

General

E-00013

Evaluating the effectiveness of undergraduate ophthalmology training in Canada

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ABSTRACT (AS SUBMITTED)

Purpose: In the present study, the adequacy of undergraduate ophthalmology training in Canada was investigated and compared to the International Council of Ophthalmology (ICO) medical school training guidelines.

Methods: All first year residents in Canada who graduated from a Canadian medical school were invited to participate in a 24-item online survey in autumn of 2007. Data were categorized by demographic variables and basic statistics were done. Reported experiences were compared to suggested ICO guidelines.

Results: Responses were obtained from 227 of 1893 (12%) 1st year Canadian residents from multiple disciplines, such as family medicine (27.4%), internal medicine (15%), and pediatrics (9.3%). Almost all respondents stated they received some formal ophthalmology training in medical school, with only 2.3% not having such exposure. However, the majority of respondents (61.0%) rated that their exposure was "insufficient", while 35.8% felt they had the "right amount" of training, and 3.2% were unsure. Furthermore, although most of those surveyed (69.4%) felt that learning about ophthalmology in medical school was important for their residency program, 31.0% did not feel they acquired sufficient ophthalmology knowledge for their residency duties. A further 47.4% did not feel they acquired sufficient ophthalmology skills for residency. Respondents stated that their medical school experiences included several of the ICO's recommended topics for undergraduate ophthalmology curriculum, including lens and cataract (81.1%), cornea and external diseases (80.6%), glaucoma (80.6%), and pediatric ophthalmology (71%). Respondents had less exposure to the ICO categories of vitreoretinal disease (36.4%), intraocular tumours (24%) and refraction (29%). When asked about competency with specific ICO examination skills, most respondents felt comfortable in assessing visual acuity (83.3%), pupillary reflexes (90.7%), ocular motility (96.8%), and visual fields (89.8%). However, respondents were less confident with fundoscopy (52.3%) fluorescein dye examination (50.9%), slit lamp examination (44.8%), intraocular pressure assessment (19.9%) and anterior chamber depth assessment (11.1%).

Conclusions: Undergraduate ophthalmology training in Canada contains gaps in certain ICO core competencies. The introduction of standardized curricula in accordance to ICO standards may ensure that Canadian medical students enter residency with competencies in the fundamental principles of ophthalmology.

General

E-00014

Evaluation of the use of computers and internet by ophthalmologists and trainees

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ABSTRACT (AS SUBMITTED)

Purpose: Internet and computer access has become widely available over the past 20 years. A multitude of medical information is now available electronically, including lab reports, radiographic images, peer reviewed medical information, and websites for hospitals/educational departments. Little information exists concerning the use of computers and internet by Ophthalmologists in Canada. The purpose of this study was to determine computer, internet, and department website use by members of the Department of Ophthalmology and Vision Sciences in Toronto, Ontario. The advantages and impediments to the use of computers and internet are analyzed and discussed.

Methods: A list of members within the Department of Ophthalmology and Vision Sciences was obtained. 148 members (93 staff, 24 residents and 31 fellows) were invited via email to complete an online survey looking at computer and internet use. Participation was voluntary. Individuals who had not submitted an online response after 3 weeks were sent a paper copy to complete. No identifying fields were used during data analysis.

Results: The response rate was 59% (88/148). Staff response was highest (65%), followed by residents (58%) and fellows (45%). Mean age was 45 (range of 24-78 years). Male participants accounted for 74% of responses. Mean number of years of computer experience was 17 (range of 2-40 years). 59% of respondents described their computer skill as 'good' or better and 86.4% utilized a computer in their clinical practice. Performance of computer related tasks included accessing email (98.9%), medical literature (87.5%), conducting personal affairs (83%), and accessing conference /round schedules (65.9%). A large percentage of participants were interested in gaining training in teleophthalmology (40.3%) and only 3.4% had received previous training in it. In regards to internet use, 89.1% of respondents accessed peer-reviewed material online, including Emedicine (60.2%) and UpToDate articles (48.9%). 33% of department members reported never having visited the department website. Impediments to website use included information not up-to-date (27.3%), information not of interest (22.1%), and difficulty locating the website (20.8%). Interest in improving the website included adding department news and events(80.7%), contact information (65.9%), archive of grand rounds presentations (61.4%), and staff biographies/profiles (45.5%).

Conclusions: The majority of ophthalmologists and trainees in an academic centre utilize computer and internet resources in their practice for various tasks. A weak linear correlation was found between lower age of respondent and higher self-evaluated experience with computers ($r = -0.43$). Although use of the department website was low, respondents were interested improving the website. The results of the study will be implemented into the creation of a new website for the Department of Ophthalmology and Vision Sciences, University of Toronto.