

# AUPO FCC Neuro-Ophthalmology Fellowship Triennial Review Question List

AUPO FCC  
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San Francisco, CA 94109  
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## Fellowship Program Information

### Program ID

- 01-030 -- Name of Program
- 01-040 -- Institution of the Parent Ophthalmology Department
- 01-050 -- Fellowship Director (name and degrees)
- 01-060 -- Address (line 1)
- 01-070 -- Address (line 2)
- 01-080 -- City
- 01-090 -- State
- 01-100 -- Zip/Postal Code
- 01-110 -- Country
- 01-120 -- Office phone
- 01-130 -- Cell phone
- 01-140 -- Fax
- 01-160 -- Administrator / Coordinator / Other Name
- 01-170 -- Administrator / Coordinator / Other Phone
- 01-180 -- Administrator / Coordinator / Other E-mail
- 01-181 -- Administrator / Coordinator / Other #2 Name
- 01-182 -- Administrator / Coordinator / Other #2 Phone
- 01-183 -- Administrator / Coordinator / Other #2 E-mail

### The Fellowship

- 01-200 -- Number of FCC compliant fellowship positions offered during Triennial period:
- 01-201 -- Total Number of fellowship positions filled during Triennial period:
- 01-210 -- Duration of each position:
- 01-220 -- Additional Comments:

## Questions about the Institutional Organization

### Does your institution sponsor ACGME-accredited residency programs in:

- 02-030 -- Ophthalmology?
- 02-040 -- Neurology?
- 02-050 -- Neurosurgery?
- 02-060 -- If applicable, does the fellowship program have a letter of support from the Chair and Residency Program Director of the parent Department of Ophthalmology? (PDF of the letter is required if there is an affiliation with an ophthalmology residency program)
- 02-070 -- If applicable, did the Department Chair, Fellowship Director and Residency Program Director work together and periodically meet to assure that the fellowship adheres to the AUPO FCC Neuro-Ophthalmology fellowship program requirements?
- 02-080 -- Ophthalmology residency affiliation:  
(Enter N/A if not applicable)
- 02-090 -- Neuro-Ophthalmology residency affiliation:  
(Enter N/A if not applicable)

## Department Chair / Contact Information

- 02-110 -- Chair Name
- 02-120 -- Street Address (line 1)
- 02-130 -- Address (line 2)
- 02-140 -- City
- 02-150 -- State
- 02-160 -- Zip / Postal Code
- 02-170 -- Country
- 02-180 -- Office Phone
- 02-190 -- Cell Phone
- 02-200 -- Fax
- 02-210 -- Email

## Program's Facilities and Resources

- 03-020 -- Did each Fellow receive medical liability coverage?
- 03-030 -- Does the outpatient area have at least one fully equipped examination lane for each fellow in the clinic (in addition to lanes for faculty)?
- 03-040 -- Is there access to current diagnostic equipment?
- 03-050 -- Do inpatient facilities allow access to sufficient space and beds for good patient care?
- 03-060 -- Are frequent neuro-imaging consultation and conferences as they apply to neuro-ophthalmology included in your program?
- 03-070 -- Are library, research and electronic retrieval of information from medical databases facilities available to the Fellow?

## Questions about Program Assessment and Evaluation

- 04-020 -- Was the educational effectiveness of the program evaluated in a systematic manner to ensure that the educational goals of the program were met?
- 04-030 -- Was there regular evaluation of the fellow's knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician?
- 04-040 -- Did the Fellowship Director, with the participation of members of the faculty meet with the fellow and provide him/her with evaluation (or feedback regarding evaluation) on a semi-annual basis?
- 04-050 -- Did the Fellowship Director, monitor the Fellow's development of knowledge, skills and professionalism and advance his/her clinical responsibilities appropriately?
- 04-060 -- Did the Fellowship Director provide a written, final evaluation that is maintained as a permanent record for each fellow who completes the

program, and have it accessible to the fellow and other authorized personnel?

04-070 -- Was there a formal mechanism by which the fellow had input into the evaluation of each faculty member's knowledge, teaching skills and commitment, and of program performance?

## Program Assessment

### Questions Concerning the Fellowship Program Director

#### Does the Fellowship Program Director:

05-040 -- maintain certification by the American Board of Ophthalmology or possess appropriate equivalent educational qualifications?

05-050 -- have a current license to practice medicine in the state where the institution that sponsors the program is located?

05-060 -- have a clinical practice consisting of at least 50% of patients who have neuro-ophthalmological disorders? ?

05-070 -- have an academic appointment on the faculty of the affiliated ophthalmology or neurology residency program or affiliated institution?

