The RANZCO Vocational Training Program

The objective of the RANZCO Vocational Training Program [VTP] is to produce a specialist ophthalmologist who, on completion of training, is equipped to undertake safe, independent, comprehensive, general ophthalmology practice.

The VTP Curriculum Overview

This overview describes how the objective of the VTP will be achieved and consists of multiple interdependent components:

- General Ophthalmology Competencies
- Domain Learning Outcomes
- Overview of Domain Content
- Learning and Teaching Approaches
- Assessment
- Evaluation and monitoring

RANZCO VTP General Ophthalmology Competencies

The General Ophthalmology Competencies reflect the knowledge, skills and professional attributes for beginning and independent and competent Ophthalmic practice in Australia and New Zealand. The outcomes reflect the clinical, surgical and professional capabilities of the graduating RANZCO ophthalmologist:

A Graduate of the RANZCO Vocational Training Program will be able to:

<table>
<thead>
<tr>
<th>GO 1</th>
<th>Lead and manage the ophthalmic condition of a patient within multidisciplinary and interdisciplinary teams, with good judgement, self-management and ethical understanding.</th>
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<tbody>
<tr>
<td>GO 2</td>
<td>Clinically diagnose the condition of a patient to formulate appropriate management plans, including undertaking an accurate history, applying the principles of the basic ophthalmic sciences and general and specialist medical knowledge, and interpreting the appropriate medical or ophthalmological investigations.</td>
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<tr>
<td>GO 3</td>
<td>Communicate effectively and manage information efficiently and confidentially in order to establish patient rapport and trust, formulate a diagnosis, gain and deliver information and facilitate a shared plan of ophthalmic care.</td>
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<tr>
<td>GO 4</td>
<td>Evaluate and be inclusive of the needs of diverse patients, colleagues and communities, including Aboriginal and Torres Strait Islander Australians, Māori of New Zealand, Pasifika and culturally and linguistically diverse populations, to provide quality, culturally safe ophthalmic care.</td>
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<td>GO 5</td>
<td>Competently and independently perform and manage best-practice diagnostic and therapeutic ophthalmic surgical or laser procedures.</td>
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<td>GO 6</td>
<td>Plan, implement, report and evaluate ophthalmic research and integrate into evidence-based ophthalmic practice</td>
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<td>GO 7</td>
<td>Evaluate and implement ethical frameworks in clinical practice and research, including critical reflection on personal values and behaviours in the context of relevant legislation.</td>
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<tr>
<td>GO 8</td>
<td>Enhance areas of personal and professional competence by engaging in reflective practice, quality improvement, clinical audit processes, and teaching and mentoring others.</td>
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<tr>
<td>GO 9</td>
<td>Advocate for patient wellbeing and contribute to community health promotion and disease prevention.</td>
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Domain Learning Outcomes

Domain 1: Foundation Skills & Knowledge

The Foundation and Skills Domain covers the fundamental knowledge, skills and behaviours of the basic sciences, including critical thinking, relevant to the clinical practice of ophthalmology. This domain is essential knowledge for the Clinical Ophthalmology Domain and the Procedural Ophthalmology Domain.

The Foundation Skills & Knowledge are reinforced throughout the training programme as trainees study the specialised ophthalmological areas in the Advanced Stages.

BA.1 Develop, apply and maintain the relevant knowledge base and critical understanding of theoretical and practical clinical sciences, pharmacology and pathology underpinning the practice of clinical Ophthalmology.

Domain: Clinical Ophthalmology

The Clinical Ophthalmology domain outlines the core knowledge, skills and behaviours essential to the safe and effective practice of clinical ophthalmology.

The Essentials of Clinical Ophthalmology outline key learning outcomes that are applicable to all specialised areas and the foundation principles required to effectively evaluate and manage all patients.

CL.1 Communicate effectively with patients and their carers and assist them to develop a basic understanding of eye disease and their role in its management.

CL.2 Obtain and record an accurate and detailed medical and ocular history to aid in the diagnosis and treatment of eye disease.

CL.3 Evaluate, perform and document the results of appropriate eye assessments and investigations necessary to assess visual function and aid in the diagnosis and management of eye disease.

CL.4 Formulate sound clinical decisions and diagnoses by synthesising, evaluating and applying the principles of the relevant basic ophthalmic sciences.

CL.5 Apply epidemiology and evidence-based practice into clinical ophthalmology.

