

OPHTHALMIC HOSPITALIST INTEREST GROUP NEWSLETTER

Donna Kim, MD | Maggie Hymowitz, MD

Announcements

Join the Community!

Read about open ophthalmic hospitalist positions, trends in ruptured globe antibiotic prophylaxis, and more!

[AAO/OHIG Online Community!](#)

OHIG Round Table at AAO 2023

Join your fellow OHIG members at the annual AAO meeting for a casual discussion about hospital-based consults. **Sat Nov 4th @ 4:00-5:00pm**, Moscone Convention Center, Global Alliance Office.

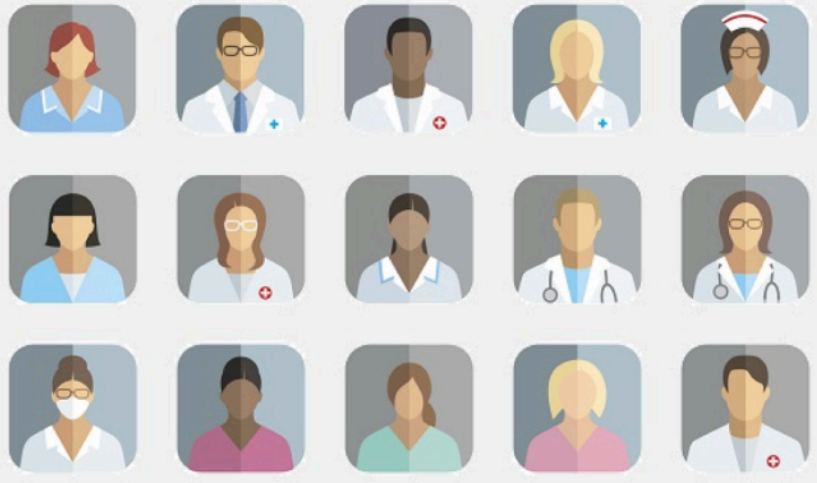
OHIG Topic Wishlist

Have a topic or case you would like to feature in an OHIG newsletter? We welcome your ideas and expertise. Email ohig@ohig.org.

Welcome New Members!

Thanks for joining OHIG! Please verify your information on the [OHIG website](#).

CONSULT SUPPORT STAFF



Articles

[*Integration of a Physician Assistant into an Ophthalmology Consult Service in an Academic Setting, AJO, 2018*](#)

An article sharing the impact of having PA integration into the ophthalmology consult service at Wilmer Eye Institute at Johns Hopkins University.

[*Physician Assistants in Ophthalmology: A National Survey, AJO 2020*](#)

A national survey reviewing the scope of practice and training for PA's in ophthalmology.

[*Is There a Place for PA's in Ophthalmology? Review of Ophthalmology, 2015*](#)

Viewpoints about PA involvement in ophthalmology.

PEARLS



Hospitalist Spotlight

NEW OPHTHALMIC HOSPITALIST POSITION COMBINES TEACHING MOMENTS WITH ENHANCED PATIENT CARE



Moran Eye Center in Utah has a wonderful webpage featuring OHIG member **Theresa Long**, their first ophthalmic hospitalist. [Click here](#)

PA Experience in Ophthalmology

A Day in the Life of a PA in Ophthalmology

PA Finds Field Inviting and Free of Distraction

July 23, 2022

By Joel Ciolek, MSPA, PA-C

Joel Ciolek, MSPA, PA-C, obtained his master of science in PA Studies at Heritage University and is a board-certified PA practicing in the field of ophthalmology. He is one of 80 PAs practicing in this specialty¹.

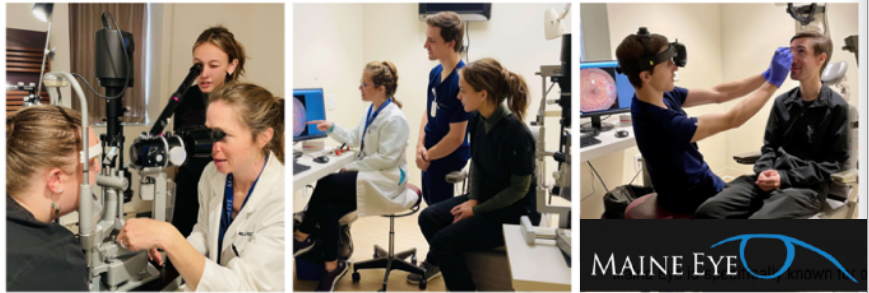
Prior to PA school, I had two years of experience in clinical and surgical ophthalmology, which is how I obtained my required patient care hours in order to apply to PA school. I also presented research on cataract surgery at the American Society of Cataract and Refractive Surgery (ASCRS). During PA school, I created two elective rotations in ophthalmology, one of which was at Duke Eye Center. All of this made my



Joel Ciolek, MSPA, PA-C

Viewpoints from Joel Ciolek, a board certified PA practicing in the field of ophthalmology. [Click here](#)

CONSULT ROUNDS



Pre-Residency Clinical Ophthalmology Fellowship



Brook Miller, MD
Pre-Residency Clinical
Fellowship Co-Director
Maine Eye Center
Portland, ME



Lisa Neavyn, MD
Pre-Residency Clinical
Fellowship Co-Director
Maine Eye Center
Portland, ME

Q1) What inspired you to create a Pre-Residency Clinical Ophthalmology Fellowship?

