

NATIONAL POSTGRADUATE MEDICAL COLLEGE OF NIGERIA



**LOGBOOK FOR SUBSPECIALTY OF CORNEA AND
ANTERIOR SEGMENT**

FACULTY OF OPHTHALMOLOGY

APPROVED BY THE SENATE ON 2ND MARCH, 2023



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COLLEGE REGISTRAR**



NATIONAL POSTGRADUATE COLLEGE OF NIGERIA

FACULTY OF OPHTHALMOLOGY

THE LOG BOOK

FOR

CORNEA AND ANTERIOR SEGMENT SUBSPECIALTY

2022

Resident's Name

Name of Training Institution

Date of Commencement of Training

Name and Signature of Supervisor(s)

PREAMBLE

The Fellowship training in cornea and anterior segment requires more in-depth education about the pathophysiology and management of relevant ophthalmic diseases than can usually be obtained in residency (registrar or equivalent) training in ophthalmology. The Fellowship training includes a continuous period of intense and focused training in developing and maintaining knowledge, skills, scholarship, and professionalism. The training aims at graduating specialist ophthalmologists competent to lead the eye care team and for the effective eye health care delivery of relevant diseases in Nigeria. The training is conducted in hospitals accredited for this purpose. The training programme is structured to enable a graduated acquisition of more knowledge and advanced skills as the trainee progresses in training.

The training duration is for 3 years after Passing Part I Fellowship examination.

(a) General Ophthalmology rotations in the first year, followed by:

(b) 2 years dedicated rotation in the cornea and anterior segment subspecialty

The competences required to be acquired:

Subspecialty fellowship training for cornea, external disease, cataract, and refractive surgery includes:

1. Diagnosis and medical management of diseases of the eyelid, conjunctiva, cornea/sclera, and anterior ocular segment and lens;
2. Recognition and treatment of posterior segment disease that may affect the anterior segment;
3. Surgery of the conjunctiva, cornea/sclera, anterior segment, lens, and anterior vitreous, with special emphasis on corneal transplantation and related procedures;
4. Principles of contact-lens fitting and management of complications of contact-lens wear; and
5. Principles and practice of keratorefractive surgery.*

The minimum surgical/procedure experience expected for the subspecialty is as detailed below. The supervising consultant ophthalmologist should assess and certify these surgical procedures as at when performed. For this purpose, the candidates should maintain a Faculty-approved log- book.

1. Mastering examination techniques, including biomicroscopy, vital stains of the ocular surface, and special diagnostic testing (e.g., specular microscopy, corneal topography/tomography, high-resolution ultrasonography, anterior-segment OCT, confocal microscopy, and corneal pachymetry). In addition, fellows should be familiar with impression cytology, corneal-scraping interpretation of microbiology results, and corneal-biopsy techniques and interpretation. [M]
2. Fundamentals of refractive surgery and its complications, with special emphasis on forms of keratorefractive surgery, including laser vision correction procedures (e.g., laser-assisted stromal in situ keratomileusis [LASIK] and surface ablation), with an understanding of the different ablation profiles and an understanding of the preoperative evaluations, including topography/tomography and aberrometry.* Additionally there should be either experience or lectures on incisional surgery, thermal keratoplasty, alloplastic inserts, and phakic IOL's. [S for non-refractive fellowship programs; M for programs including refractive surgery]
2. Skill in anterior-segment surgery, including eyelid, conjunctival, scleral, and corneal procedures, with emphasis on corneal protective procedures (e.g., tarsorrhaphy), conjunctival or amniotic membrane grafts, reconstruction of the ocular surface, surgical management of corneal erosions, and phototherapeutic keratectomy. [M]
3. Skill in penetrating and lamellar keratoplasty, including full thickness transplant and selective transplantation, including endothelial keratoplasty and anterior lamellar keratoplasty, with emphasis on patient selection, surgical technique, and postoperative care. This should include recognition and management of graft rejection and endophthalmitis. The fellow should have knowledge of different techniques of keratoprosthesis surgery. [M]
4. Skills in and knowledge of contact lens physiology, design, and materials; and complications for both cosmetic and therapeutic use. [S]
5. Medical and surgical management of corneal thinning and perforation, including techniques of pharmacological manipulation; and office procedures such as application of tissue glue and therapeutic contact lenses. [M]
6. Medical and surgical management of complications of intraocular lenses (IOLs), including but not exclusive to, dislocated IOLs, suturing IOLs, iris suturing, and visual aberrations; and complications

related to single vision and multifocal IOLs. Specialized phacoemulcification and manual small incision surgical techniques. [M]

