Faculty of Medicine offers a five-year professional undergraduate programme in medicine leading to the degrees of Bachelor of Medicine and Bachelor of Surgery (MBChB). This is a single, integrated, module-based major programme which provides two years of pre-clinical studies and three years of clinical studies.

PRE-CLINICAL COURSES

First Behavioural and Social Sciences

First to Fourth Family follow-up project

(part of Behavioural and Social Sciences Course)

First & Second Anatomy

Physiology

Biochemistry

Pharmacology

CLINICAL COURSES

Third Introductory Clinical Course

Junior Medical Clerkship and

Junior Surgical Dressership

Medicine Core Lectures and Therapeutics/

Clinical Pharmacology Lectures

Anatomical and Cellular Pathology

Microbiology

Chemical Pathology

Fourth

Community and Family Medicine

Obstetrics and Gynaecology

Paediatrics

Psychiatry

Elective

Fifth

Senior Medical Clerkship and

Senior Surgical Dressership

CURRICULUM OF MEDICAL DEGREE

THE UNIVERSITY OF HONG KONG

FIRST AND SECOND YEARS

During the first and second years of the course there will be an integrated curriculum which will cover anatomy, biochemistry, physiology, health behaviour and medical care, an introduction to biostatistics, pharmacology, principles of microbiology and applied microbiology, principles of immunology, pathology and systemic pathology and an introduction to medicine and surgery.

THIRD YEAR

The third year of the course comprises the integrated block and the core programme of clinical clerkship.

There is an emphasis on the diagnosis of common clinical problems with regular revisiting of the pre-clinical sciences and the themes of biological, behavioural, population and clinical sciences. There will be integrated teaching of pre-clinical and clinical sciences.

FOURTH AND FINAL YEARS

Students will undertake further learning in a variety of clinical disciplines including medicine, surgery, obstetrics and gynaecology, orthopaedic surgery, paediatrics and psychiatry. Pre-clinical sciences and the themes of biological, behavioural, population and clinical sciences will be regularly re-visited. Clinical and clinical communication skills will be reinforced. There will also be integrated teachings on medical jurisprudence and medical ethics.