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ACADEMIC DIRECTOR'S MESSAGE



ASG has been running a successful medical and surgical fellowship program in the specialties of Phacoemulsification, Refractive Surgery, and Vitreoretina. ASG has been at the forefront of giving young postgraduates the platform to grow into superlative ophthalmic surgeons. ASG has more than 200 doctors working from leading institutes including AIIMS (New Delhi), Sankara Nethralaya (Chennai), LVPEI (Hyderabad) and Aravind Eye. We believe in nurturing young talent in practical aspects of ophthalmic sciences through hands-on experience in every aspect from basics to advanced training. These courses will become a cornerstone of surgical fellowship.



The fellowship program at ASG EYE HOSPITALS is entering its 5th year of successful learning and surgical training for our fellows. A long term fellowship of 2 years is being offered in Phacoemulsification, Refractive surgery, Vitreoretinal surgery and Medical retina. Along with an emphasis on training in surgical and medical management in the sub-specialties, orientation with comprehensive ophthalmology is our key focus. Academics include discussions over practical aspects of the specialties, case discussions and special emphasis on surgical audit which includes analysis and discussion by mentors over the surgical videos performed by our fellows. Surgical hands on is being ensured in a way that fellows end up with more than the expected number of cases as they are gaining confidence with the assigned cases. The fellowship program at ASG aims for specialization as well as optimization as an expert in the field of clinical ophthalmology.



ACADEMIC SECRETARY'S MESSAGE



The academic cell of ASG Eye Hospitals is dedicated to providing a positive and inclusive environment to stimulate academics and research. Our ethics committee has been approved by the Department of Health Research, Ministry of Health and Family Welfare, Government of India, to consider research proposals involving human participants. The ASG Group of Eye Hospitals also sponsors consultants and fellows to attend conferences and other academic activities.



The purpose of the International master class is to bring highly experienced ophthalmologist from all over the globe and young budding ophthalmologists to one platform. The aim is to clear all the doubts regarding different ophthalmic diseases. Every single point discussed is important. Currently, we are doing it for vitreoretina but soon it will be for other subspecialties too.



AIMS AND OBJECTIVE

This outline is intended to provide advanced specialty training (Fellowship) at ASG EYE HOSPITALS. The most unique point of completing the fellowship would be the structured approach and training in all practical aspects of the selected fellowship program.

The fellowship program aims to train the young postgraduate student of ophthalmology in real-world scenarios of examining and managing patients with a practical planning approach and hands-on surgical training.

This will enable the fellow to successfully run an independent OPD and attain surgical proficiency along with the mastery of various minor procedures and investigations in OPD. The course also gives a chance to the fellows to conduct research and be involved in the teaching program.

Additionally, soft skills like communication, counselling, and the administrative management of hospital, are expected to be imbibed in the course of the program.



STRUCTURE OF THE PROGRAM

Subspecialty courses offered:

Course	Locations	Seats	Duration
Phaco with medical retina	Kolkata Bikaner Mumbai	1 1 2	24 Months
Phaco and refractive	Jodhpur Varanasi	1	24 Months
Vitreo-retina	Guwahati Varanasi Bhopal Ranchi	1 1 1	24 Months
Phaco with pediatric ophthalmology	Ambala	1	24 Months





Last date of Application

12 September by Email to fellowship@asgeyehospital.com



Centre of Exam

Jodhpur | Bhopal | Kolkata | Varanasi Guwahati | Bikaner | Mumbai | Ambala Ranchi

Travel and accommodation to centre of exam will be borne by the Candidate.

Mode of selection

MCQ and Interview on **15 September**

Criteria for selection

Marks obtained in total

Publication

Maximum of 10 marks (5 marks for each publication only first author or corresponding author)

Interview

30 marks



MCQ in General ophthalmology 60 Marks, Thour duration



The Selected candidates would be required to submit the following certificates for verification by the Institute at the time of joining the training program.

- MBBS Degree Certificate
- MCI Registration / State Council Registration Certificate
- PG-MS/DNB or DOMS certificate, whichever is applicable

These documents will remain in the safe custody of the ASG Eye hospitals Academics Department and will be returned after completion of the course.





Date of Joining

1st October 2024 (if candidate is not joining the seat will be offered to the next eligible candidate)



Stipend

1st YEAR



2nd VFAR





Accommodation

The candidate needs to take accommodation on their own in a nearby location to hospital premises.



Course fee

Nil



Fellows are expected to attend hospital from **10 am** to **7 pm** with lunch break in between. Emergencies will be handled under supervision. One off day per week (not necessarily Sunday) as per center rules will also be given.



One Casual leave/Month

The fellow will attend OPD and OT, initially under supervision and then as per review, will be given independent work.