7. Eye-banking, including a review of specific eye-banking functions (e.g., recovery, processing, storage, evaluation, distribution of tissue, and donor eligibility). [S]
8. Skills in use of reference material, including electronic searching and retrieval of relevant articles, monographs, and abstracts. [M]

COURSE STRUCTURE

Three years to be spent in the accredited training institution undergoing clinical rotations in Cornea and anterior segment SUBSPECIALTY and other relevant specialties

Develop a project and write up a dissertation for defense at the examinations.

ACTIVITIES TO UNDERTAKE IN ACHIEVING THE STATED LEARNING EXPECTATIONS

Specific Activities to be undertaken to achieve the stated objectives include but not limited to the following:

1. Ward rounds
2. One detailed case presentation by residents during weekly ward rounds
3. Post-ward rounds: round up discussions
4. Reading assignments including review of journals & Essay writing
5. Tutorial sessions
6. Attendance to special procedure sessions
7. Regular bedside teaching/tutorials for medical students and residents.
8. Attendance to cornea and anterior segment update courses and conferences.

Training Evaluation:

Trainees will be required to keep a logbook of cornea cases managed (including multidisciplinary team management) and procedures carried out.

Evaluation format: This will consist of formative assessment and examination;

Formative:

Logbook documentation of:

- a) Clinical cases discussed
- b) Counselling sessions undertaken
- c) Out of Station rotation experiences
- d) Procedures observed and performed
- e) Journal articles reviewed/presentations at Grand Rounds
- f) Tutorial sessions
- g) Essay writing

ASSESSMENT/SCORE SHEET FOR MANDATORY PRESENTATIONS

Title of Lecture:-----

Date/Time:-----

Name of Assessor:-----

Designation of Assessor:-----

• **GRADES OF PERFORMANCE SCORES**

- 70% or more -- A
- 60 -69% ----- B
- 50 -59 % ----- -C
- 40 -49% -----D
- 39% and below- E

SCALE OF PERFORMANCE GRADES

PERFORMANCE GRADE	DESCRIPTION
A	Adequate knowledge; Performs skill without supervision; able to take corrections; can reproduce skill on request
B	Adequate knowledge; performs skill with minimal supervision; able to take corrections; reproduces skill with minimal guidance
C	Adequate knowledge; performs skill with supervision; able to take corrections; barely reproduces skill
D	Inadequate knowledge; performs skill with supervision; understands corrections with difficulty; Unable to reproduce skill
E	Gross inadequate knowledge; unable to perform task; difficulty in following instructions; unable to reproduce skill

The minimum accepted performance score is Grade B in each of the tasks. A lower grade requires a “make-up” performance to be documented by the supervising Consultant and recorded on a supplementary page

OUTSIDE ROTATIONS UNIT

Posting	Date Attended		Comments by Consultant	Signature of Consultant
Glaucoma senior posting				
Ophthalmic plastic surgery senior posting				
Paediatric ophthalmology and strabismus senior posting				
Public and community eye health senior posting				

PROCEDURES PERFORMED DURING THE 4 POSTINGS ABOVE

Date	Name/Type of procedure	Patient's Initials	Observed/performed	Grading / Rating	Supervisor Signatures

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1st Year of Senior Residency Training FORMATIVE ASSESSMENT

(Should be done every 3 months)

Hospital:.....						
DATES	From					
	To					
Overall Rating for the Year (Average)						
ATTITUDINAL ASSESSMENT (Grade A-E)						
General Appearance						
Punctuality						
Relationship with Patients						
Relationship with other team Members						
Ethics – Awareness and Application						
Flexibility and Response to Correction						
Administrative/leadership skills						

CLINICAL SKILLS ASSESSMENT (Grade A-E)					
Applied Basic Sciences knowledge					
Clinical management (Judgement, appropriate use of investigations, follow up etc)					
Emergency Care and Resuscitation					
Industry/Initiative					
Reliability					
Communication Skills					
<i>Overall Score</i>					
<i>Name & Signature of Consultant</i>					

GRADES: Write the appropriate grade in the column using the key below.

