| Additional information for the Royal Australian and New Zealand College of Ophthalmologists applicants | | | | |
| --- | --- | --- | --- | --- |
| *To assist RANZCO to make a fair and robust assessment of the equivalency of your qualifications, training and experience RANZCO asks that you comprehensively complete the following document in addition to the VOC3.* | | | | |
| *Pease complete every section including the self-review against the standard near the end of the form and type your answers in the boxes below which will expand to allow you to elaborate as necessary. Please complete this form electronically. Hand-written forms will not be accepted.* | | | | |
| General information | | | | |
| Full Name: | | |  | |
| In which medical specialty/ies do you practice? | | |  | |
| In which medical specialty/ies do you hold postgraduate qualifications? | | | Qualification title:  Year awarded:  University/institution:  (repeat as needed) | |
| In preparation for an application for Fellowship, do you give permission for MCNZ to pass your supervision reports to RANZCO? | | | Yes/No  Signature: | |
| Where do you intend to practice in New Zealand? *Describe location and type and size of institution* | | |  | |
| Medical experience before entering specialist training programme | | | | |
| Please provide details of medical experience after qualifying from Medical School and prior to entry into specialist training. Please attach evidence of position(s) in the form of a certificate or letter on letterhead from employer | | | Institution:  Rotations covered:  From (date) To (date):  (repeat as needed) | |
| Basic Training | | | | |
| Did you complete a period of basic training in ophthalmology? | | | Yes/No  If Yes, complete the following sections | |
| Start and end dates: | | |  | |
| What was the duration of the basic training? | | |  | |
| Was there an entry requirement for this training? | | | Yes/No and provide details | |
| Country/ies of training: | | |  | |
| Hospital/s Institution/s: | | |  | |
| Position title/s: | | |  | |
| Name of formal training program: | | |  | |
| RANZCO basic training program requires trainees to complete:  2 years of basic training during which Trainees must demonstrate integrated clinical skills and knowledge in the Ophthalmic Sciences (OS) such as Anatomy, Optics and Physiology and the Ophthalmic Basic Competencies and Knowledge (OBCK).  Please map your period of basic training to the RANZCO [curriculum](https://ranzco.edu/home/future-ophthalmologists/vocational-training-program/curriculum-standards/).  **Please note** that FRANZCO is a general qualification across all curriculum standards of ophthalmology and scopes of practice. To be eligible for specialist medical registration and therefore eligible to apply for Fellowship of the College, SIMGs are required to be assessed as general comprehensive ophthalmologists across the full scope of practice. Therefore, SIMGs cannot be assessed for specialist recognition in a limited scope of practice. | | | | |
| Details of rotations completed in basic training (including time per rotation and Hospital levels): | | |  | |
| Details of inpatient duties: | | |  | |
| Details of continuity of care including from initial assessment to discharge and/or follow up: | | |  | |
| Details of on call responsibilities: | | |  | |
| Details of level of supervision: | | |  | |
| Details of procedures performed: | | |  | |
| What in-training assessments were undertaken? | | | |  |  |  |  | | --- | --- | --- | --- | | Term Supervisor Report | Yes | On-line learning module assessments | Yes | | Theatre Performance Report (OSAT) | Yes | Workshop assessments | Yes | | Examinations | Yes | Critical assessment of scientific papers | Yes | | Surgical audit and logbook: | Yes | Research Requirements | Yes | | Surgical simulator module tasks | Yes |  |  |   Other: | |
| Was there an exit assessment for the basic training? | | | |  |  | | --- | --- | | **Exam**  National Examination  Regional Examination    External Examination  Local examiners    Other specify Click here | | | Format of the examination: |  | | Length of examination (hours): |  | | Pass rate and/or number of attempts: |  | | Length of training prior to exit examination: |  | | |
| Any other additional details you wish to provide: | | |  | |
| Advanced Training | | | | |
| Did you complete a period of advanced specialist training? | | | Yes/No  If Yes, complete the following sections | |
| Start and end dates: | | |  | |
| What was the duration of the advanced training? | | |  | |
| Was there an entry requirement for this training? | | | Yes/No and provide details | |
| Country/ies of training: | | |  | |
| Hospital/s Institution/s: | | |  | |
| Position title/s: | | |  | |
| Name of formal training program? | | |  | |
| RANZCO advanced training program requires trainees to complete:  2 years of advanced training during which Trainees are expected to demonstrate integrated knowledge, clinical and surgical skills as documented in the clinical standards  Final Year Training - a final year during which the Trainee develops their specialist experience in preparation for specialist qualification and to function in the community as an independent general ophthalmologist.  Please map your period of basic training to the RANZCO [curriculum](https://ranzco.edu/home/future-ophthalmologists/vocational-training-program/curriculum-standards/).  **Please note** that FRANZCO is a general qualification across all curriculum standards of ophthalmology and scopes of practice. To be eligible for specialist medical registration and therefore eligible to apply for Fellowship of the College, SIMGs are required to be assessed as general comprehensive ophthalmologists across the full scope of practice. Therefore, SIMGs cannot be assessed for specialist recognition in a limited scope of practice. | | | | |
| Details of rotations completed in advanced training (including time per rotation and Hospital levels): | | |  | |
| Details of inpatient duties: | | |  | |
| Details of continuity of care including from initial assessment to discharge and/or follow up: | | |  | |
| Details of on call responsibilities: | | |  | |
| Details of level of supervision: | | |  | |
| Details of procedures performed: | | |  | |
