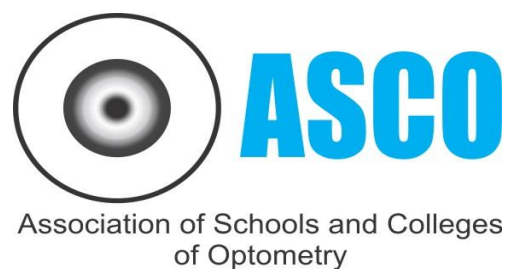




Fellowship Certification Guide

Low Vision Care

An initiative of



www.asco-india.org



Table of Content

1.	Welcome	1
	What is FASCO?	1
	Benefits of FASCO	1
2.	Fellowship Process Overview	1
	Eligibility and enrollment	1
	Fees	2
	Phase 1 – Guided Study	2
	Phase 2 – Final Exam	2
	Phase 3 – Maintenance of Certification	3
	Learning Objectives and Study outline	3
	Syllabus	4
	Contact Lenses Concepts to Consider	5
3.	Open Book Questions	5
4.	Case Study	6
	Format, Submission and Review Guidelines for OBQs and Case reports	7
5.	Mentors	8
	Appendix A – Fellowship process timeframe	9
	Appendix B – ASCO Web Portal Access	10
	Appendix C – Recommended Study Material	11
	Appendix D – List of Mentor	12



Welcome

Association of Schools and Colleges of Optometry (ASCO) welcomes optometrists to enroll in the Fellowship program in Contact Lenses. This guide provides information on the enrolment process, eligibility, examination and maintenance of the Fellowship.

What is FASCO?

A fellow of the Association of Schools and Colleges of Optometry (FASCO) is one who has demonstrated advanced competency in a chosen specialty

Benefits of FASCO

- The fellowship process is mentored by a specialist peer in the chosen field
- The process encourages continuous learning and culminates in an evaluation that clearly demonstrates advanced skill, deeper understanding of concepts and competency in the chosen speciality
- The case based approach helps the fellow in understanding the depth of the subjects
- It helps in logical thinking and improves the philosophies of the fellows
- Earn 10 OCI credit points on completion of the fellowship

FASCO Process Overview

Eligibility and Enrollment:

- Candidates must be optometrists (4 year Programme) from recognized university
- International candidates must be optometrists or the equivalents there of in a country other than India
- The first step is to complete the Fellowship Application form <https://forms.office.com/r/5RgJLYxMMx>
- Once your application is accepted, your enrolment period begins
- Once enrolled you have up to 3 years (from the date of enrolment) to complete the fellowship process. Candidates may enrol for additional enrolment periods.
- Fees paid in the initial enrolment periods do not carry over to subsequent re-enrolment request.
- Timeline – It is the responsibility of the candidate to follow the fellowship (Appendix A) and submit all materials prior to or on the deadline date.



Fees:

For SAARC Countries

- Fellowship fee – Rs 20,000 + 3600 (18% GST)

Other than SAARC Countries

- Fellowship Application fee- USD 500
- Examination fess - USD 250 (to be paid just before the MCE exam and oral interview)
- Total: USD 750

Account Details:

NEFT (bank details given below)

ACCOUNT NAME: ASSOCIATION OF SCHOOLS & COLLEGES OF OPTOMETRY BANK NAME:

BANK: Axis Bank Limited

ADDRESS: New Vasna, Ahmedabad, Gujarat-380055

TYPE OF ACCOUNTS: - SAVING

A/C NO.: 923010025091800

IFSC Code: UTIB0004667

Phase 1 – Guided Study

The Guided Study phase of the Fellowship process is designed to facilitate study through completion of two personal contact programs with mentor, OpenBookQuestionsandCaseReports. The goal is to provide you with the opportunity to expand your knowledge base and to discuss the rationale for treatment of treatment of different of different types of visual disorders in contact lenses.

- Upon successful registration for fellowship each candidate will be assigned a mentor.
- Each candidate will also be given access to the ASCO web portal to access presentations (access details appendix B).
- The first personal contact programme with mentor will be conducted at the beginning of the fellowship process for a period of 4-5 days - dates and venue chosen by the mentor. Cost of stay and travel to be borne by the candidate. This contact programme will initiate the candidate into the fellowship process by way of didactic lectures and hands on training.
- The 2nd contact programme for a period of 4-5 days will be conducted towards the end of the 1st year of fellowship registration - dates and venue chosen by the mentor. Cost of stay and travel to be borne by the candidate. This programme will include discussions, problem solving, didactic lectures and

hands on training.

- The candidate will be required to complete 6 open book assignments and 3 case presentations.
- SeeFormat. Submission and Review guidelines for OBQs and Case reports.

Phase 2 - Final Exam

The phase in the Fellowship process includes Multiple Choice Examination (MCE) and Oral interview. Examination fee (Rs. 5000/-) has to be paid prior to sitting for the exam.