CL.6 Create, implement and evaluate effective management plans, which consider the patient’s condition and social and economic context.

CL.7 Evaluate and prescribe pharmaceutical agents relevant to safe and effective treatment of eye disease and manage any ocular and systemic side effects.

CL.8 Collaborate with health professionals and other doctors to provide patient-centred eye care and to prevent or manage vision loss caused by eye disease.

Domain: Procedural Ophthalmology

The Procedural Ophthalmology domain outlines the core knowledge, skills and behaviours essential to the safe and effective practice of ophthalmological procedures.

The Essentials of Procedural Ophthalmology constitute key learning outcomes that are applicable to all procedures in Procedural Ophthalmology.

PR.1 Evaluate indications and contradictions before performing ophthalmological surgery to formulate a surgical plan, including obtaining informed surgical consent from the patient.

PR.2 Apply a thorough understanding of pharmacology, anatomy, physiology, optics and pathology of the eye to the performance of ophthalmological procedures.

PR.3 Evaluate and use instruments, materials and equipment to perform ophthalmological procedures safely and effectively.

PR.4 Recommend appropriate anaesthetics and perform local anaesthetics relevant to safe and effective Ophthalmological procedures.

PR.5 Employ appropriate technical skills in the performance of safe and effective ophthalmic laser and surgery.

PR.6 Evaluate, design and perform measures to manage relevant peri-operative complications and emergencies.

PR.7 Design and implement post procedural plans and procedures.
Domain: Professional Ophthalmology

The Professional Capabilities domain underpins all key professional knowledge, skills and behaviours in the provision of high-quality ophthalmological care for patients. **Professional capabilities** are learnt and taught in conjunction with Medical and Procedural Ophthalmology and integrated throughout the curriculum.

PC. 1 Engage in **culturally safe and sensitive communication** that facilitates trust and the building of respectful relationship with patients, carers and other health professionals.

PC.2 Evaluate the **impact of culture and unconscious bias** on the health outcomes of diverse patients, colleagues and communities, including Aboriginal and Torres Strait Islander Australians, Māori, Pasifika and culturally and linguistically diverse populations, in order to meet eye health needs.

PC.3 **Advocate** for sustainable healthcare and wellbeing and disease prevention with individual patients, communities and populations.

PC.4 Demonstrate the commitment to investigate, evaluate and continuously improve the care of patients to ensure **safe, high quality care**.

PC.5 Actively engage in the **leadership and management** of the healthcare system and **interdisciplinary and interprofessional teams** in order to ensure the effectiveness of work practices.

PC.6 Evaluate and implement **ethical frameworks in clinical practice** and research, including critical reflection on personal values and behaviours in the context of relevant legislation.

PC.7 Engage in **scholarly activity**, continuous professional development, audit and reflective practice, as well as contributing to the teaching and mentoring of trainees and colleagues.
Overview of Domain Content

Note that the list of content listed in each domain is not exhaustive and is included as a guide only

### Domain: Foundation

**Skills & Knowledge**

- **Anatomy**
  - The eyeball
  - Orbit and ocular adnexa
  - Neuro anatomy
  - Skull, scalp, face and neck
  - Interpreting Imaging
- **Optics**
  - Physical Optics
  - Geometrical Optics
  - Physiological Optics
  - Ophthalmic Instruments
- **Physiology**
  - Lids, cornea, sclera and ocular surface
  - Lens, accommodation and emmetropisation
  - Aqueous Physiology and ocular blood supply
  - Vitreous and retina
  - Pupillary reflexes and visual pathways
  - Paediatrics, binocular vision and ocular motility
  - Visual perception and its physiological basis
- **Pharmacology**
  - General principles
  - Ophthalmic medications: their uses and side effects
  - Systemic medications: ophthalmic conditions; non-ocular and ocular side effects
- **Pathology**
  - General ophthalmic pathology, including immunology
  - Microbiology
  - Genetics
  - Clinical ophthalmic pathology
  - Interpreting pathology tests and slides

### Domain: Professional Capabilities

**Scholarly Activity**

- Research
- Learning and teaching
- Evidence-based ophthalmic practice
- Reflective practice

**Safe, high quality care**

- Patient safety
- Cultural safety
- Interpreters and support persons
- Patients with disabilities
- Peer review and clinical audit processes

