

OPT WORKBOOK



A printable
workbook to
complement
your study



A NOTE ABOUT THE WORKBOOK

WELCOME, NEW STUDENTS.

This workbook has been designed to compliment the OPT cataract regional study day 30th April 2021. It is hoped that it may serve as a useful tool to help you consolidate this new information with your existing knowledge in order to best apply it into your clinical practice. The lectures are designed to encompass elements of the cataract module curriculum that has been mapped out by the Royal College of Ophthalmologists.

The study day will introduce participants to fundamental biology of the lens and relevant pathology of the eye. We will then progress to concepts surrounding the multi-disciplinary cataract pre-operative assessment, considerations surrounding patient consent, and finally some of the common complications that can occur with cataract surgery.

The second segment of the day will be structured around smaller group workshops that will encourage participants to discuss the lectures and explore real world application of this lecture material in our day to day clinical practice.

The workbook also includes QR codes to previous OPT lectures that you can quickly and easily access as you revise.

We hope that you will find this workbook to be a useful learning tool that encourages reflection and hopefully, while you aim to complete the formal OPT qualification

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LESSON PLAN

OUTLINE OF UPCOMING TALKS



INSTRUCTIONS: Each topic below covers key elements of the cataract module course curriculum. Lecture headings are provided as a guide to direct your learning. If you feel you have a good understanding of each topic then you can tick that box and move onwards, otherwise you can flag it to return to later and revise.

SECTION 1 PRECLINICAL

LENS DEVELOPMENT AND DISEASE

OCULAR CO-MORBIDITIES

SECTION 2 CLINICAL

PRE-OPERATIVE ASSESSMENT / NURSES ROLE

BIOMETRY PREPARATION

SECTION 3 SURGERY

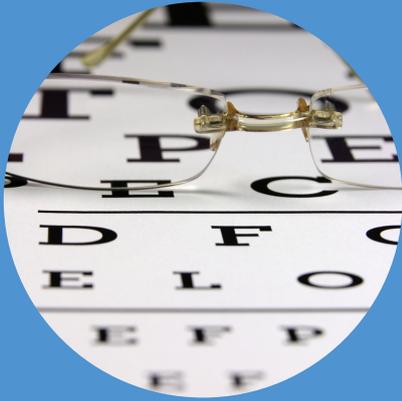
CONSENT AND NEGLIGENCE: WHAT YOU NEED TO KNOW

COMPLICATIONS OF CATARACT SURGERY

SECTION 4 RESOURCES

LINKS TO ONLINE MATERIAL

WORKSHOP 1 NOTES



SECTION *Preclinical* ONE

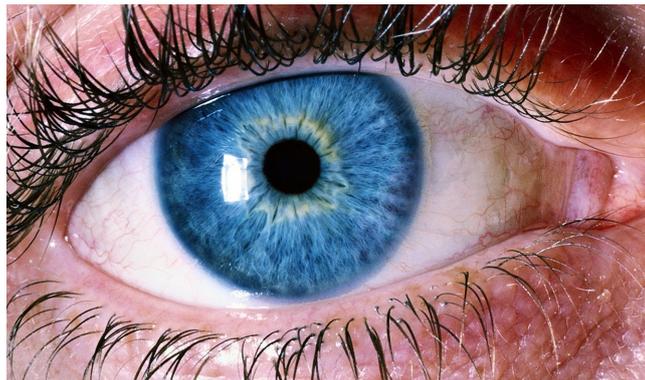
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SECTION ONE

PRECLINICAL

SECTION INTRODUCTION

Our day begins with an introduction to the make-up and functioning of the eye. The anatomy of the eye will focus on the most important elements involved in the bending of light, refraction, and a discussion of the physiology involved in this process.



We will then move on to discuss the lens in more detail and then lead into situations where the lens is not functioning optimally, that is to say, in pathological circumstances.

Finally, we will then consider other ocular pathologies that will direct our management and influence visual outcome expectations



LENS DEVELOPMENT AND DISEASE

ROBERT THOMAS BRADY

List some of the main features of the lens

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LENS DEVELOPMENT AND DISEASE

ROBERT THOMAS BRADY

QUESTION #1: What structures aid the support and accommodation of the lens?

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QUESTION #2: Are there any medical conditions that may accelerate cataract development?

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LENS DEVELOPMENT AND DISEASE

ROBERT THOMAS BRADY

Scenario #1: A patient exits a consultation room after cataract pre-assessment. They said they had a question but were embarrassed to ask the doctor. They were told their lenses were cloudy and they needed to be replaced with cataract surgery. They tell you they have only had their glasses recently changed so the lenses should be quite new, they want to know if new glasses will improve their vision instead of cataract surgery. How would you counsel this patient?

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OCULAR CO-MORBIDITIES

NATASHA MATHEW

QUESTION #1: What other structures in the eye are essential for vision?

QUESTION #2: List three eye diseases that may be contributing to a loss of vision

QUESTION #3: Name a systemic disease and explain how it may impact a person's vision



OCULAR CO-MORBIDITIES

NATASHA MATHEW

QUESTION #4: A patient has been diagnosed with diabetes and What other structures in the eye are involved in essential for vision?

