

Glaucoma 1

Module Code:	OPT7002-B
Academic Year:	2018-19
Credit Rating:	20
School:	School of Optometry and Vision Science
Subject Area:	Optometry
FHEQ Level:	FHEQ Level 7 (Masters)
Module Leader:	Ed Mallen

Additional Tutors:

Pre-requisites:

Co-requisites:

Contact Hours

Type	Hours
Lectures	12
Tutorials	7
Laboratory	6
Directed Study	175

Availability Periods

Occurrence	Location/Period
BDA	University of Bradford / Semester 1 (Sep - Jan)
BDA	University of Bradford / Semester 2 (Feb - May)
BDA	University of Bradford / Semester 3 (June - Oct)

Module Aims

To prepare students to participate in referral refinement and OHT/COAG monitoring schemes where a diagnosis has already been established.

Outline Syllabus

Lectures:

- 1) Classification, terminology and clinical feature
- 2) Epidemiology and risk factors
- 3) Examination of the anterior segment
- 4) Pachymetry
- 5) Tonometry
- 6) Visual fields
- 7) Examination of the optic nerve head and retinal nerve fibre layer
- 8) Differential diagnosis
- 9) Detecting changes in clinical status
- 10) Patient information and support
- 11) Guidelines and landmark studies
- 12) Clinical governance

Workshop Sessions:

- 1) Binocular indirect biomicroscopy and optic nerve head assessment
- 2) Contact tonometry
- 3) Pachymetry
- 4) Van Herick and introduction to gonioscopy

Module Learning Outcomes

On successful completion of this module, students will be able to...

- 1 An understanding of OHT and COAG
- 10 Perform and interpret the results of the Van Herick test for the assessment of anterior chamber depth
- 11 Recognise the signs and symptoms of a patient suffering from acute angle-closure and refer the condition appropriately
- 12 Differentiate COAG from other ocular and central visual pathway anomalies.
- 13 Determine timescales for follow -up of patients with diagnosed OHT and suspect OHT
- 14 Detect change in clinical status in patients with diagnosed OHT and suspect COAG.
- 15 Inform patients/public about glaucoma, its detection, prognosis and management and provide them with relevant and accessible information and advice at initial and subsequent visits.
- 16 Communicate effectively with OHT/suspected COAG patients
- 17 Make appropriate clinical decisions relating to OHT and COAG diagnosis and management.
- 18 Critically appraise relevant research.
- 2 An understanding of the techniques needed to fully investigate and differentiate OHT and suspect COAG
- 3 An awareness of demographic, ocular and systemic risk factors for COAG.

- 4 An understanding of the use of perimetric tests for the assessment of a patient at risk of COAG and an ability to choose the most appropriate test strategies, be familiar with their limitations, understand the sources of error, correctly interpret results and recognise glaucomatous field loss.
- 5 An ability to interpret the results of glaucoma specific investigative techniques.
- 6 Take a comprehensive ophthalmic history in a patient with diagnosed OHT or suspect COAG
- 7 Accurately measure IOP using a slit-lamp mounted Goldmann applanation tonometer and to interpret the results.
- 8 Perform an assessment of central corneal thickness using appropriate instrumentation and to interpret the significance of the results
- 9 Assess the optic nerve head by non-contact slit-lamp binocular indirect ophthalmoscopy and to detect the characteristic features of glaucomatous optic neuropathy

Learning, Teaching and Assessment Strategy

The delivery of this module incorporates distance-based learning (online) interactive lectures supported by on-campus practical training workshops. Assessment will be conducted under examination conditions at the University of Bradford. A written paper will be administered via the University VLE. Practical skills will be examined in a station examination, which will again be conducted under examination conditions at the University

Clinical Assessment comprises Station Examination consisting of six assessed stations: Van Herick angle assessment, Goldmann tonometry, tonometer calibration, pachymetry, slit-lamp indirect biomicroscopy, and case history and management.

A rest station is included in addition to the assessed stations, making a total of seven stations.

Mode of Assessment

Type	Method	Description	Length	Weighting	Final Assess'
Summative	Computerised examination	Unseen computerised examination via BlackBoard.	2 hours	100%	Yes
Summative	Clinical Assessment	Station Examination consisting of six assessed stations and one rest	1 hour	%	No

station. Pass/Fail

Legacy Code (if applicable)

OP-7001L

Reading List

To view Reading List, please go to [rebus:list](#).