**Communication**

- Patient centred, respectful communication
- Acknowledge cultural and linguistic diversity
- Prevent and resolve conflict
- Effective written and digital communication

**Cultural Safety**

- Cultural values and paradigms
- Appreciation of cultural diversity
- Awareness of unconscious bias
- Awareness of stereotyping and discrimination
- Unique place of Aboriginal Torres Strait Islander; Māori; Pasifika
- Impact of history and colonisation

**Health Advocacy**

- Determinants of health
- Epidemiology and public health
- Individuals, communities & populations
- Health promotion and health care system
- Ethical and professional issues
- Public policy

**Collaboration**

- Interprofessional and intra-professional roles and responsibilities
- Intra-professional and interprofessional teamwork
- Care collaboration and planning
- Referral
- Health-care system structures

**Leadership and management**

- Allocation of finite resources
- Cost appropriate care
- Risk-management
- Patient records
- Decision-making and complex negotiations

**Ethics**

- Ethical behaviours: Patient confidentiality
- Discrimination, harassment and bullying
- Reciprocal obligations and clinical decision making
- Conflicts of Interest
- Regulatory and legal obligations
- Sustainable health care
Domain: Procedural Ophthalmology

**Essentials of Procedural Ophthalmology**
- Pre-procedure assessment and surgical informed consent
- Anatomy, physiology, optics and pathology
- Instruments, materials and equipment
- Sterilisation techniques and infection control
- Anaesthetics and peri-operative management
- Performing Basic Ophthalmic Surgery Independently (Level 1 Procedures)
- Managing perioperative complications and emergencies
- Wound treatments and wound healing
- After-care and post-procedural plans and procedures
- Managing a surgical team, including access to other specialists in emergency

**Microsurgical Skills**
- High magnification loupes
- Micro-instruments
- Needles; sutures; knots
- Using the microscope

**Ophthalmic Emergencies and Trauma**
- Blunt trauma
- Blow out fracture
- Chemical Burns
- Endophthalmitis
- Hyphaema
- Intraocular foreign body
- Ocular trauma
- Removal of corneal foreign body/abrasion/rust rings
- Repair of penetrating eye injury
- Retinal/Vitreous injury
- Vitrectomy

**Surgical**
- *Including, but not limited to:*
  - Botox injection
  - Corneal grafting: all procedures
  - Cyclodiode laser
  - Enucleation; evisceration
  - Glaucoma surgery: all procedures
  - Incision and curettage of chalazion
  - Intravitreal injection
  - Laser for retinal tear
  - Laser Refractive surgery
  - Lower lid surgery: LTS, (Lateral tarsal strip), wedge resection, entropion, ectropion, laceration repair
  - Paediatric EUA (examination under anaesthesia)
  - Paediatric syringe and probe
  - Pan retinal photocoagulation PRP
  - Penetrating eye injury
  - Peribulbar or sub tenons block
  - Phacoemulsification cataract surgery
  - Pterygium excision with conjunctival graft
  - Selective laser trabeculoplasty SLT
  - Squint procedure, Strabismus
  - Sulcus intraocular lenses [IOL]
  - Temporal artery biopsy
  - Upper lid surgery: blepharoplasty, ptosis, wedge resection
  - YAG laser capsulotomy
  - YAG laser peripheral iridotomy

Domain: Clinical Ophthalmology

**Essentials of Clinical Ophthalmology**
- Communication
- History Taking
- Informed Consent
- Eye Assessments and Investigations
- Clinical Assessment
- Evidence-based Practice & Epidemiology
- Medical Management Plans
- Collaborative Care

**Specialisations**
- Cataract and Lens
- Cornea and external eye disease
- Glaucoma
- Low vision and Vision rehabilitation
- Neuro-ophthalmology
- Ocular Inflammation
- Ocular Motility
- Ocular oncology
- Oculoplastics and orbit
- Ophthalmic trauma
- Paediatric
- Vitreoretinal Disease
- Uveitis
- Special Populations
  - Aboriginal and Torres Strait Islander
  - Maori
  - Pasifika
- Culturally and Linguistically Diverse Populations
Stages of the RANZCO Fellowship Program

**Basic Training (Year One & Year Two):** Trainees are expected to demonstrate foundation ophthalmic skills, knowledge and critical thinking milestones across all domains during the two years of Basic Training. This includes their understanding of ophthalmic diseases and clinical management. In particular, the Induction Phase that occurs prior to Basic Training ensures that trainees have core foundational knowledge of the Professional Capabilities (for example, communication skills and cultural safety); training in ocular pharmacology, operating with respect and managing acute eye conditions.

