

Residency in Vision Rehabilitation (Neuro-Optometric Rehabilitation)
Womack Army Medical Center, Fort Bragg, NC
in Affiliation with
State University of New York (SUNY), State College of Optometry

Program Curriculum

The mission of the Womack Army Medical Center (WAMC) Vision Rehabilitation (Neuro-Optometric Rehabilitation) Residency Program is to provide advanced clinical training for military Optometrists in the diagnosis, treatment and vision rehabilitation of patients with acquired brain injury (ABI) in a multidisciplinary hospital-based setting while enhancing traditional primary and acute eye care. In addition, the program strives to provide advanced levels of didactic and scholarly activities to prepare residents for leadership roles within the Optometric profession.

Clinical Activities

1. Resident will devote at least:

- 70% of her/his clinical time providing assessment and vision rehabilitation to patients with ABI at the Intrepid Neuro-Optometry Clinic in a multidisciplinary setting within the Department of Brain Injury Medicine (e.g., neurology, neuropsychology, physical therapy, vestibular therapy, speech and language pathology).
- 20% of her/his clinical time at the WAMC Optometry Clinic in a primary and acute eye care setting evaluating and treating patients with a variety of ocular surface disease, trauma, ocular pathology, and secondary eye disease due to underlying systemic diseases or medications. The resident will gain triaging skills, critical thinking skills, hands-on clinical skills in the areas of acute, trauma and emergency eye care through the on-call service (inpatient and outpatient setting).

2. The resident will have a minimum of 1,200 diverse patient encounters, either alone (direct care) or in conjunction with another health care provider (observed or supervised) by the end of the residency year. These encounters will be comprised of patients with a variety of ABI-related visual disorders as well as a variety of ocular surface disease, trauma, ocular pathology, and secondary eye disease due to underlying systemic diseases or medications.

3. Each resident must have the following minimum number of ABI, primary or acute eye care patient encounters with each of the following primary vision diagnoses:

- Version deficits (i.e., pursuit, saccades, fixation): 150
- Vergence dysfunction: 150
- Accommodative dysfunction: 100
- Visual field defect: 40
- Anterior segment disease (e.g., blepharitis, dry eyes, corneal dystrophies, conjunctivitis, corneal ulcers, uveitis): 80

- Ocular trauma: 20
- Glaucoma/Glaucoma suspects workup: 30
- Retina/Optic nerve conditions (e.g., diabetic, hypertensive, optic nerve disorders, vascular occlusions, systemic medications side-effects, retinal holes, lattice degeneration): 30

Didactic Activities

1. Attend SUNY Friday Program (required attendance when visiting SUNY)
 - Workshop (Public Speaking, Writing)
 - Minor Presentations (9)
 - Major Presentations (16)
2. WAMC
 - Attend 35 hours of grand rounds and lectures presented at SUNY, WAMC, or professional meetings (e.g., Department of Optometry Journal Club presentations, weekly resident presentations at Salisbury VA Hospital (video-tele conference), WAMC Graduate Medical Education lectures)
 - Develop professional communication and enhance the Optometry's role in a multidisciplinary setting the resident will participate on five elective rotations (observational) at WAMC including, but not limited to: Clinical Pharmacy (e.g., Coumadin clinic, ICU ward, Internal Medicine and Family Medicine Rounds); Neurology; Radiology; Laboratory; Dermatology; Oral-maxillofacial; Warfighter Refractive Eye Surgery Center; Pediatric ophthalmology; Ophthalmic surgical procedures
 - Complete readings of journal articles, textbooks, and electronic informational services assigned by the Residency Supervisor to learn and practice evidence-based medicine
 - Attend the WAMC Annual Research Symposium
 - Attend Monthly DOPT Performance Improvement/Staff Meeting
3. Attend Local Training/Meetings:
 - Maxillofacial Anatomy Lab (Methodist University)
 - Thursday case reports (video-tele conference) from W.G. Heffner VAMC, Salisbury, NC
 - North Carolina American Academy of Optometry lectures
 - Local Ophthalmology/Optometry professional meetings

Scholarly Activities

- Provide one minor presentation at SUNY (20 min presentation; Fall)
- Provide one major presentation at SUNY (50 min COPE approved lecture; Spring)
- Present at least one poster or lecture at a major optometric meeting (e.g., AAO,

AOA, NORA, COVD)

- Publishable Quality Paper for a peer-reviewed optometric journal
- Lecture at NCAAO Annual Roger Cummings Resident Symposium (COPE approved)
- Provide at least 15 presentations or lectures to Department of Optometry (DOPT) and/or WAMC staff (e.g., Department of Optometry Journal Club presentations or staff meeting, weekly resident presentations at Salisbury VA Hospital (video-tele conference), rapid fire, WAMC Graduate Medical Education lectures)
- The resident will have the opportunity, based on interest, to participate in clinical research
- The resident will develop his/her clinical teaching skills by participating in the education and supervision of third and fourth year externs rotating through WAMC DOPT
- The resident will provide instruction and training on the diagnosis and treatment of ocular conditions to Family Medicine residents, Physician Assistant students, and other healthcare provider students rotating through DOPT

Commitment to professional growth

- Attend at least one national conference (e.g., AAO, AOA, NORA, COVD or SECO)
- Join and maintain membership in at least two optometric organizations
- Initiate the requirements to become a fellow of one optometric organization (e.g., AAO, NORA, COVD)

Complete training unique to military Optometrists

- Attend one military training (e.g., Combat Casualty Care Course, Military Refractive Surgery Conference, Military Ophthalmology Review Course, Tri-Service Vision Conservation Course)
- Attend WAMC-hosted Officer Professional Development (OPD) lectures and complete all WAMC required training for healthcare providers to comply with Joint Commission standards