The program was created for a few reasons. For one, there is no ophthalmology residency program in the state of Maine, and our

group (a private practice, quasi-academic group) covers the only Level I trauma center in the state. There are other residency programs at our hospital (IM, Family Medicine, Surgery, Peds, etc). In collaboration with Tufts New England Eye Center/ Tufts School of Medicine, this pre-residency post graduate program arose to fill this void — hospital call gets busy! Our hospital, Maine Medical Center, is affiliated with Tufts School of Medicine. Our pre-residency fellowship position started a pilot program to “test the waters” in hopes that one day our office/ hospital would be an rotation site for Tufts New England Eye Center ophthalmology residents.

Q2) Who can apply? How many yearly applications do you typically receive a year?

Anyone can apply who has an M.D., D.O. or international medical degree. However, most of our applicants are 4th year medical students who, unfortunately, did not match into ophthalmology during the application cycle. Because the position is essentially a PGY-I position, applications must have a medical degree when they start with us. Every year our applicant pool becomes larger and more competitive, as ophthalmology has become a more sought after specialty. We typically receive at least 50-70 applicants a year!

Q3) What does this fellowship entail for a candidate? How is it integrated with your private practice group?

We have an urgent care clinic in our office that covers all ED and hospital follow ups, urgent/ quick care follow ups, same day emergent referrals from primary care offices, as well as our own scheduled patients. The fellow acts just like a typical first year ophthalmology resident. S/he helps to triage and work up same day add-ons in clinic as well as work up and present new and existing ED and inpatients in the hospital. The fellow primarily spends the first few months in our urgent care/ comprehensive clinic and hospital “learning the ropes,” and then eventually has rotations with Plastics, Retina, Peds, Glaucoma, etc. There is a protected half day of research time built into the schedule as well. We also have rotating Tufts and University of New England medical students rotating with us as well, and so our group is well versed and accepting of students. Because our office interfaces so much with the hospital, we are used to having students and residents! Our comp clinic is geared toward teaching and covering the daytime hospital call, so we function more like an academic program.

Q4) What were some of the logistical aspects in terms of getting this program set up for your practice (credentialing, funding, etc)?

Luckily, the hospital GME office helps us with all of this. Funding is through the hospital as well.

Q5) Do you feel that your fellowship helps candidates match in an ophthalmology residency program?

Yes we have had a 75% match rate in the last four years, so we feel that we have a strong and successful program. We work with the fellow in the summer and fall to make their applications as strong as possible. In addition, we conduct mock interviews, help review the application and make personal connections when possible. We really work as a team with the fellow and feel very invested in her/his success.

Q6: What advice would you give to others who would be interested creating a similar program for their private practice?

We recommend this structure if you have a “home base” for the fellow and can also work closely with your hospital to make this a successful program. Our “home base” is our Comprehensive/ Ophthalmology Urgent Care clinic within our private practice. This allows for good, consistent mentoring and a nurturing environment in which the fellow can improve his/her skills.

*We wish to sincerely thank **Dr. Brooke Miller** and **Dr. Lisa Neavyn** for sharing their expertise and congratulate them on the success of their innovative pre-residency clinical fellowship program supported by their group private practice at the Maine Eye Center and Tufts School of Medicine.*

For more information about the Maine Eye Center Pre-Residency Clinical Fellowship Program, visit:
<https://www.maineeyecenter.com/education/>

Consult Support Survey

What type of support do you have for seeing inpatient and emergency room consults at your institution?
Select all that apply:

- A) Medical Students
- B) Interns
- C) Residents
- D) Fellows
- E) Pre-Residency Fellows
- F) Physician Assistant (PA)
- G) Medical Assistant (MA)
- H) Nurse Practitioner (NP)
- I) Ophthalmic Technician
- J) Inpatient/ER Consult Coder
- K) None, I prefer to see patients on my own
- L) None, I wish I had additional help
- M) Other: please specify

Please share your responses on the AAO/OHIG Community. We'd love to hear from you!
<https://aao.mobilize.io/main/groups/47315/lounge>