Rotating students will spend 2 weeks in the department of ophthalmology outpatient clinics and ambulatory surgical center, where they will focus on the perioperative care of patients undergoing cataract surgery (phacoemulsification) and those with ocular trauma. During the rotation residents will be exposed to the following topics & skills:

1. Lecture on perioperative care of phacoemulsification with intraocular lens implantation
   a. Anatomy of the eye
   b. Types of Cataract
   c. Visual Impairment secondary to cataract
   d. Indications for surgery
   e. Pre-operative assessment
      i. History
         1. Chief Complaint
         2. HPI
         3. PMH
         4. Medications
         5. SH
      ii. Examination
         1. Visual Acuity
         2. Manifest Refraction
         3. Glare Testing
         4. Dilated pin-hole
         5. Slit-lamp Examination
         6. Dilated Fundus examination
      iii. Biometry
         1. A-scan
         2. Keratometry
         3. Lens Calculation
         4. Selection of Intraocular lens (monofocal)
   f. Perioperative preparation
      i. Marking the site/verifying with consent form & Patient
      ii. Dilation protocol
         1. Discuss different drops used and why
      iii. Techniques of Anesthesia
         1. Topical
            a. With & without intracameral lidocaine
2. Peribulbar
3. Retrobulbar

iv. Timeout
v. Surgical Preparation
vi. Surgical Drape

2. Lecture on extracapsular cataract extraction (ECCE)
   a. Anatomy of the eye as it applies to ECCE
   b. Technique and surgical procedure
      i. ECCE without phacoemulsification
      ii. ECCE with phacoemulsification
      iii. Intraocular lens (IOL) placement
         1. In the Bag
         2. Sulcus
         3. Sutured
            a. Iris
            b. Scleral Fixation
      4. Anterior Chamber IOL
   iv. Intra-operative complications
      1. Posterior Pressure
      2. Iris Prolapse
      3. Violation of the posterior Capsule at any time during surgery
         a. Capsularhexis
         b. Hydro-dissection
         c. Phacoemulsification
         d. Irrigation & Aspiration
         e. Lens Insertion
      4. Vitreous Prolapse
         a. Cause
         b. Presentation
         c. Management
         d. Risks of Future Complications
      5. Dropped Nucleus
         a. Primary and secondary Complication

3. Post-operative Care
   a. Routine Post-operative care through 6 weeks
   b. Discuss Development of posterior capsular opacification (PCO) & Treatment
   c. Post-operative complications
      i. Acute
         1. Retained Viscoelastic
         2. Lens Subluxation
         3. Wound Leak
         4. Vitreous Prolapse & Incarceration
ii. Sub-acute
   1. Endophthalmitis

iii. Late
   1. Endophthalmitis
   2. Cystoid Macular Edema
      a. Etiology & Risk Factors
      b. Diagnosis
         i. Clinical
         ii. Diagnostic Modalities
            1. Optical Coherence Tomography
            2. Intravenous Fluorescein Angiography
      c. Management

4. Ocular Trauma
   a. Orbital Fractures
   b. Lid Lacerations
   c. Chemical Injury
   d. Corneal Abrasions
      i. Traumatic
      ii. Perioperative
   e. Traumatic Hyphema
   f. Corneal/Scleral Lacerations
   g. Globe Rupture