ELIGIBILITY

- The candidate will be required to accumulate 50 credit points to be eligible to sit for the MCE and oral interview
- The credit point break up is as follows (Total Credit points= 50)
 - Open book assignment = 15 credit point
 - case presentation = 15 points
 - ASCO verified portal = 10 points (Each presentation has credit points based on the level of learning)
 - Conference/workshop/COE = 10 credit points (The number of conferences/workshops/COEs attended during the period of fellowship registration)

FELLOWSHIP EXAM

- The multiple choice examination (MCE) = 30 marks.
- The oral interview = 20 marks.
- Minimum of 25 marks has to be scored (MCE and oral interview) to be conferred the fellowship.

Phase 3 – Maintenance of Certification

Fellows must provide the following to the ASCO office prior to the expiration of Certification: A minimum of seventy-five (75) total continuing education hours average over a 5 year period (15 hours/year); Current Curriculum Vitae. There is no recertification fee for those who have maintained continuous Certification every five years. For those who allowed their Certification to lapse at the end of five years, there is a recertification fee of Rs. 5000/-

Learning objectives and Study outline

The Fellowship process is designed to help you expand your knowledge base in all aspects of Low Vision. Advanced competency is expected in the following principles and procedures for the chosen specialty. The first phase of your fellowship process will help you obtain and articulate a deeper understanding of these concepts. The examination phase will further explore your understanding of these issues.



Syllabus – Low Vision Care

Principles and Procedures –

You should be able to define and explain:

- a. The unique qualities, scientific, and clinical principles of each clinical condition.
- b. The epidemiological and demographic characteristics of each clinical condition.
- c. The characteristic history, signs and symptoms for each clinical condition.
- d. Perform a low vision evaluation and functional vision assessment
- e. The differential diagnosis for clinical conditions.
- f. Options for management with devices and rehabilitation of each clinical condition including:
 - i. Functional Vision Assessment
 - ii. Device options
 - iii. Rehabilitation
 - iv. Orientation and Mobility
 - v. Frequency of follow ups
 - vi. Referral criteria (medical, neurological, educational, etc.)

2. Clinical Conditions

Adults

- i. Retinitis Pigmentosa
- ii. Diabetic Retinopathy
- iii. Age related Macular Degeneration
- iv. Myopic Degeneration
- v. Glaucoma
- vi. Optic Atrophy, following trauma or surgery
- vii. Neurological conditions that lead to field and contrast loss.

Children

- i. Heredo macular degeneration
- ii. Albinism
- iii. ROP
- iv. Nystagmus
- v. Congenital cataracts
- vi. Colobomas
- vii. Syndromes
- viii. Rod and Cone dystrophies

Appendix C – Recommended Study material



Open Book Questions

1. Functional Vision Assessment performance in peripheral field loss conditions like RP and Glaucoma. Discuss the tests performed and devices considered and rehabilitation as a part of management.
2. Functional Vision Assessment performance in central field loss conditions like ARMD and HMD. Discuss the tests performed and devices considered and rehabilitation as a part of management.
3. Contrast sensitivity is an important functional assessment test. Discuss the various instruments used in low vision practice and treatment plan options for the various conditions in which CSF is affected.
4. Albinism is a common condition in India. Discuss the epidemiology, functional loss and treatment plan options available for the same.
5. Discuss the availability of electronic magnifiers and devices available in Indian market and the impact in management of cases with vision impairment.
6. Several mobile and computer applications are available for rehabilitating the visually impaired. Enlist the commonly used ones and their significance in facilitating rehabilitation.



Case Study

Before preparing your case reports, thoroughly read Format, Submission, and Review guidelines for OpenBookQuestions(OBQs)and CaseReports.

A. Case Report Topics:

1. One case report with evaluation and management of an adult condition with low vision.
2. One case report with evaluation and management of a child condition with low vision.
3. One case report with field loss for whom eccentric viewing training for reading or orientation and mobility training was given along with devices

B. Content of Case Reports

All case reports must contain the following sections (your final draft must address all ten of the content headings listed below. Please limit to no more than 15 pages double-spaced:

1. Type of Case:
2. History: Patient initials (do not use patient's name on any materials); entering complaint; signs and symptoms; onset, frequency and severity of symptoms;
3. Functional loss, brief summary of previous evaluations; pertinent family eye and medical history; patient's medical history and medications.
4. Diagnostic Data: List all tests by name. List results and observations (quantitative & qualitative). Tests should rule out and define problems.
5. Diagnosis or Diagnoses: Diagnosis should be supported by history, test results, and observations. Functional loss assessment.
6. Devices tried to address functional loss and quantitative improvement recorded
7. Management: Final devices prescribed both optical and non-optical.
8. Follow-Up Care: Disposition of case with results; future considerations; final prognosis; subsequent care.
9. Critique:
 - a. Are there any general or specific items in this case that did not make sense?
 - b. Are there any additional tests that, in hindsight, you might have performed during the original or progress evaluation(s)?
 - c. Are there any rehabilitation techniques you wish you had, in hindsight, utilized?
 - d. Who was more satisfied with the outcome; doctor, patient or patient's family? (E) What would you have done differently? What did you learn?
10. Submit a copy of a typed report you have sent to another health care or related professional as an example of your office communication concerning one of your three cases. (Be sure to delete your patient's name as well as your own.)



