The Eyes Don’t Get It
Deficiencies in Ophthalmology Teaching in Canadian Paediatric Residency Programs

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Introduction
Residency programs worldwide have recently experienced a decrease in the number of hours residents can work, but an increase in the number of skills requiring mastery1. As such, many topics receive scant coverage. In paediatric residency programs, ophthalmology is an area only superficially taught even though possession of ophthalmological knowledge is critical for the recognition of various paediatric disorders, many of which affect multiple organ systems and carry significant morbidity.

A survey of 137 paediatric residency programs across the United States found that nearly 30% of programs did not include ophthalmology in the curriculum, citing lack of time and lack of ophthalmologists as major reasons2.

The lack of ophthalmologic teaching for Canadian paediatric residents was borne out in the formative Objective Structure Clinical Examinations (OSCEs) from 2011, in which residents from 4 Ontario paediatric residency programs scored an average of only 6.67 out of 10 on their eye examination section3. Scores in the other stations that tested more commonly taught topics ranged from an average of 6.0 to 8.8 out of 10 with a clear progression from the PGY1 to PGY4 years3. In contrast, the ophthalmology results further show a lack of improvement in scores throughout all 4 years of residency, with PGY3 residents outsorcing PGY4 candidates in 2 of the 4 medical schools.

These findings suggest that residents are receiving insufficient ophthalmology teaching beyond their undergraduate training.

Methods
A multiple choice survey was distributed to the Paediatric Program Directors at 17 academic centres across Canada in 2012.

Results
Almost all (15 of 16) respondents indicated a need to improve ophthalmology teaching at their centre. Nine of 16 centres had no means of assessment of ophthalmologic knowledge and only 4 routinely tested ophthalmology during formative Objective Structure Clinical Examinations (OSCEs).

More than half of the program directors felt that their current methods of assessing residents’ ophthalmologic knowledge were inadequate. No centre used e-learning modules as a means of education despite nearly half of the program directors (7 out of 16) believing that e-learning modules are an effective way of teaching residents ophthalmology. All 16 program directors indicated they would be interested in incorporating a new learning module on ophthalmology topics.

Conclusions
There is inadequate teaching and assessment of ophthalmology skills in Canadian paediatric training programs. Further work is required to determine if video-based education modules would be an effective and efficient method of addressing this knowledge gap, without impacting an already restricted clinical learning experience.

Q: Is Ophthalmology tested on your OSCE examination?

Purpose
We aimed to assess the current status of teaching and assessment of ophthalmology in Canadian paediatric centres, with a view to address knowledge gaps with e-learning modules.

Summary
The results of the scientific literature as well as our survey suggest that pediatric residents are receiving insufficient ophthalmology teaching and assessment. We hope to effectively and efficiently be able to address this knowledge gap with e-learning modules.

References