Goal will be independent handling of patients including skills of refraction, independently operating various machines like AR, NCT, OCT, Fundus Picture, FFA, Fields-HVF, minor procedures like syringing, Ultrasonography A and B scan, PST injection, dispensing of drugs and counseling of patients.

OT



Direct Hands-on training will be provided to fellows as much as possible depending on the surgical proficiency and learning capability of the candidate. Peripheral posting of 1 month will be mandatory to increase surgical exposure.



Academic schedule

Case presentations with discussion, patient rounds, and journal clubs will be held weekly.





Research Paper

It is expected of the fellow to conduct and publish/present at least one original research work during the fellowship. One paid trip to a national/state conference for paper presentation will be encouraged.



Evaluation & Appraisal

Regular evaluation & appraisal will be conducted to monitor the candidate's progress. The candidate will be required to appear for the periodic academic & clinical assessment programs for the resident doctors, **every 3 months with the completion of His/her logbook.**Their performance in these assessments will be considered at the time of award of the fellowship completion certificate. All OPD patients, procedures and OT notes should be meticulously recorded in the logbook.



Discipline and Decorum

ASG reserves the rights to terminate the fellowship in instances of breach of discipline, decorum and candidates not adhering to fellowship time schedule and guidelines.



Future Opportunities

Based on the performance of the fellow, future placement in the various growing centres of ASG will be considered on priority.



Faculty

In house consultants Visiting consultants Guest faculty



RETINA FELLOWSHIP (MEDICAL AND SURGICAL RETINA) COURSE OUTLINE:

The course will be divided into 6 segments of 3 months each with evaluation at the end of every segment. The candidates will be required to achieve 50% marks of the total at the end of the fellowship.

1st Quarter

Basics (History taking, refraction, examination, investigations, and management approach)

Case presentation weekly Once. Total of 12 case presentations are compulsory.

- Retinal anatomy and physiology
- History and refraction in retinal patients
- Slit lamp examination, 90D and indirect ophthalmoscopy
- Fundus picture and fluorescein angiography
- Optical coherence tomography
- Modified Amsler-Dubois chart and colour coding
- Ophthalmic Ultrasound
- HVF, Visual Electrophysiology and Retcam imaging
- Work up of retinal patients and peripheral retinal lesions.
- Research methodology
- Research proposal
- Research topic presentation

2nd Quarter

Diagnosis and management of common pathologies. Case presentation once weekly. Total of 12 case presentations.

- Diabetic retinopathy part 1
- Diabetic retinopathy part 2
- Hypertensive retinopathy
- Retinal detachment
- Age related macular degeneration
- Polypoidal choroidal vasculopathy
- Central serous chorioretinopathy
- Tractional retinal detachment
- Exudative retinal detachment
- Retinal degeneration and dystrophies
- Retinal vein occlusion
- Retinal artery occlusion



3rd Quarter

Diagnosis and management of difficult cases Case presentation once weekly. Total of 12 case presentations.

- Macular telangiectasia and microaneurysm
- Macular hole and vitreomacular traction
- Epiretinal membrane
- Pediatric retinal diseases
- Retinopathy of prematurity
- Uveitis Nomenclature and examination grading
- Vasculitis
- White dot syndromes
- Vitreous hemorrhage
- Ocular ischemic syndrome
- Ocular melanoma
- Retinoblastoma

4th Quarter

Treatment modalities in retina and surgical retina Case presentation once weekly. Total of 12 case presentations.

- Lasers in ophthalmology
- Lenses in ophthalmology
- Photo dynamic therapy and Pan retinal photocoagulation (single spot and PASCAL)
- Injections in ophthalmology
- Operative microscope and surgical technique in retinal
- Band, buckle and oils
- Pharmacotherapeutics in retina
- Scleral buckling
- Gases and Pneumatoretinopexy
- Vitreoretinal surgery: Retinal detachment
- Silicone oil removal
- Proliferative vitreoretinopathy (PVR) and RD



5th Quarter

Surgical retina

Case presentation once weekly. Total of 12 case presentations.

- Endophthalmitis and its management
- Phacofragmentation
- Complications of VR surgery
- Giant retinal tear management
- Surgery of Ocular trauma
- Scleral fixation of intraocular lens (SFIOL)
- Diabetic TRD surgery
- Macular hole surgery
- Myopia and vitreoretinal complication
- Management and surgery in retinopathy of prematurity
- Surgery in pediatric retinal diseases
- Subretinal bleed management

6th Quarter

EXAMS

Presentation once weekly. Total of 12 presentations.