05-080 -- have completed at least one year of fellowship training or the equivalent in Neuro-ophthalmology?

05-090 -- have at least two (2) years of post-fellowship experience?

05-100 -- engage in ongoing research and/or scholarship in the area of Neuro-Ophthalmology, as demonstrated by publications in journals and/or presentations of research and educational material at regional and national meetings?

05-110 -- have a prepared written statement outlining the educational goals of the program with respect to knowledge, skills and other attributes, and educational goals for each major rotation or other program assignments?

05-120 -- have a well-defined written curriculum?

05-130 -- select fellows in accordance with institutional and departmental policies and procedures?

05-140 -- designate and oversee participation by the faculty?

05-150 -- implement fair procedures and due process, as established by the sponsoring institution regarding academic discipline and fellow complaints or grievance?

05-160 -- monitor fellow stress, including mental or emotional conditions inhibiting performance or learning, and drug or alcohol-related dysfunction?

05-170 -- ensure that accurate statistical and narrative descriptions of the program are developed and maintained?

05-180 -- provide the fellow, at time of application information concerning AUPO FCC compliance of fellowships and positions?

05-190 -- inform the fellow prior to the start of training whether they are in a "compliant" or "non-compliant" training position?

#### Has the Fellowship Program Director developed and maintained documentation of the following:

05-210 -- Institutional or inter-institutional agreements?

05-220 -- Fellow selection process?

05-230 -- Patient care statistics?

### The AUPO FCC requires notification from the Fellowship Program Director when there are changes that impact the fellow's training program. Please answer the following related to this Triennial Review Period.

05-250 -- Was there a change in the number of fellow positions in the training program?

05-260 -- Was there a change in the duration of the training period?

05-270 -- Did you grant any extensions of individual periods of training greater than three months?

#### Did the Fellowship Program Director:

05-290 -- periodically evaluate the utilization of resources available to the program and the contribution of each institution participating in the program?

05-300 -- periodically evaluate the program's financial and administrative support?

05-310 -- periodically evaluate the volume and variety of patients available for educational purposes?

05-320 -- periodically evaluate the performance of members of the faculty, and the quality of supervision of fellows?

05-330 -- ensure that attending physicians, who supervise fellows, have sufficient experience for the severity and complexity of the patient's condition?

05-340 -- certify satisfactory completion of the fellow's training?

## Faculty Roster Information

### Program Faculty. In the fields below, please demonstrate that the each faculty member is currently active in publications and research presentations. You may use excerpts from the faculty's CV - within the past 5 years - but please do not submit an entire CV. List the Fellowship Director FIRST

06-050 -- Faculty Member - Names and Academic Titles

06-060 -- Faculty Member - Email

06-063 -- Faculty Member - Status (Please select ALL that apply; must select at least one)

06-070 -- Faculty Member - Role (Please select all educational roles filled by this faculty member. MUST select at least one)

06-080 -- Faculty Member - Location. (Please select the locations where this faculty member fulfills their role. MUST select at least one)

06-090 -- Faculty Member - List all publications in major national / international peer-reviewed journals after Jan. 1, [year] with a maximum of 10 entries.

06-100 -- Faculty Member - List all research presentations at major national / international meetings after Jan. 1, [year] with a maximum of 10 entries.

06-101 -- Faculty Member - Medical School(s) - List institution, degrees, and dates attended.

06-102 -- Faculty Member - Academic Appointments - List the past ten years beginning with your current position, start/end dates and description of position.

06-103 -- Faculty Member - Residency(s): List institution(s), degree(s), and dates attended.

06-104 -- Faculty Member - Fellowship(s): List institution(s) and dates.

06-105 -- Faculty Member - Current professional activities/committees (limit of 10)

06-106 -- Faculty Member - Board Certified?

06-107 -- Faculty Member - Which board?

06-108 -- Faculty Member - If not Board Certified, explain equivalent qualifications:

06-109 -- Faculty Member - Active licensure (please provide which state):

06-110 -- Faculty Member - Start Date (yyyy-mm-dd)

06-111 -- Faculty Member - End Date (yyyy-mm-dd)

## Faculty Questions

07-010 -- Is there at least one faculty member, who may be the Fellowship Director, for each approved Fellowship position?

07-011 -- Is there at least one other faculty member with >1 year post-fellowship clinical experience?

#### Did the faculty:

07-020 -- actively participate in clinical discussions, rounds and conferences in a manner that promotes a spirit of inquiry and scholarship?

07-030 -- participate in journal clubs and research conferences?

