The ROYAL COLLEGE of OPHTHALMOLOGISTS

OST Curriculum 2024

Level 4 Learning Outcomes and descriptors

Patient Management Domain

Cornea and Ocular Surface Disease (ii)

Level 4	
Learning Outcome	**Descriptors**
An ophthalmologist achieving this level will, in addition:	
Demonstrate advanced clinical management and surgical skills.	▪ Demonstrate competency in diagnosis, investigation and management of complex corneal, ocular surface and anterior segment disease in outpatients, inpatients and emergency settings. ▪ Have skills in cataract surgery to Level 4. ▪ Have advanced cataract surgery skills to manage high risk cataract surgery including, but not limited to, surgery in the presence of pre-existing corneal abnormality. ▪ Demonstrate advanced understanding in the use and interpretation of specialised investigations for assessment of the cornea including, but not limited to: - corneal topography - specular microscopy - confocal microscopy - Anterior Segment OCT ▪ Understand the indications, complications and management of topical and systemic immunosuppression. ▪ Perform corneal and ocular surface surgery independently including, but not exclusively: - corneal grafting (penetrating, lamellar, tectonic and endothelial) - ocular surface biopsy - pterygium surgery and amniotic membrane grafting - conjunctival manipulation - cross-linking ▪ Manage the anterior segment complications of cataract surgery including, but not exclusively, management of refractive surprise and pseudophakic bullous keratopathy.

Manage the complexity and uncertainty of cornea and ocular surface disease cases.	▪ Understand and apply advanced knowledge of corneal and ocular surface conditions and practice. ▪ Independently manage corneal and ocular surface disease clinics and theatre lists. ▪ Diagnose and manage complex conditions including, but not limited to: - atypical infectious keratitis (e.g. acanthamoebic, fungal, neurotrophic, viral) - autoimmune and immunological disease - neoplasia - non-infectious (e.g. conjunctivitis medicamentosa, non-accidental injury) ▪ Manage refractive surgery complications; advise on lens calculations following laser refractive surgery and management of astigmatism. ▪ Knowledge of new generations of intraocular lens formulae and implications to corneal practice. ▪ Apply knowledge and skills in a flexible manner. ▪ Utilise existing skills to novel situations. ▪ Adapt management strategies to take account of patients' informed preferences, particular circumstances, age and co-morbidities, respecting patient autonomy. ▪ Manage the uncertainty of treatment success or failure and communicate effectively with patients were there is uncertainty. ▪ Manage the personal challenge of coping with uncertainty. ▪ Evaluate published developments in cornea and ocular surface knowledge and practice and modify own practice appropriately. ▪ Recognise and refer patients who will benefit from more specialist input.
Apply management and team working skills appropriately, including in complex, dynamic situations.	▪ Give specialist advice to non-corneal and ocular surface disease specialists. ▪ Use highly developed consultation skills efficiently to manage busy corneal and external eye disease clinics whilst managing patient expectations. ▪ Assist with decision-making where there are cognitive impairment barriers, employing Independent Mental Capacity Advocate (IMCA) services or equivalent if necessary. ▪ Understand how culture or religious beliefs can affect patients' decision making and needs, and communicate these effectively to the team. ▪ Be sensitive to social situations and the impact these may be having on the patient, their carers and their disease. ▪ Understand when information must be shared more widely with schools, carers, police, etc. and understand the responsibilities and implications of sharing information.

	▪ Receive and respond to communications in complex or challenging situations, especially liaison with high-risk patients of losing eyesight e.g. glaucoma, oculo-plastics. ▪ Give specialist advice to non-corneal and ocular surface disease specialists. ▪ Liaise and support colleagues from other subspecialties, to optimise patient care, when co-management is required. ▪ Promote professional values within the team. ▪ Work as a collaborative member of a team, respecting differences of opinion. ▪ Accept constructive and appropriately framed criticism. ▪ Support colleagues. ▪ Be an advocate for patients. ▪ Manage significant events and complaints, including writing formal reports. ▪ Understand and follow local policies in response to complaints.
Be an effective supervisor, teacher and trainer of ocular surface disease.	▪ Participate in education/training of medical students/junior trainees, and allied health professionals in cornea & ocular surface disease. ▪ Supervise and accredit/sign off trainees to Level 3 in cornea and ocular surface. This includes supervising simple cornea and ocular surface procedures and surgery to Level 3, such as corneal trauma repair. ▪ Supervise and provide objective assessment of other surgical competency at Level 3 (e.g. WpBA such as DOPS or OSATS). ▪ Supervise allied professionals in the delivery of cornea and ocular surface care under guidance of local governance.

The indicative time for training at this level is **up to 18 months** of full-time equivalent.