- Research presentation
- Paper Presentation and analysis
- MCQ's Based on 1st quarter and Journal Club
- MCQ's Based on 2nd quarter and Journal Club
- MCQ's Based on 3rd quarter and Journal Club
- MCQ'S Based on 4th quarter and Journal Club
- MCQ'S Based on 5th guarter and Journal Club
- Video recording and video presenation
- Surgical Audit- Retinal detachment and SOR
- Surgical Audit- Macular Hole and ERM
- Surgical Audit- VH and Diabetic TRD
- Surgical Audit- Endophthalmitis and SFIOL



7th and 8th quarter:

Independent assignment for surgical exposure.

The candidate will be posted for atleast 3 months in other centers of ASG hospital for independent surgical cases and refinement of surgical skills.



PHACOEMULSIFICATION AND MEDICAL RETINA

COURSE OUTLINE

The course will be divided into 6 segments of 3 months each with evaluation at the end of every segment. Candidates will be required to achieve 50% marks of the total at the end of the fellowship.

1st Quarter

Basics, Investigation modality and uses OPD work up – history taking, refraction and examination. investigations and management approach.

Case presentation once weekly. Total of 12 case presentations are compulsory. Wet lab, observation and ECCE training will be taught.

- Lens anatomy and physiology
- History and refraction in Cataract patients
- Slit lamp examination, 90D and indirect ophthalmoscopy
- Corneal topography and keratometry
- Optical coherence tomography, Gonioscopy and HVF
- Ophthalmic Ultrasound (A scan and B scan)
- IOL power calculation
- ECCE
- Work up of cataract patients
- Research methodology
- Research proposal
- Research topic presentation

2nd Quarter

Retina basics, investigation modality and uses OPD work up – history taking, refraction and examination. Investigations and management approach.

Case presentation once weekly. Total of 12 case presentations are compulsory.

- Retinal anatomy and physiology
- History and refraction in retinal patients
- Slit lamp examination, 90D and indirect ophthalmoscopy
- Fundus picture and fluorescein angiography
- Optical coherence tomography



- Modified Amsler-Dubois chart and colour coding
- Ophthalmic Ultrasound
- HVF, Visual electrophysiology and Retcam imaging
- Work up of retinal patients and peripheral retinal lesions.
- Intravitreal Injections
- LASERS
- CRYO and PDT

3rd Quarter

Diagnosis and management of common pathologies.

Case presentation once weekly. Total of 12 case presentations. Phacoemulsification surgical training.

- Basics of ECCE/SICS
- Phacoemulsification basics and OVD's
- Surgical steps (Rhexis, hydro dissection and delineation)
- Phacodynamics
- IOL insertion, irrigation, aspiration, and closure
- Management of complication
- Glaucoma and cataract
- Subluxated cataractous lens
- Complicated cataract
- Pediatric cataract
- Traumatic cataract
- Anterior vitrectomy and SFIOL

4th Quarter

Diagnosis and management of difficult cases

Case presentation once weekly. Total of 12 case presentations.

- Macular telangiectasia and microaneurysm
- Macular hole and vitreomacular traction
- Epiretinal membrane
- Pediatric retinal diseases
- Retinopathy of prematurity
- Uveitis Nomenclature and examination grading



- Vasculitis
- White dot syndromes
- Vitreous hemorrhage
- Ocular ischemic syndrome
- Ocular melanoma
- Retinoblastoma

5th Quarter

Case presentation once weekly.

Total of 12 case presentations. SICS and phacoemulsification surgical training.

- Phacoemulsification in advanced IMSC
- Phacoemulsification in MSC
- Cataract in Operated LASIK and RK patients
- Multifocal IOL
- TORIC IOL
- EDOF IOL
- Cataract in operated VR and PPV
- Cataract in small pupil
- Anterior chamber and iris fixated IOL
- Pediatric cataract surgery
- Postoperative follow up and management
- Surgical recording and editing

6th Quarter

EXAMS

Presentation weekly Once. Total of 12 presentations.

- MCQ's Based on 1st quarter and Journal Club
- MCQ's Based on 2nd quarter and Journal Club
- MCQ's Based on 3rd quarter and Journal Club
- MCQ's Based on 4th quarter and Journal Club
- MCQ's Based on 5th quarter and Journal Club
- Research presentation
- Paper Presentation and analysis
- Surgical Audit- Cataract and Glaucoma
- Surgical Audit- Cataract in small pupil



- Surgical Audit- Cataract in advanced IMSC
- Surgical Audit- Intravitreal Injections
- Surgical Audit- LASER's

7th and 8th Quarter

Independent assignment for surgical exposure.

The candidate will be posted for atleast 3 months in other centers of ASG hospital for independent surgical cases and refinement of surgical skills.



PHACOEMULSIFICATION AND REFRACTIVE SURGERY

COURSE OUTLINE

The course will be divided into 6 segments of 3 months each with evaluation at the end of every segment. Candidates will be required to achieve 50% marks of the total at the end of the fellowship.