Format, Submission and Review guidelines for OBQs and Case reports

OBQs

- Each response should be no less than one page and no more than five pages, double spaced.
- At top of first page, type OBQ# and type the question in its entirety.

Case Reports

- No more than 15 pages, double spaced.
- At top of first page, list the Type of Case

Copies of forms, letters, and reports may be scanned and sent separately as Adobe (.pdf) files. When including a copy of a form, letter, or report on your letterhead, delete or black out any information that identifies patient.

- Write in a clear and concise manner and proof read your materials carefully. Remember to use the spell check.
- Use standard optometric terminology. Reviewers may not understand your clinical “shorthand” or conventions.
- Photocopies of Low vision work up/file notes are not acceptable.
- Each OBQ and Case Report must be submitted as a separate file. Files submitted which contain more than one OBQ or Case Report will not be processed.

Mentors

The mentor, a specialist peer in Low Vision care, will review every submission of the mentee and will write back with comments and observations. In addition mentor will organize two one-week contact programs during the Fellowship process- One at the beginning of the fellowship and the second towards the end of the fellowship process. The mentor need not be located in the same place as mentee. Travel and other related costs will be borne by the mentee.

From the choice of mentors provided, candidates are free to select three and list them order of preference.

Mentor 1 _____

Mentor 2 _____

Mentor 3 _____

Appendix D –List of mentors with contact details



Appendix A

Fellowship process timeline

Important please note: Answers to the three open book questions (OBQs), and 3 case reports must be uploaded/sent electronically to mentor and marked copy to coordinator. The normal review may take two weeks per assignment/case report. If the mentor requests more information (revisions/corrections on the assignment) then additional 2 weeks may be required for review. Please plan your submissions accordingly.

Should you wish to complete the fellowship within a year, following is the timeframe.

Call for registrations towards fellowship

Allocation of mentors and verified portal access given to each candidate

Within 1 months: Induction to the programme electronically and 1st contact programme

Next 6 month – all Open book questions due (All assignments need to be reviewed and approved by the mentor)

Next 3 months – Case reports due

Revision policy: If the mentor seeks revisions/corrections in your submissions you will need to reply with the corrections no later than 2 weeks from the date mail received from mentor.

In 10 months – All 6 OBQs and 3 case reports must be submitted

Note: In order to be eligible to take the multiple choice questions (MCQs) written exam and viva voce, a candidate must have successfully completed all the open book questions and case reports. Once completed, you will be notified about your eligibility.

50 credit points must be accumulated to be eligible to sit for FASCO exams and viva By 11th month of enrolment – Announcement of eligible candidates for fellowship exam, Announcement of date and venue for the written examination and viva.



APPENDIX B

ASCO web portal access instruction

A web link will be provided to all registered candidates of the fellowship programme of ASCO to access the ASCO verified web portal.



APPENDIX C

Recommended study material for Low Vision Care

Research articles and suggested journals would be shared with the candidates by the mentors during the course of their fellowship.

Reference Textbooks

1. Guidelines for Comprehensive low vision management: Vision 2020-India Manual
2. The Art and Practice of Low Vision by Freeman and Jose
3. Functional Assessment of Low vision by Bruce and Roy
4. Understanding Low vision by Randall Jose
5. Remediation and Management of low vision by Bruce Rosenthal
6. The Lighthouse Handbook on Vision Impairment and Vision Rehabilitation



Appendix D

List of mentors for Low Vision Care

Name: Dr. Prema K Chande
Affiliation: Head- Lotus College of Optometry
City: Mumbai
Email id: prema@lcoo.edu.in

Name: Devanshi Dalal
Affiliation: Parul University
City: Vadodara
Email ID. devanshidadal30@gmail.com

Name: Dr. Rituparna Ghoshal
City: Kolkata
Email ID. Rituparna4ab@yahoo.co.in

Name: Ms. Yogeshwari Bansal
Affiliation: HOD- Optometry: ICARE eye hospital & Postgraduate institute
City: Noida, UP
Email Id: yogeshwari@icarehospital.org

Name: Ms. Bhavya Mathpathi
Affiliation: Optometry Council of India
City: Bangalore
Email id: bhavyamathpathi@gmail.com



Facilitate.. Educate.. Upgrade

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