DEPARTMENT OF OPHTHALMOLOGY, UNIVERSITY OF AUCKLAND: FELLOWSHIP DESCRIPTION: Paediatric Ophthalmology

Location

1. Department of Ophthalmology, New Zealand National Eye Centre
   Faculty of Medical and Health Sciences,
   Grafton Campus, University of Auckland
2. Department of Ophthalmology, Greenlane Hospital, Auckland
3. Starship Hospital, Auckland

Head of Department:

Professor Charles NJ McGhee
MB, PhD, DSc, FRCOphth, FRANZCO, FRSA
Maurice Paykel Professor and Chair of Ophthalmology
Director, New Zealand National Eye Centre

Paediatric Ophthalmology Supervisors (N=4)

Dr Justin Mora MB, FRANZCO (Principal Supervisor)
Dr Yvonne Ng MB FRANZCO
Dr Andrea Vincent MB, FRANZCO
Dr Stuart Carroll, MBChB, FRANZCO

Contact Details

Professor Charles NJ McGhee
Maurice Paykel Professor and Chair of Ophthalmology,
Department of Ophthalmology, Faculty of Medical & Health Sciences,
The University of Auckland, Private Bag 92019,
Auckland, New Zealand

Telephone: 64 9 9236712
Facsimile: 64 9 367 7173

Email h.chinoy@auckland.ac.nz
Website http://www.ophthalmology.auckland.ac.nz
Fellowship Objectives:

The Clinical Paediatric Fellowship is offered as a sub-specialty fellowship for national and international candidates who are completing their specialty Ophthalmology training schemes, and wish to pursue a career in Paediatric Ophthalmology. Fellowship activities will provide an overview of paediatric ophthalmic practice including: Outpatients Clinics, Surgery, outreach consultation mainly to Starship Children Hospital and Research. A flexible attitude should be maintained in terms of time allocation to accommodate unforeseen clinical demands.

This is a primarily clinically-orientated fellowship; however, clinical research is strongly encouraged. The fellow is expected to finish at least one research project during the fellowship time.

Clinical Duties:

The fellow will attend 4-5 clinics weekly generally with supervision for consultants but clinics will continue in the absence of consultants. It is an expectation that the fellow discuss each clinical case with the responsible consultant on the patient management plan, where possible.

There will be 3 operating sessions per week, each supervised by one of the paediatric consultants. The fellow is expected to be familiar with the surgical case well before theatre and this generally includes attending pre-admission clinics. The fellow is expected to attend all postoperative cases whether he/she is the primary surgeon or assistant surgeon.

The fellow is to provide a twice weekly consultation service Starship Childrens’ Hospital, including suspected child abuse cases. The fellow must discuss the case with the consultant paediatric ophthalmologist available at Greenlane on the day of consult. Consultant paediatric ophthalmologists for medical-legal reasons must see all the suspected child abuse cases with positive retinal findings.

Research:

Funding and ethics approval is currently underway for research on “Retcam & OCT characterization of optic nerve and macular structures in normal infants and infants born prematurely.” This will involve retcam imaging all premature infants admitted to the neonatal intensive care unit and also imaging similar numbers of normal controls. The aim of the study is to gather normal data on optic nerve and macular morphology in both premature infants and infants with normal gestation and birth weight. The Paediatric fellow will be primarily responsible for retinal imaging, data collection and interpretation, and manuscript preparation.

The Fellow will be expected to present at least one paper related to current research at a local Royal Australia and New Zealand College of Ophthalmology annual conference.

Teaching:
The fellow will be responsible for coordinating the departmental CME program for Paediatric updates, and assisting in teaching programs for training registrars, nurses and other medical professionals. The Greenlane clinical centre is linked to the University of Auckland for teaching of medical students and fellows will frequently be involved in clinical teaching within the clinic and will also provide occasional lectures/tutorials. Participation in teaching of medical students and therapeutic optometry students is also an expectation of this role.

**Annual Leave:**

5 weeks paid annual leave per year plus public holidays.

**Conference Leave:**

Applications are submitted for approval to the HoD, Department of Ophthalmology. There is no specific funding allocated for attending conferences but several sources are available.

**Evaluation:**

An evaluation after 2 months of the fellowship will be held to determine performance. A mid-term evaluation will also be held with the fellow to evaluate his or her performance and to give feedback regarding progress. Fellows are encouraged to provide feedback and express their comments on how their fellowship is progressing, including areas they would like to further develop.

**Fellowship Duration:** 1 year

**Salary:** The salary is paid at Research Fellow / Level 1 as per the University of Auckland Academic collective agreement.

**Weekly Duties**

The Fellow is expected to be on university or clinical sites at a minimum of Monday to Friday, 8:00 a.m. to 5:30 p.m. regardless of clinical activities. Attendance Saturday mornings 8.30am-10.30am may be required to review surgical/inpatient cases. On call duties will not be onerous, but Fellows are expected to assist with the after hours roster when directed by the Head of Department.

All time not occupied by patient responsibilities must be used to further academic pursuits such as research and teaching. Failure to utilize non-clinical time in an appropriate fashion and unsatisfactory progress may result in curtailment of the Fellowship with one months notice. Except in exceptional circumstances all absences from clinic and operating room duties must be cleared six weeks in advance.

**Housing:**
Unfortunately no residence accommodation is available to support this post. Houses/apartments in Auckland can be rented from $400 to $600 per week.

**Application Process:**

Applications are by CV and cover letter to Professor Charles McGhee at the above contacts. Please include with your CV an up-to-date surgical log. Fellowships normally run from August to July, but flexible start dates are considered. Generally, decisions are made approximately 6-12 months prior to the start date. Interviews are conducted by telephone and personal interviews are not generally required. Please check our website for closing date for sending applications. For flexible start dates, applicants should enquire as to availability.

**Medical Registration:**

Non-New Zealand Nationals may apply. However, foreign medical graduates should note that they may not enroll in any programmes involving patient contact, nor practice medicine in New Zealand, unless they are registered by the Medical Council of New Zealand. This body is entirely independent of the universities: its website may be found at <http://www.mcnz.org.nz/>. Completion of an Australian, North American or UK vocational registrar/residency program usually makes medical registration fairly straightforward.

Those applicants whose medical school was not taught in English and who do not speak English as their native language must have the following minimum International English Language Testing System (IELTS) scores as per the Council requirements:

- Speaking 7.5
- Listening 7.5
- Writing 7.0
- Reading 7.0

The Test of English as a Foreign Language (TOEFL) and Occupational English Test (OET) are not accepted by the Council as alternatives to IELTS. If you require to sit the IELTS examination (please check criteria on the Medical Council website), please ensure you have passed the examination at the time of application.

**Fellow Responsibilities:**

1. Obtain medical registration prior to the start of the programme
2. Obtain practice insurance via Medical Protection Society
3. Obtain visa and work permit from the NZ Immigration Service
4. Obtain health insurance for family members while in New Zealand
5. Adhere to the policies of the University of Auckland and Auckland District Health Board
6. Report to the University Department of Ophthalmology for administrative issues
7. Report to the consultant paediatric ophthalmologists for clinical issues