**Advanced Training (Year Three and Year Four):** Trainees are expected to demonstrate milestones which indicate integrated application of foundation skills and knowledge to clinical and surgical practice in both subspecialty and cross-specialty areas of ophthalmic practice. Trainees re-visit and integrate all domains of the curriculum and demonstrate skills and knowledge of increasing complexity and with growing independence. There is increased responsibility for patients, assisting with management plans and diagnoses and trainees may be assigned greater responsibilities within clinical teams.

**Final Year Training:** In the final year of the VTP trainees consolidate their specialist experience in preparation for the specialist ophthalmic qualification and to function in the community as a safe, independent, comprehensive, general ophthalmologist. Graduates can provide tailored, patient-centred eye care to individuals and communities and consistently demonstrate the Broad Course Outcomes. Trainees are also able to undertake subspecialist training in their fifth year.

Learning and Teaching Approaches

**Work-based Training within training networks:** Vocational training in ophthalmology is undertaken largely by work-based learning in the clinical context and vocational training networks in which trainees are employed as accredited registrars. The clinical rotations are determined by the Director of Training in consultation with the site employer. Clinical settings include hospitals, private practice, community health organisations and outreach clinics. Learning and teaching opportunities are mapped for each network and rotation.

Learning needs and goals for individual trainees are identified early in the placement and teaching and learning planned for groups of trainees according to the opportunities available in each network and clinical rotation. Teaching is integrated into the care of the patient and the role of the trainee may vary according to their level and stage in the training sequence. Typical learning opportunities include patient care conferences, working in interprofessional and intra-professional teams and working as an apprentice in surgery.

**Synchronous training sessions within networks:** Short training sessions relating to specialised aspect of work or procedures. These are primarily lecture based and facilitated by supervisors and tutors.

**Induction Phase for Basic Trainees**

- Cultural Safety training: trainees in New Zealand and Australia respectively complete a Cultural Safety Training Day in their country of practice. This is delivered by doctors and health practitioners who are of the cultural background and focuses on clinical practice and cultural safety.
- Eye-Camp Induction Workshop: orientation to program and handbook; accepting feedback and using it to guide learning; an overview of domains of the curriculum and assessment. It includes training in ocular pharmacology and the management of acute eye conditions.
- Communication Skills and Patient Care Workshop for Inductees: Simulated patients with eye-health problems and role-playing are used in workshops to develop communication, cultural competence and clinical skills at the induction phase.
- Micro-surgical Skills Intensive: a combination of wet-lab, simulator and artificial eye experiences designed to build basic skills in wound repair, oculoplastics and cataract surgery.
- Eyesi Surgical Simulator: A partly supervised training sequence using the Eye-Si Simulator available for all Basic Trainees in the first six months of training and must be completed before working on real patients.

**Other mechanisms to support training include:**

**Online asynchronous learning modules and ePortfolio:** Compulsory and additional learning resources are available on the RANZCO Learning Management System. This includes the ‘Operating with Respect’ training module (anti-bullying and harassment and discrimination training-RACS) and compulsory cultural safety and professional modules. Trainees should engage in these learning opportunities early in their training to gain maximum benefit.

**Feedback is** an essential part of the active learning process for trainees and should be used to guide, improve and plan learning. Learning how to use and accept feedback is a core focus of induction training. Formal and informal feedback opportunities provide an ongoing mechanism for improving skills, understanding and knowledge, and preparing to meet learning outcomes. A RANZCO Fellow is committed to continual professional development and to reflecting on their own experience to gain new insights into their professional practice and working relationships.
Assessment

Assessment is a continuous and programmatic process, linked to the learning outcomes, teaching approaches and course design of the VTP. Mastery of the knowledge, skills and behaviours is assessed via multiple assessment types and the appropriate level of mastery that the trainee needs to achieve to progress to the next level is indicated in the assessments. All domains are assessed equally. The VTP Assessment Framework (see Attachment A) outlines the approaches taken to ensure a trainee has developed the competencies required to undertake, safe, comprehensive practice as a general ophthalmologist and is ready to transition to independent practice.

