RESIDENCY IN PRIMARY CARE/OCULAR DISEASE
VA NEW ENGLAND HEALTHCARE SYSTEM
WHITE RIVER JUNCTION, VERMONT

PROGRAM COORDINATOR: Dorothy L. Hitchmoth O.D., FAAO, ABCMO, ABO
ASSISTANT PROGRAM EDUCATOR: Richard Frick O.D., FAAO, ABCMO
ADDITIONAL STAFF PRECEPTORS: Joseph Gallagher OD, FAAO, ABO, Andrea Murphy OD FAAO, ABO

This residency is funded by the Department of Veterans Affairs. The New England College of Optometry is the residency program affiliate.

Our preceptors are award-winning and are highly involved in organized optometry and academia with many years in clinical practice and teaching. Drs. Frick and Hitchmoth are nationally recognized speakers.

Program Outcomes and Measures will be provided on request.

NUMBER OF POSITIONS: Three

ESTABLISHED IN: 2003

MISSION:
The Mission of the Optometry Service is to provide or ensure delivery of the highest level of quality eye care for our nation’s veterans. This care will be delivered with compassion and in consideration of the Department of Veterans Affairs credo, which in part states;

"We believe our first responsibility is to American's veterans, the patriotic men and women who have defended our freedom and are one of our Country's greatest sources of pride. They have earned the health care and benefits provided by a grateful nation......"  We must deliver quality medical care ......We must contribute to learning through medical education...."

The Mission of this Optometry Service is to educate post-graduate optometrists, optometric student interns, medical students, interns, and residents of Dartmouth medical school and center, as well as other members of the medical staff on all aspects of medical and rehabilitative ophthalmic care. The depth of education will be commensurate with the goals of each individual program. Recently, the program added both physician assistant candidates and Doctor of Pharmacy candidates to the list of trainees rotating through the clinic.
RESIDENCY MISSION STATEMENT:
The mission of our optometric residency program is to provide residents with extensive clinical experience within a patient population of veterans with multiple complex medical conditions. Care of these patients will require extensive utilization of specialty services as well as continuous consultation with other members of the medical team. This program will include participation in didactic and clinical care in both optometry care and internal medicine with emphasis as it applies to the practice of optometry and to the benefit of patient care. This program will foster and promote critical thinking through participation in case reports, formal lectures, posters or other publications at regional or national meetings. Ultimately, this program will provide the resident with the skills and motivation necessary to pursue lifelong learning by ensuring advanced competency in program objectives.

PROGRAM GOALS:
1. Clinical Education and Teaching
   a. Maintain a clinical environment that creates the opportunity to gain advanced competency in ophthalmic disease and associated systemic disease, ophthalmic emergencies, peri-operative ophthalmic care, vision care, and advanced procedures within the optometric scope of practice.
   b. Systems-Based Practice: Train the resident to function competently as an integral part of today's interdisciplinary health delivery system and in consideration of the continuum of patient care.
   c. Provide the resident with the opportunity to learn how to provide clinical education in a competent, compassionate, effective, and patient-focused manner.
2. Didactic Education
   a. Expand the resident’s knowledge base in order to achieve expert competency in ocular disease as would be demonstrated by achievement of board certification in medical optometry by the American Board of Certification in Medical Optometry (ABCMO), the American Board of Optometry or other appropriately accredited certification body approved and widely accepted by the profession of optometry or VHA to assess competency in medical optometry.
   b. Provide the resident with the tools needed to critically investigate new scientific discovery and apply it in the clinic setting, e.g., evidenced-based practice.
3. Scholarship
   a. Provide the resident with the education and guidance needed to develop scholarly work of publishable quality.
4. Mentorship and Credentials
   a. The program director and all other attending doctors will serve as mentors and role models for the resident.
   b. The program director and staff will maintain the scope of licensure and privileges necessary to provide clinical education as outlined in this program.
5. Quality
   a. Maintain program goals and objectives by measuring outcomes and results on an ongoing basis
   b. Foster continuous quality improvement through annual local and NECO committee program reviews.
   c. Maintain resident and staff program satisfaction through established feedback programs in Meditrek and VHA Trainee Satisfaction Surveys.
PROGRAM OBJECTIVES:

1. **Clinical Education**
   Maintain a clinical environment that creates the opportunity to gain advanced competency in ophthalmic disease and associated systemic disease, ophthalmic emergencies, peri-operative ophthalmic care, vision care, and advanced techniques within the optometric scope of practice.