Consistently exceeds expectations = A Sometimes exceeds expectations = B Generally meets

expectations = C Inconsistently meets expectations = D Rarely meets expectations = E

Insufficient contact with student to judge = X

Supervising consultants's Comments

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Supervising consultants's name & signature.....

Date.....

Stamp.....

Head of Department's Comments

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Head of Department's name & signature.....

Date.....

Stamp.....

Signature of Resident..... Date.....

2nd Year FORMATIVE ASSESSMENT for Senior Residency

(Should be done every 3 months)

Hospital:.....						
DATES	From					
	To					

Overall Rating for the Year (Average)					
ATTITUDINAL ASSESSMENT (Grade A-E)					
General Appearance					
Punctuality					
Relationship with Patients					
Relationship with other team Members					
Ethics – Awareness and Application					
Flexibility and Response to Correction					
Administrative/leadership skills					
CLINICAL SKILLS ASSESSMENT (Grade A-E)					
Applied Basic Sciences knowledge					
Clinical management (Judgement, appropriate use of investigations, follow up etc)					
Emergency Care and Resuscitation					
Industry/Initiative					
Reliability					
Communication Skills					
Overall Score					
Name & Signature of Consultant					

GRADES: Write the appropriate grade in the column using the key as indicated in 1st year Table above.

Supervising consultants’s Comments
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Supervising consultants’s name & signature.....

Date..... Stamp.....

Head of Department’s Comments
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Head of Department’s name & signature.....

Date..... Stamp.....

Signature of Resident..... Date.....

3rd Year FORMATIVE ASSESSMENT in Senior Residency

(Should be done every 3 months)

Hospital:.....						
DATES	From					
	To					
Overall Rating for the Year (Average)						
ATTITUDINAL ASSESSMENT (Grade A-E)						
General Appearance						
Punctuality						
Relationship with Patients						
Relationship with other team Members						
Ethics – Awareness and Application						
Flexibility and Response to Correction						
Administrative/leadership skills						
CLINICAL SKILLS ASSESSMENT (Grade A-E)						
Applied Basic Sciences knowledge						
Clinical management						

(Judgement, appropriate use of investigations, follow up etc)					
Emergency Care and Resuscitation					
Industry/Initiative					
Reliability					
Communication Skills					
<i>Overall Score</i>					
<i>Name & Signature of Consultant</i>					

GRADES: Write the appropriate grade in the column using the key as indicated in 1st year Table above.

Supervising consultants's Comments

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Supervising consultants's name & signature.....

Date.....

Stamp.....

Head of Department's Comments

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Head of Department's name & signature.....

Date.....

Stamp.....

Signature of Resident..... Date.....

NPMCN	FACULTY OF OPHTHALMOLOGY: ANTERIOR SEGMENT LOG BOOK									
		CATARACT SURGERY: Preparation and outcome=50 cases minimum.							A	
SN	DATE	Hospital N	Name of	Age	Sex	Pre-Op V/A	Pupil	Lens Morph	Biometry	
									AXL...K1.....K2...	
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FACULTY OF OPHTHALMOLOGY: ANTERIOR SEGMENT LOG BOOK									
CATARACT SURGERY: Preparation and outcome=50 cases minimum B									
SN	IOL power	Surgical pt	GA-Type	P/PS/AA	Complicat	VA-day 1	VA-2week	Assessme A, B, C, D, E	Consultant's Sign
1									
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Wetlab-suturing on foam (200 sutures)

		Surgical Steps performed (Tick all that apply in 1 st box) and Proficiency Score (in second box)	Signature of Supervisor
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		Proficiency Scores: unable to (1 or E), Novice (score =2, D); Beginner (3, C); Advanced Beginner (4, B); Competent (5, A)						
Serial No	Date	Incision depth	Suture bite	Radiality	Knot placement (5-7)	Knot tension/ optimal wound closure	Paste sutured foam here with name & institution	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

WET LAB FOR SICS/PHACO OR SIMULATION COURSE= Minimum of 50.