QUESTION #5: A patient is allergic to sulfa drugs, are there any particular medications that might be used in cataract care that should be avoided?

QUESTION #6: List two medical conditions that may make a cataract surgery challenging. How might these be managed pre-/peri-operatively?



OCULAR CO-MORBIDITIES

NATASHA MATHEW

Scenario #1: A 40 year patient has been diagnosed with type 2 diabetes. Whilst waiting for transport to collect them, they ask you what problems might happen to their eyes and how they would be followed up. What would you tell the patient?

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Scenario #2: An elderly patient with glaucoma is asking you how the surgery will affect their eye, they ask you about stopping their usual eye drops before the surgery. How would you counsel the patient?

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SECTION *Clinical* TWO

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SECTION TWO

CLINICAL

SECTION INTRODUCTION

At this point the patient has been examined in clinic and a decision has been made to that a cataract surgery is indicated.

We will now focus on steps encompassing cataract pre-assessment and biometry (measurements).





CATARACT PREASSESSMENT

MYE MAGLAQUI

QUESTION #1: What are the aims of pre-assessment?

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QUESTION #2: What is involved in completing a pre-assessment of a patient?

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CATARACT PREASSESSMENT

MYE MAGLAQUI

QUESTION #3: Are there any red flags that you might pick up on in a history that might make you feel the referral is inappropriate?

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QUESTION #4: What is involved in discharge planning for a patient?

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CATARACT PREASSESSMENT

MYE MAGLAQUI

Scenario #1: A patient tells you they are claustrophobic and wants a general anaesthetic.

What other information would you like to know?

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How would you counsel this same patient regarding the surgical procedure?

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BIOMETRY

MAUREEN BACABAG

Question #1: What is biometry? What are the main measurements we take?

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Question #2: What are the aims of biometry?

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BIOMETRY

MAUREEN BACABAG

QUESTION #3: What is meant by the 'axial length'?

QUESTION #4: How would you know your axial length measurements were reliable?

QUESTION #5: What options are available to you if the axial length cannot be determined by the automated machine?



BIOMETRY

MAUREEN BACABAG

QUESTION #6: List some conditions that might make biometry difficult to complete

QUESTION #7: Why is it important to know if there is silicone oil in the eye?

Scenario #1: A patient is attending the preassessment clinic and you are performing their biometry. Before you begin the patient says they have refractive surgery in the past. Is this important to know? Why?

SECTION *Surgeries* THREE

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SECTION THREE

SURGERY

SECTION INTRODUCTION

The patient has been pre-assessed and has attended the day ward for their cataract surgery.

Here we will focus on the hugely important topic of consent. There is a lot more to it than a signature on a form and conveys the risks and benefits of the surgery to the patient.

The risks are diverse and may be either benign or sight / life threatening. We will review some of the common complications and how they would be approached and managed should they occur.





CONSENT AND NEGLIGENCE

TOM BUTLER

QUESTION #1: What is meant by the term 'informed consent'?

QUESTION #2: What is involved in the consent process?

QUESTION #3: Who can give consent?



CONSENT AND NEGLIGENCE

TOM BUTLER

Scenario #1: A 17 year old develops a traumatic cataract after a sporting accident. Your colleague asks you who should complete the consent form. How do you respond?

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Scenario #2: A care home resident with cognitive impairment attends for his cataract surgery. What information is required / how do you proceed with consent for this patient?

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COMPLICATIONS OF SURGERY

SOFIA NOOR-HABIB

Question #1: List some common complications of cataract surgery

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Question #2: What steps are taken to reduce complications from occurring in surgery?

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COMPLICATIONS OF SURGERY

SOFIA NOOR-HABIB

Question #3: How would you triage a patient referred with 'cataract complication and a vision of 6/18?

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Question #4: How would you triage a patient referred with 'cataract complication and a vision of HM only?

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COMPLICATIONS OF SURGERY

SOFIA NOOR-HABIB

Scenario #1: A 72 year patient attends acute clinic in the early morning. They underwent a cataract surgery the previous day. They developed a lot of pain and redness in the eye. They became very nauseated and have been vomiting. What complications might they be experiencing? How would the patient be managed?

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Scenario #2: A care home resident attends a week after cataract surgery with a drop in their vision. What complications might be occurring? How would you manage the patient?

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SECTION *Resources* FOUR

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SECTION FOUR

RESOURCES

SECTION INTRODUCTION

The following appendix contains QR codes to previously recorded cataract study day lectures.

The lectures encompass different aspects of the OPT cataract module curriculum. They are designed to aid your learning and help you to revise key topics.





RESOURCES

**Anatomy of Refraction-
Dr Robert Thomas Brady**



**Assessment of Cataract Surgery:
taking a history-
Mr Carl Svasti-Salee**

**Cataract: Clinical Examination-
Ms Tejal Patel**





RESOURCES

**Biometry for cataract surgery-
Mr David Spokes**



**Evolution and Complications in
Cataract Surgery-
Mr Tom Butler**