**Outpatient care and outpatient procedures**
Residents will be assigned to patient care 5 days per week at an average rate of 50 hours per week. The resident will be the primary provider, within residency supervision guidelines, for patients presenting with a wide variety of ocular diseases. The resident will have the opportunity, according to supervision guidelines, to participate in advanced invasive and diagnostic techniques. Examples include IVF ophthalmic angiography, minor external ocular and peri-ocular invasive procedures, retinal photography, retinal analysis of the nerve fiber layer, visual field testing, retinal topography and ocular ultrasound. Residents will be present in the optometry clinic 4 days (or eight 5 hour sessions) per week.

Residents will rotate to a variety of other specialty clinics an average of 1 day (or two 5 hours sessions) per week. Rotations will start when the program director determines that the resident has achieved sufficient competency in optometric rotations. Rotations are comprised of a combination of optometric, ophthalmic, and medical subspecialty clinics. Examples include but are not limited to internal medicine, emergency room, neurology, dermatology, rheumatology, retina clinic, cataract surgery, radiology, otolaryngology, low vision rehabilitation, polytrauma/TBI, cardiology, podiatry, internal medicine, emergency medicine, radiology, neurology, and dermatology. Post-operative patients will be encountered either at the VA or affiliate facilities.

**Consultations and Referral-Outpatient**
Residents will be required to refer to members of the hospital staff as well as receive consultation and referrals from staff members.

**Consultation and Referral-Inpatient care**
Residents will be required to consult with medical team members for all inpatients admitted for acute medical or surgical care to include respite, spinal cord injury, rehabilitation, and psychiatric admissions that present with ocular disease or ocular sequelae of systemic disease.

**Diagnostic Tests and Medication Prescriptions (outpatient or inpatient)**
Residents will be responsible for prescribing medicines, ordering diagnostic tests such as laboratory studies, radiology images, and vascular studies under the direct supervision of attending staff.
Other Clinical Care

On-Call
Residents will be required to rotate through our on-call service. After duty and weekend hours are covered 24 hours/day/365 days/year by the optometry service. During call, residents will be responsible for inpatients or outpatients presenting to our drop-in clinic or emergency room according to residency supervision guidelines.

Perioperative Care
Residents will participate in post-operative care for patients who have undergone cataract surgery, retinal surgery or laser, or glaucoma procedures such as ALT or trabeculectomy. Residents will be responsible, in conjunction with an attending, for examining post-surgical patients who undergo surgery in VHA or at any of our affiliate surgical sites.

2. Clinical teaching
Optometry residents will be responsible for teaching any of the following medical team members; medical student, medical resident, nurse practitioner candidate or physician assistant candidate on a rotating basis as dictated by the candidate’s respective program. Trainees will participate as observers while the resident provides direct optometric care to patients. Optometry attending staff will provide guidance on the level of clinical teaching appropriate for each program. For example, a medical student or resident may need instruction on the proper use of the ophthalmoscope. The optometry resident will provide this instruction during the course of regular patient care. It is the intent of our program that our residents will simultaneously provide pertinent clinical case instruction. Likewise, it is the expectation of our program that visiting trainees will actively participate in the patient encounter by discussing and exchanging medical history, physical exam and other case details in a manner this will improve and enhance the patient’s experience and outcome. This activity also concurrently increases interdisciplinary understanding of the OD degree. Our residency program will serve to enhance the interdisciplinary exposure to the “OD” doctor.

3. Didactic Education
a. Expand the resident’s knowledge base in order to achieve expert competency in ocular disease as would be demonstrated by achievement of board certification in medical optometry by the American Board of Certification in Medical Optometry (ABCMO), the American Board of Optometry or other appropriately accredited certification body approved and widely accepted by the profession of optometry or VHA to assess competency in medical optometry.

b. Provide the resident with the tools needed to critically investigate new scientific discovery and apply it in the clinic setting, e.g. evidenced-based practice.
Conferences and Rounds
Residents will attend medical conferences and grand rounds presented by the Dartmouth Hitchcock Medical Center every week.

Optometry grand rounds/journal club will be held once per week before or after patient care.

Residents will be required to attend conferences every week or at a rate that meets our minimum requirements here or as assigned by the program director. Conference topics are published on a monthly basis. Residents are required to review the schedule, mark all conferences they wish to attend and present those choices to the program director for approval no later than the 5th of each month.

4. Scholarship
   a. The resident will complete a research project, clinical case report, or other scholarly activity of publishable quality.

Residents will be responsible for submitting one case presentation, literature review, or research project to a medical or optometric journal or meeting (as a paper or poster). Successful publication is not a requirement.
Residents will prepare at least one presentation over the course of one year on general ophthalmic topics to the V.A. medical staff and or other group of doctors and residents as approved by this program residency director.

   The resident will be required to attend the four NECO Residency Conferences and give a formal presentation at the Spring Conference.

