Educational Goals & Objectives for Ophthalmology Residents 
at Children’s Health Children’s Medical Center Dallas and 
Children’s Health Children’s Medical Center Plano

Competencies addressed:

- PC = Patient care
- MK = Medical knowledge
- Pr = Professionalism
- PBLI = Practice-based learning and improvement
- ICS = Interpersonal and communication skills
- SBP = Systems-based practice

PGY2 RESIDENTS

ROTATION: CMC

GOALS

The resident will learn to provide pediatric ophthalmology care in a compassionate and professional manner, including straightforward resection and recession procedures on the rectus muscles.

OBJECTIVES

By the end of this rotation, the resident will display the following proficiencies:

- Ability to conduct complete pediatric eye examination with attention to motor and sensory abnormalities and to obtain reliable data from such exam [PC, MK]
- Ability to detect pathological conditions in the eye common to the pediatric population, including motor abnormalities (strabismus), amblyopia, refractive error, and structural abnormalities of the eye [PC, MK]
- Ability to treat above conditions medically, optically, and surgically (as appropriate) [PC, MK]
- Should be able to perform resection or recession of rectus muscles with supervision [PC, MK]
- Provide medical care for general pediatric patients with compassion and professionalism while working as a part of a clinic-based health care team [PC, MK, Pr, PBLI, ICS, SBP]
- Provide medical care for pediatric patients presenting to the emergency department with eye problems [PC, MK, Pr, PBLI, ICS, SBP]
• Present oral PowerPoint presentations of Grand Rounds patients [PC, MK, PBLI, ICS]

PGY4 RESIDENTS

ROTATIONS: CMC I and CMC II

GOALS

The resident should be able to diagnosis and treat common pediatric ophthalmologic disorders and perform common pediatric procedures. The resident will become familiar with complex surgical treatments for the pediatric population.

OBJECTIVES

By the end of this rotation, the resident will display the following proficiencies:

Clinical:
• Be able to diagnose and appropriately treat all common ophthalmological problems related to pediatric population, including all types of strabismus, amblyopia, refractive problems, tear duct anomalies, eyelid anomalies, cataracts, other congenital anomalies, ocular trauma and infections.

Surgical:
Should be able to perform with assistance [PC, MK]:
• Recess/resect procedure on rectus muscle

• Recession of inferior oblique

• Tenotomy/tenectomy of superior oblique

• Insertion of silicone stints for nasolacrimal duct obstruction

Should be able to perform comfortably without assistance [PC, MK]:
• Recess/resect procedure on rectus muscle

• Office probing of nasolacrimal duct

• Insertion of silicone stints for nasolacrimal duct obstruction

Should have understanding of indications for, techniques of and ability to perform with supervision [PC, MK]:
• Recession of inferior oblique

• Tenotomy/tenectomy of superior oblique
- Removal of infantile cataract with vitrectomy (anterior or posterior approach)
- Repair of congenital ptosis (fascial sling/levator resect)
- Pediatric IOL procedures
- Repair of trauma of eye and adnexa
- Develop a therapeutic and ethically sound relationship with the pediatric patient [PC, Pr, ICS]
- Demonstrate a commitment to ethical principles regarding provision of care [PC, Pr]
- Provide information to patients to obtain informed consent [PC, Pr, ICS]
- Understand the barriers to obtaining and providing care to the pediatric patient, both in the health care system and in the family [SBP]