07-040 -- actively participate in regional or national professional and scientific societies, particularly through presentations at their meetings and publications in refereed journals?

07-050 -- participate in research, particularly for projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings?

07-060 -- provide guidance and technical support (e.g. research design, statistical analysis) for fellows involved in research?  
07-070 -- adhere to the Declaration of Helsinki on Rights of Research Human Subjects and to the Association for Research in Vision and Ophthalmology's Guidelines for Use of Research Animals?

#### **Did all faculty:**

07-090 -- possess appropriate clinical, research and teaching skills, demonstrate a strong interest in the education of fellows, and demonstrate commitment to their own continuing medical education and participation in scholarly activities?  
07-100 -- have regularly scheduled, documented meetings to review the program's goals and objectives, and the program's effectiveness in achieving them?

#### **Are all faculty:**

07-120 -- certified by the American Board of Ophthalmology and/or The American Board of Psychiatry and Neurology, or in the process of obtaining such certification, or possess appropriate alternative educational qualifications?  
07-130 -- members of the faculty of the sponsoring institution?  
07-140 -- emphasizing in both didactic and clinical aspects of the fellowship training, the AAO principles of ethical and humane treatment?

#### **Other Program Personnel:**

07-160 -- Were there adequate technical and clerical personnel to allow the Fellow an appropriate educational experience?

### **Questions About the Educational Program**

#### **Did each Fellow:**

08-030 -- satisfactorily complete a residency in ophthalmology or neurology that is accredited by either the ACGME or the American Osteopathic Association (or Canadian equivalent) or were they certified in ophthalmology by the ABMS (or Canadian equivalent)? OR graduate from a non-ACGME-accredited residency program outside of the United States or Canada?  
08-040 -- have a minimum of 12 months of clinical training, including appropriate short periods for vacation or special assignments?  
08-050 -- prior to entry in the program, receive notification of the required length of the program, policies for vacation, duties, stipends and other forms of support?  
08-060 -- receive an educational experience designed and supervised by the fellowship program director?  
08-070 -- receive training in the history-taking and examination techniques of ophthalmology as it relates to the discipline of Neuro-Ophthalmology?  
08-080 -- have their medical and surgical cases supervised?

#### **Will each Fellow receive training which includes evaluating results of diagnostic technology in neurology and ophthalmology including the following:**

08-100 -- tests of visual function such as manual and automated perimetry, contrast sensitivity, and color vision?  
08-110 -- MRI, CT, and X-ray imaging?  
08-120 -- ocular electrophysiology including visual evoked potentials, electroretinography, electro-oculography, and recordings of ocular movements?  
08-130 -- A-scan, B-scan, and duplex Doppler ultrasonography examinations as they may apply to neuro-ophthalmology?

#### **Will each Fellow:**

08-150 -- receive training in the indications for, uses of, and limitations of pharmacological, radiological, and surgical therapies that may be recommended for patients with neuro-ophthalmologic disorders?  
08-160 -- be exposed to a broad variety of neuro-ophthalmologic disorders?

#### **Will each Fellow receive surgical experience sufficient to establish expertise and competency substantially equivalent to fellowships in the following specific surgical subspecialties:**

08-200 -- Other surgical experiences in ophthalmology pertinent to neuro-ophthalmology? (specify if yes / explain if no)  
08-210 -- Other surgical experiences

#### **Didactic Components. Will:**

08-230 -- the fellows have documentation for participation in lectures, journal clubs and clinical conferences in Neuro-Ophthalmology, which include case presentations?  
08-240 -- an attending physician be available to the Fellow at all times?  
08-250 -- the fellow be protected from being required regularly to perform excessively difficult or prolonged duties?  
08-260 -- the fellow participate in the evaluation of research findings?  
08-270 -- the fellow be exposed to opportunities to develop new knowledge and research skills?

### **Preparer Information**

#### **This application has been prepared by:**

10-020 -- Name  
10-030 -- Office phone  
10-040 -- Fax  
10-050 -- E-Mail  
10-060 -- Date of submission  
10-061 -- Is there anything in your submission that needs further explanation? Enter your brief comments here.

**By entering the Fellowship Director's name and email a second time, the Fellowship Director acknowledges having reviewed and approved the information submitted on this form.<br><Br>NOTE: Your account access uses the Fellowship Director's Email on record. Entering an email that is different will require that you use that new email address when logging on in the future.**

10-080 -- Fellowship Director (name & degrees)  
10-090 -- Fellowship Director's E-Mail  
10-100 -- Fellowship Director's E-Mail (again, as your signature.)