Credentials and Mentorship
The program director and all other attending doctors will serve as mentors and role models for the resident.
   a. Clinical professors will maintain appropriate credentialing in advanced diagnostics. This service will recruit and maintain highly competent optometrists to serve the residents as clinical mentors, including credentials and experience in the following: fluorescein angiography, laser scanning tomography, visual field analysis, scleral depression, 3-mirror fundus evaluation, gonioscopy, corneal topography, CT and MRI interpretation, minor extra-ocular and peri-ocular surgical procedures, and ocular photography through still, digital, and video image capture.

Attending doctors will provide information and instruction on administrative topics influencing healthcare today. Seminars or mini-lectures will be provided on such topics as health care legislation, HCFA regulation, HIPPA regulation etc.
The program director and staff will maintain the scope of licensure and privileges necessary to provide clinical education as outlined in the program.

Outcome: Credentials and Privileges will be maintained through VETPRO and scope of licensure and practice will reflect the broadest optometric scope as outlined by the supervision guidelines and logs.

Quality
a. Maintain program goals and objectives by measuring outcomes and results on an ongoing basis
b. Foster continuous quality improvement through annual NECO committee program reviews (Residency Review Committee)
c. Maintain resident and staff program satisfaction through established feedback programs in Meditrek and VHA Trainee Satisfaction Surveys.

LENGTH OF RESIDENCY AND DUTY HOURS:
This residency commences on July 1st every year and ends June 30th of the following year. A total of twelve months must be completed. Duty hours are Monday through Friday 7:30 a.m. to 5:00 p.m. On-call hours will be in addition to regular duty hours and will not exceed 48 hours bimonthly. Specific call hours are determined by the clinic schedule.

COMPENSATION AND BENEFITS:
The current annual salary is $31,500. This residency is currently funded through the Department of Veterans Affairs, Office of Academic Affairs. The White River Junction VAMC is fully accredited by the Accreditation Council on Optometric Education (ACOE).

Annual leave (vacation) is earned at the rate of 4 hours for every 80 hours on duty not to include on-call hours. Sick leave is also provided at the same rate. Education leave is granted annually for all days of the AOA Congress and AAO meeting. Other educational meetings may be considered.

Professional liability coverage is provided by the Department of Veterans Affairs. It should be noted that there is no active policy provided by VHA that covers residents in practice outside VHA. It should also be understood that VHA professional liability coverage is not maintained in the form of a paid policy. VHA provides liability protection through “self insurance” directives. Questions about liability should be directed to the VHA Department of Human Resources or the residency program director.

White River VAMC Optometry Residency Program receives funding through VHA OAA. Health insurance benefits are provided through VHA. Health insurance benefits are the same benefits offered to regular employees of the White River Junction VAMC. All questions about health insurance coverage should be directed to VAMC White River Junction Human Resources Department, phone 1-802-295-9363.

APPLICATION REQUIREMENTS:
1. Applicants must have completed the Doctor of Optometry degree (O.D.) from an AOA/COE accredited school and be license eligible.
2. Applicants must have completed and passed Parts I and II of the National Board of Examiners board exams. Official copies of such scores will be required.
3. Applicants must seek licensure in any state of the US and must obtain licensure as soon as possible and according to the board rules of the particular state of application.
4. Preference is given to citizens of the United States. Foreign citizens cannot be considered.
5. A personal interview is strongly encouraged.
6. Applicants must apply via the OR MATCH National Matching Services, Inc. (Optometry Residency Matching Services). Follow the application guidelines at https://natmatch.com/ormatch
7. Deadline for applications is January 1st every year.
8. Three letters of recommendation from clinical preceptors are also required. Each letter must come from a clinical preceptor with whom you had direct clinical care experiences.
9. Official school transcripts with seal are required.
10. All Department of Veterans affairs policies with regard to discrimination are followed in the selection process. No preference or exclusion will be given to any candidate based on gender, race, color, creed, age, or national origin.

CRITERIA FOR COMPLETION OF RESIDENCY:
The goals and objectives of this program must be followed and understood to successfully complete this program. The program director and assistant director will provide formal evaluation at the 3, 6, 9, and 12-month intervals. Each evaluation period goals and objectives will be carefully reviewed. Professional conduct as outlined in the orientation material must be followed. All Department of Veterans Affairs policies as outlined in the self-study module must be followed. A journal and log of all activities will also be required for completion. A scholarly work of publishable quality must also be completed. All residents will be strongly encouraged to apply and sit for the Advanced Competency in Medial Optometry (ACMO) exam. A certificate of completion is awarded by the New England College of Optometry once all of the above requirements are met and at the cessation of the residency year.

FOR MORE INFORMATION PLEASE CONTACT:
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