

OPHTHALMIC HOSPITALIST INTEREST GROUP NEWSLETTER

Donna Kim, MD | Maggie Hymowitz, MD

Announcements

Join the Community!

Meet your fellow OHIG members in the **AAO/OHIG Community** which has reached 80 members and continues to grow!

Read about your colleague posted profiles and discussions pertaining to globe trauma and dilation clearance tips.

Click to join: OHIG Community!

ASOT Annual Meeting

The annual **American Ocular Trauma Society** virtual meeting will be held on Sat June 4th @ 10:00am-3:00pm EST. They are currently accepting abstract submissions.

Info on the ASOT Website.

Welcome New Members!

Thanks for joining OHIG! Please verify your information on the OHIG website.



Image Source

Articles

Ophthalmology Inpatient Consultation: Does it Make a Difference to Inpatient Management?, Med J Malaysia, June 2009

A review of ophthalmology consults at a tertiary hospital in Malaysia. Their findings showed that nearly 60% of inpatients had a change in management as a result of ophthalmology consults (so we do make a difference!).

The Application of Clinical Registries in Opthalmic

Trama - the International Globe and Adnexal Trauma

Epidemiology Study (IGATES), Nov 2021

Information about an international multi-center clinical registry for ocular trauma co-authored by OHIG member Fasika Woreta.

Coronavirus Disease Virus Among Ophthalmologists in Nigeria: Knowledge, Attitude, and Perceptions, NJM, Aug 2021

An article looking at knowledge, perceptions, and screening practices for COVID infection within ophthalmology practices in Nigeria.



PEARLS



Temporary Ectropion Repair By Adhesive Tape



Sick of unrelenting exposure keratopathy from Bell's Palsy on consults? Check out this brilliant yet simple oblique oriented adhesive taping technique! It is awesome.

Click here

Diversity, Equity, and Inclusion Audio from the AAO

Diversity, Equity, and Inclusion in Ophthalmology in 2022



Learn more about this important topic from speakers including OHIG member **Fasika Woreta**. Also available for CME credit

Click here

CONSULT ROUNDS



QI: How is your institution set up in terms of inpatient and emergency room consult coverage?

At: At Queen's University, we are affiliated with the Kingston Health Sciences Centre, made up of two hospitals; Kingston General Hospital and the Hotel Dieu Hospital. The Hotel Dieu Hospital serves primarily as an out-patient centre, whereas Kingston General functions to serve inpatient needs. Emergency ophthalmology at Queen's is primarily serviced by the emergency eye clinic housed at the Hotel Dieu Hospital site. We service all emergency consults at this location. For inpatient coverage we have a dedicated consult team, which cycles on a weekly basis. At Kingston General, we have a dedicated "eye room", which is fully equipped to care for both urgent and non-urgent consults.

Q2: Do you have any individuals who serve in an ophthalmic hospitalist role or regularly see inpatient/ER consults?

A2: There is no dedicated ophthalmic hospitalist at our site. Inpatient consults are reviewed by the relevant subspecialty service i.e. oculoplastics, neuro-ophthalmology, retina etc. All consults must be seen within 24 hours if non-urgent. Emergency in-patient consults will be seen by the on-call team or the consult physician depending on availability. The non-inpatient emergency clinic is staffed by a dedicated emergency eye physician and a resident cohort on a daily basis. The emergency staff physician will alternate on a daily basis.



Q3: Are there any similarities or differences you have noted in terms of hospital based consultation for your country vs the US?

A3: In Canada, there are similarities across centres, but there are no consistent practices. Classically, there are dedicated emergency care physicians/teams available for both inpatient and outpatient consults. And of course, across Canada, both emergency outpatient and inpatient care is delivered through a publicly funded system with no direct costs to patients at the point of care. Patients seek and receive care at a given centre largely based on geographic location. At our centre we are thus responsible for providing emergency inpatient and outpatient care for the entire population within our geographic jurisdiction.

Q4: If you are part of a teaching hospital, are there any particular ways you help educate residents on consults?

A4: Residency education around consults occurs through regularly scheduled didactic teaching sessions in each subspecialty area, as well as on a per consult basis as each case is encountered and reviewed with the appropriate subspecialist attending ophthalmologist. Outpatient and inpatient emergency consults often form the basis for interesting cases presented during our weekly grand rounds. These cases often generate extensive discussion engaging both residents and faculty members.

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Qr: How is your institution set up in terms of inpatient and emergency room consult coverage?

At: The Department of Ophthalmology at Shaare Zedek Medical Center, affiliated with the Hebrew University, is a resident-directed program. The hospital employs 19 ophthalmology attending physicians and 11 ophthalmology residents. We provide 24/7 coverage of the Emergency Department and inpatient hospitalization. Our center is one of two major medical centers in Jerusalem which is the largest metropolitan area in Israel, with approximately 1.2 million residents.



During working hours, ambulatory Emergency Department patients are evaluated at our outpatient ophthalmology clinics by a multidisciplinary team of optometrists, technicians, and ophthalmologists. On nights and weekends, on-call residents provide inpatient and Emergency Department consult coverage in a designated ophthalmology emergency room fitted with all necessary equipment and assisted by ophthalmic nurses. Attending ophthalmologists are available on-call on nights and weekends to consult, providing support to on-call residents.

Q2: Do you have any individuals who serve in an ophthalmic hospitalist role or regularly see inpatient/ER consults?

A2: For the most part, our residents see inpatient and Emergency Department consults with the support and guidance of our attending sub-specialty ophthalmologists. In addition, we have several ophthalmic hospitalists who provide additional support during working hours.

Q3: Are there any similarities or differences you have noted in terms of hospital based consultation for your country vs the US?

A3: A major difference between the systems is that Israel provides complete health coverage for all its citizens. All citizens have membership in one of 4 HMOs. The Ophthalmology Department at Shaare Zedek Medical Center provides inpatient, outpatient, and emergency coverage to all 4 HMOs. These services are all paid for by the individual HMOs. The US and Israeli hospital-based consultation services are similar in that high-quality, first-rate ophthalmologic sub-specialty care are provided.

Q4: If you are part of a teaching hospital, are there any particular ways you help educate residents on consults?

A4:The Department of Ophthalmology at Shaare Zedek Medical Center is part of a teaching hospital and is affiliated with the Hebrew University of Jerusalem. Our sub-specialty-trained ophthalmologists are readily available to provide resident consultation. Challenging cases are often presented and discussed during our department meetings.

We also provide our residents with daily patient-based didactic teaching rounds and daily subject-based resident teaching led by our attending physicians. Our residents present at our weekly journal club, and weekly department grand-rounds. Manuscripts from our departmental staff are well represented in US and international ophthalmology journals.

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Special Thanks to Dr. Jacob Rullo, Dr. Erin Dohaney, and Dr. David Zadok for sharing their consult set up in Canada and Israel. We greatly appreciate their experience and expertise!

Are you involved in hospital based consults outside the US whether it be your primary institution or a global overseas mission? We'd love to learn more from you!

Share your experience on the AAO/OHIG Community. Click here