Both formative and summative assessment opportunities are provided for trainees and all assessment should contribute to learning.

Formative: Information is obtained from a range of assessment tools and provides feedback to trainees for their own learning and readiness to progress. The Trainee Progression Committee uses this data to review the trainees’ readiness to progress and identify trainees requiring additional support.

Summative: Information is gained from multiple sources to assess all domains and is used to assess whether the trainee has achieved the course objectives at the required standard.

Assessment includes the following items and is recorded in the Trainee ePortfolio:

- Term Assessments: Intentions for the Term Form; Final Term Report.
- Theatre Performance Report (OSAT)
- Examinations: Ophthalmic Sciences; Ophthalmic Basic Clinical and Knowledge Exam (OBCK); Advanced Clinical Written (RACE) and Objective Structured Clinical (OSCE)
- Surgical audit and logbook; Entrustable Professional Activities and Minimum Numbers of Procedures
- Surgical simulator module tasks
- On-line learning module assessments
- Workshop assessments
- Critical assessment of scientific papers

Evaluation

Curriculum evaluation and monitoring is an essential and reiterative part of the education process for the VTP. It establishes that what has been outlined corresponds with the curriculum in action, ensures quality improvement and informs curriculum development. Learning approaches, activities and resources should be effective and enjoyable and are purposefully evaluated. Evidence is gathered to ascertain how well trainees’ learning objectives are being achieved and whether teaching standards are being maintained.

The VTP Evaluation Framework provides the goals of the evaluation, including reference to the:

- RANZCO Supervisor Framework and Online Learning Quality Framework
- Graduate Feedback survey

Acknowledgements

Curriculum Committee

Dr. Harris Ansari, Ms. Victoria Baker Smith, Dr. Thomas Campbell; Dr. Rahul Chakrabarti, Dr. Colin Chan, Dr. Max Conway, Ms. Ellen Cooper, Mr. Dinesh Garg, Dr. Justin Gladman, Dr. Patrick Lockie, Dr. Eugene Michael, Dr. Maria Moon, Dr. Justin Mora (Chair), Mr. Glenn Petrusch, Dr. Nisha Sachdev, Dr. Chameen Samarawickrama; Dr. Kiran Sindhu, Dr. Nicholas Toalster, Dr. Andrew Thompson, Dr. Jane Wells, Dr. Ehud Zamir.

Document History

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<th>Version</th>
<th>Date</th>
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<tr>
<td>V 1.0</td>
<td>01.06.20</td>
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<tr>
<td>V 2.0</td>
<td>19.03.21</td>
<td>Curriculum Committee</td>
<td>Approval Curriculum Committee 'Medical' heading updated to 'clinical'; Programmatic assessment overview updated.</td>
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</table>
Appendix A: Programmatic Assessment RANZCO VTP

**PROGRAMMATIC ASSESSMENT**
Blueprinted to all key domains, including the Professional Domain, with Induction information carried into the TPC Portfolio. Selection tools: CVs, References, Situational Judgment Tests, Multiple Mini-interviews. Positive discrimination for Indigenous and rural applicants.

**INDUCTION**
Induction Eye-Camp covers communication skills, ophthalmic emergencies, basic pharmacology, cultural safety, accepting and using feedback to guide learning, managing on the VTP, and micro-surgical skills training.

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### BASIC TRAINING (2 years)

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<thead>
<tr>
<th>Year 1</th>
<th>Year 2</th>
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<td><strong>LEARNING OPPORTUNITIES</strong></td>
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<td><strong>Professional</strong></td>
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<td>Online modules (COPEM; Basic Sciences), tutorials OSATS, Simulation</td>
<td>Online modules, tutorials OSATS, Simulation, Audit</td>
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<td>Journal clubs</td>
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<td>Online modules, mentoring, Experiential learning in the workplace</td>
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<td>Reflective practice and self-guided learning</td>
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<tr>
<td><strong>Basic Sciences</strong></td>
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<tr>
<td>Basic Sciences, OBCK, COPEM</td>
<td>Term reports, portfolio, online module assessment</td>
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<tr>
<td>Weekly OSATS, surgical logbook</td>
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<td><strong>FORMATIVE ASSESSMENTS</strong></td>
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**ADVANCED TRAINING (2 years)**

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**FINAL YEAR (1 year)**

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**Key:**

21-month Progression review
45-month Progression review
60-month Progression review