

Can general A&E doctors manage common eye emergencies?

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DOI:

[10.1038/eye.2016.99](https://doi.org/10.1038/eye.2016.99)

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Document Version

Peer reviewed version

Citation for published version (Harvard):

Murray, PI, Benjamin, M & Oyede, O 2016, 'Can general A&E doctors manage common eye emergencies?', *Eye*. <https://doi.org/10.1038/eye.2016.99>

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In reply to:

EY Ah-kee, RA Scott, A Shafi, G McCabe and LT Lim

Are junior doctors in today's NHS competent in managing ophthalmic cases in the emergency department?

Eye (2016) **30**, 164; doi:10.1038/eye.2015.193; published online 9 October 2015

We read with interest the correspondence highlighting junior doctors being unable to deal with ophthalmic emergencies and agree completely with the authors. In the past it was not uncommon for Eye Units to provide a 24-hour emergency service but this is now no longer the case. It is essential that patients receive appropriate emergency eye care outside of a dedicated eye A&E Department.

We recently undertook a questionnaire survey of Accident and Emergency doctors in 6 NHS Trusts in the West Midlands. The questionnaire was aimed at assessing the confidence and perceived competence of Emergency doctors in general A&E Departments. There were 65 responses: F1/F2 doctors = 12; CT1/ST2 = 19, ST3-6+ = 12; SAS = 13; Consultant = 9. A total of 37/65 (57%) of doctors felt their undergraduate ophthalmology teaching was inadequate, and 41/65 (63%) stated they had not received any formal ophthalmology training within the general A&E Department. The majority of doctors did not feel competent in using standard ophthalmological equipment, including the direct ophthalmoscope (46/65, 71%) and a slit-lamp (44/65, 68%). The number (%) of doctors who were confident or very confident in formulating a differential diagnosis and management plan for: the red eye was 26/65 (40%); acute loss of vision 22/65 (34%); ocular trauma 21/65 (32%); and chemical injury 28/65 (43%).

Our results imply that many doctors working in general A&E Departments do not feel competent in using standard ophthalmological equipment or confident in managing common eye emergencies. Little seems to have changed since the surveys published in 1997¹ and 2008.²

Only 1/12 (8%) Foundation doctors believed they were competent in performing direct ophthalmoscopy and this skill is a Foundation Year 1/2 Examination Outcome "Demonstrates accomplished and targeted examination skills and appropriate use of equipment, including an ophthalmoscope." (Foundation Programme Curriculum 2012 updated for August 2015).

This highlights the importance of adequate undergraduate ophthalmology teaching and formal postgraduate teaching in a general A&E Department. We also welcome a National Survey to see if our findings can be extrapolated to the rest of the country.

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Conflict of interest

The authors declare no conflict of interest.