| What in-training assessments were undertaken? | | | |  |  |  |  | | --- | --- | --- | --- | | Term Supervisor Report | Yes | On-line learning module assessments | Yes | | Theatre Performance Report (OSAT) | Yes | Workshop assessments | Yes | | Examinations | Yes | Critical assessment of scientific papers | Yes | | Surgical audit and logbook: | Yes | Research Requirements | Yes | | Surgical simulator module tasks | Yes |  |  |   Other: | |
| Was there an exit assessment for the advanced training? | | | |  |  | | --- | --- | | **Exam**  National Examination  Regional Examination    External Examination  Local examiners    Other specify Click here | | | Format of the examination: |  | | Length of examination (hours): |  | | Pass rate and/or number of attempts: |  | | Length of training prior to exit examination: |  | | |
| Do you have formal certification of completion of training? | | |  | |
| Any other additional details you wish to provide: | | |  | |
| Professional experience since completion of training | | | | |
| *Describe practice following completion of specialist training (copy table as required).* | | | | |
| Consultant experience | | | | |
| Position Title: | | | | Start/end date: |
| Hospital/institution: | | | | Country of practice: |
| Main responsibilities: | | |  | |
| Details of the nature of your professional relationships with your peers: | | |  | |
| Age range of patients (max age in years): | | |  | |
| Audits and Surgical Logbooks | | | | |
| List details of audit participation and provide a detailed audit of your last 100 consecutive cataract procedures including complication rates. | Title of Audit:  Institution: | | | |
| Provide surgical logbook summaries from your specialist training and the last 5 years (if applicable). |  | | | |
| Research/Publications | | | | |
| Provide summaries of your published research papers/activities. | List details and publications: | | | |
| Continued Medical Education/Continuing Professional Development | | | | |
| Is there a formal CME/CPD requirement in your current country of practice? | | Yes/No | | |
| Name and details of formal CME/CPD program participating in: | |  | | |
| Have you successfully completed requirements for each year enrolled? | | Yes/No and provide details | | |
| Recertification or revalidation | | | | |
| Is there a formal recertification or revalidation requirement in your country of practice? | | Yes/No | | |
| What are the formal recertification or revalidation requirements in your country of practice? | |  | | |
| Have you successfully completed recertification or revalidation requirements? | | Yes/No | | |
| Details of any formal recertification or revalidation requirement for procedural skills, if relevant, including your compliance with the requirements? | |  | | |
| Area of clinical/surgical expertise | | | | |
|  |  | | | |
| Cataract and lens |  | | | |
| Clinical refraction |  | | | |
| Cornea and external eye disease |  | | | |
| Glaucoma |  | | | |
| Neuro-ophthalmology |  | | | |
| Ocular inflammation |  | | | |
| Ocular motility |  | | | |
| Oculoplastics |  | | | |
| Paediatrics |  | | | |
| Refractive surgery |  | | | |
| Vitreoretinal |  | | | |
|  | | | | |
|  | | | | |
| **Referees** | | | | |
| If you are currently practising in New Zealand, please ensure either that one of the referees you provide for MCNZ is your supervisor or that you provide the details of an additional referee that has worked with you in New Zealand. | | | | |
| The Key Roles of Australian and New Zealand Ophthalmologists | | | | |
| RANZCO’s VTP is informed by the CanMEDS framework which identifies and describes the abilities that physicians require to effectively meet the health care needs of the people they serve.  Please complete the following Information with a view to demonstrating your comparability with the following key roles expected of a practicing Ophthalmologist in Australia: | | | | |
| **Collaborator**  Ophthalmologists work with others who are appropriately involved in the care of individuals or groups of patients. Thus, ophthalmologists must be able to collaborate with patients and multidisciplinary team of health professionals to provide optimal patient care, education and research |  | | | |
| **Communicator**  To provide humane, high-quality care, ophthalmologists establish effective relationships with patients, medical practitioners, and other health professionals. Communication skills are essential for the functioning of ophthalmologists and are needed for obtaining information from and conveying information to patients and their families. Furthermore, these abilities are critical in eliciting patients’ beliefs, concerns and expectations about their illnesses, and for assessing factors that have an impact on a patient’s eye health. |  | | | |
| **Health Advocate**  Ophthalmologists recognize the importance of advocacy activities in responding to the challenges represented by the socio-economic, environmental, and biological factors that determine the health of patients and society. They view advocacy as an essential component of health promotion that occurs at the level of individual patient, the practice population, and the community. Health advocacy is appropriately expressed both by the individual and collective responses of ophthalmologists in influencing public health policy. |  | | | |
| **Manager**  Ophthalmologists function as managers when they make daily practice decisions involving resources, co-workers, tasks, policies, and their personal lives. They do this in the settings of individual patient care, practice organizations, and in the broader context to the health care system. Thus, ophthalmologists should be able to prioritize and execute tasks through teamwork and make systematic decisions when allocating finite health care resources. Ophthalmologists take on positions of leadership in the context of professional organizations and the health care system. |  | | | |
| **Professional**  Ophthalmologists have a unique societal role as professional with a distinct body of knowledge, skills and attitudes dedicated to the maintenance and improvement of eye health in the community. Ophthalmologists are committed to excellence in clinical care and ethical conduct, and to ongoing mastery of ophthalmology. |  | | | |
| **Scholar**  Ophthalmologists engage in a lifelong pursuit to master their domain of professional expertise. They recognize the need to be continually learning, and model this to others. Through their scholarly activities they contribute to the appraisal, collection, and understanding of health care knowledge, and facilitate the education of their students, patients, and others. |  | | | |