Serial Number	Date	Surgical Steps performed (Tick all that apply in 1 st box) and Proficiency Score (in second box)														Signature of Supervisor	
		Proficiency Scores: Unable to (1, E), Novice (score =2, D); Beginner (3, C); Advanced Beginner (4, B); Competent (5, A)															
		Sclerocorneal tunnel	Corneal Entry	Paracentesis	Capsulorhexis/ Capsulotomy	Hydrodissection	Nucleus Prolapse	Nucleus extraction	IOL Insertion & Rotation								
1																	
2																	
3																	

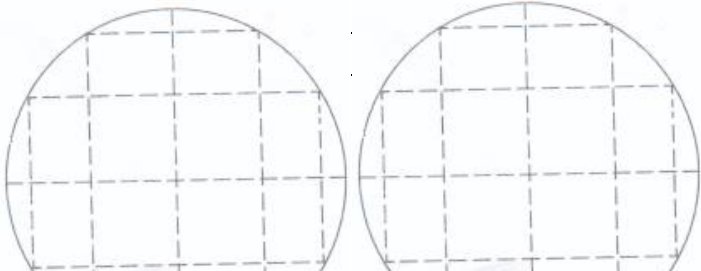
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NPMCN, FACULTY OF OPHTHALMOLOGY- ANTERIOR SEGMENT LOGBOOK																		
							CATARACT SURGERY- SICS /PHACO/=50 surgeries minimum											
Serial Number	Date	Surgical Steps performed (Tick all that apply in 1 st box) and Proficiency Score (in second box)															Signature of Supervisor	
		Proficiency Scores: Unable to (1, E), Novice (score =2, D); Beginner (3, C); Advanced Beginner (4, B); Competent (5, A)																
		Sclerocorneal tunnel	Corneal Entry	Paracentesis	Capsulorhexis/ Capsulotomy	Hydrodissection	Nucleus Protrusion	Nucleus extraction	IOL Insertion & Rotation									
1																		
2																		
3																		
4																		

NPMCN, FACULTY OF OPHTHALMOLOGY- ANTERIOR SEGMENT LOGBOOK														
						CORNEA SURGERY: PKP=2, DMEK=2, DSEK=2, KERATOREFRACTIVE SURGERY=2								
				Surgical Steps performed (Tick all that apply in 1 st box) and Proficiency Score (in second box)								Signat ure of Super visor		
				Proficiency Scores: Unable to (1, E), Novice (score =2, D); Beginner (3, C); Advanced Beginner (4B,); Competent (5, A)										
Seri al No	Da te	Hos pital No	Diag nosis	type of surg ery	V A pr e- o p	Radial ity	Knot placem ent (5- 7)	Knot tensio n/ optima l wound closur e	Overall performa nce	O/A/ P	outco me /VA			
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NPMCN, FACULTY OF OPHTHALMOLOGY- ANTERIOR SEGMENT LOGBOOK																		
	PTERYGIUM SURGERY=20 minimum																	
S / No	Date	Hosp No.	Name of Patient	Age	Sex	VARELE	Diagnosis	Dimension of pterygium on cornea Indicate the eye affected	KERATOMETRY RELE	Treatment	O/A/P	Outcome VARELE 6 weeks	Complications	Assessment: A,B, C,D, E	Signature of Supervisor			
1																		



		quality of donor button / host sight	Suture bite	Radiality	Knot placement (5-7)	Knot tension/ optimal wound closure				
1										
2										
3										
4										
5										
6										
7										

Supervising Consultant's Comments

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Supervising Consultant's name & signature.....

Date.....

Stamp.....

Head of Department's Comments

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Head of Department's name & signature.....

Date.....

Stamp.....

Signature of Resident..... Date.....