



The **ROYAL COLLEGE** *of*
OPHTHALMOLOGISTS

OST Curriculum 2024

Level 4 Learning Outcomes and descriptors

Patient Management Domain

Ocular Motility (viii)

Level 4	
Learning Outcome	Descriptors
<i>An ophthalmologist achieving this level will, in addition:</i>	
Demonstrate advanced clinical management and surgical skills.	▪ Demonstrate competency in diagnosis, investigation and management of children and adults with ocular motility disease in outpatients, inpatients and emergency settings. ▪ Decide when to treat strabismus conservatively or surgically. ▪ Demonstrate competence in choosing surgical dosages, choosing appropriate muscles (and side) and choosing the appropriate procedure based on published evidence criteria. ▪ Perform strabismus surgery independently, including, but not exclusively, horizontal and vertical, strabismus, muscle transpositions and oblique muscle surgery. ▪ Demonstrate skills and knowledge to manage all potential strabismus surgery including revisional or re-do surgery and complications of strabismus surgery. ▪ Demonstrate competence in choosing the appropriate timing and type of surgery for: - 3rd, 4th and 6th nerve palsies - thyroid eye disease and Duane and Brown syndromes - strabismus associated with orbital trauma and nystagmus ▪ Demonstrate competence in non-surgical (orthoptic and medical) management of ocular motility disorders including: - Phorias - small angle strabismus - intermittent exotropia - nystagmus - thyroid eye disease - blow out fractures - ocular myopathies ▪ Demonstrate competence in management of diplopia including intractable diplopia. ▪ Demonstrate competence in the use of evidence-based protocols for amblyopia management.

	▪ Demonstrate competence in the indications and performance of botulinum toxin injections to extraocular muscles for ocular motility disorders. ▪ Undertake prospective audit of strabismus procedures. ▪ Maintain a record of activities, using the RCOphth electronic logbook.
Manage the complexity and uncertainty of ocular motility cases.	▪ Understand and apply advanced knowledge of complex ocular motility disorders. ▪ Independently manage ocular motility clinics and theatre lists. ▪ Diagnose and manage complex ocular motility disorders including but not limited to: - comitant and incomitant strabismus - nerve palsies - nystagmus - congenital cranial dysinnervation disorders - thyroid eye disease - ocular myopathies - patients with previous multiple strabismus procedures - patients with motility defects in craniofacial syndromes and secondary to glaucoma tube surgery and vitreoretinal surgery ▪ 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 where there is uncertainty. ▪ Manage the personal challenge of coping with uncertainty. ▪ Evaluate published literature of developments in ocular motility disorders 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.	▪ Use highly developed consultation skills efficiently to manage busy 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. ▪ Give specialist advice to non ocular-motility specialists. ▪ Liaise and support colleagues from other specialities, particularly neurology, neuro-ophthalmology, oculoplastic and maxillofacial colleagues to optimise 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 motility disease.	▪ Participate in education/training of medical students/junior trainees, and allied health professionals in ocular motility. ▪ Supervise and accredit/sign off trainees to Level 3 in ocular motility disorders. This includes supervising horizontal squint surgery to Level 3, e.g. supervise and teach forced duction tests, resect and recession procedures.

The indicative time for training at this level is **12-18 months** of full-time equivalent.