1st Quarter

Basics, investigation modality and uses OPD work up – history taking, refraction and examination. Investigations and management approach.

Case presentation once weekly. Total of 12 case presentations are compulsory. Wet lab, observation and ECCE training will be taught surgical hands on.

- Lens anatomy and physiology
- History and refraction in Cataract patients
- Slit lamp examination, 90D and indirect ophthalmoscopy method
- Corneal topography and keratometry
- Optical coherence tomography, Gonioscopy and HVF
- Ophthalmic Ultrasound (A scan and B scan)
- IOL power calculation
- ECCE
- Work up of cataract patients
- Research methodology
- Research proposal
- Research topic presentation

2nd Quarter

Diagnosis and management of common pathologies.

Case presentation once weekly.

Total of 12 case presentations. Phacoemulsification surgical training.

- Basics of ECCE/SICS
- Phacoemulsification basics and OVD's
- Surgical steps (Rhexis, hydro dissection and delineation)
- Phacodynamics
- IOL insertion, irrigation, aspiration and closure
- Management of complication



- Glaucoma and cataract
- Subluxated cataractous lens
- Complicated cataract
- Pediatric cataract
- Traumatic cataract
- Anterior vitrectomy and SFIOL

3rd Quarter

Case presentation weekly Once.

Total of 12 case presentations. SICS and phacoemulsification surgical training.

- Phacoemulsification in advanced IMSC
- Phacoemulsification in MSC
- Cataract in Operated LASIK and RK patients
- Multifocal IOL
- TORIC IOL
- EDOF IOL
- Cataract in operated VR and PPV
- Cataract in small pupil
- Anterior chamber and iris fixated IOL
- Pediatric cataract surgery
- Postoperative follow up and management
- Surgical recording and editing

4th Quarter

Diagnosis and management of common pathologies.

Case presentation once weekly.

Total of 12 case presentations. Phacoemulsification surgical training.

- Basics of refractive surgery and aberrations
- Selection criteria and evaluation
- Pentacam
- LASIK and microkeratome
- Femtosecond LASIK
- Femtosecond cataract
- Topo guided LASIK
- Wavefront guided LASIK



- Complications and management in LASIK
- PRK
- ICL
- BIOPTICS

5th Quarter

- Laser in ophthalmology
- Journal club: AAO
- Surgical Audit- Subluxated cataract
- Journal club: AJO
- Surgical Audit: PCR management
- Journal club: ICRS
- Surgical Audit: Phaco in advanced IMSC
- Journal club: IJO
- Surgical Audit: Phaco in small pupil
- Journal club: BJO
- Surgical Audit- Pediatric cataract
- Journal club: EJO

6th Quarter

EXAMS

Presentation weekly Once. Total of 12 presentations.

- MCQ's Based on 1st quarter
- MCQ's Based on 2nd quarter
- MCQ's Based on 3rd quarter
- MCQ's Based on 4th quarter
- MCQ's Based on 5th quarter
- Research presentation
- Paper Presentation and analysis
- Surgical Audit- LASIK
- Surgical Audit- SFIOL
- Surgical Audit- ICL
- Surgical Audit- PRK
- Surgical Audit- Bioptics



7th and 8th Quarter

Independent assignment for surgical exposure.

The candidates will be posted for atleast 3 months in other centers of ASG hospital for independent surgical cases and refinement of surgical skills.



PEDIATRIC OPHTHALMOLOGY, STRABISMUS AND NEURO OPHTHALOMOLOGY FELLOWSHIP COURSE OUTLINE:

The course will be divided in 6 segments of 3 months each with evaluation at the end of each quarter. Candidate will be required to achieve 50% marks at the end of the fellowship.

1st Quarter

Basics (History taking, refraction, examination, investigations and management approach) Observation and assisting in surgeries

Didatic lectures, presentation or journal club on weekly basis numbering 12 in number.

- Anatomy of orbit and extraocular muscles
- History and refraction in retinal patients
- Examination of a squint case
- Diplopia evaluation
- Pupillary examination
- Evaluation of optic disc
- Visual field assessment
- Imaging in strabismus
- Refraction in children
- Examination of a child
- Research proposal
- Research topic presentation

2nd Quarter

Diagnosis and management of common patholgies. Assisting in strabismus surgeries plus starting of strabismus surgical training

Case presentations, talks, journal clubs on weekly basis.

- Glass prescription in children
- Considerations for glasses in children
- Lifestyle modifications for myopia progression
- Optical strategies for myopia progression
- Pharmacological strategies for myopia progession
- Evaluation of a case of pediatric cataract
- IOL power calculation in children
- Strabismus and glasses
- Evaluation of a case of esotropia
- Evaluation of a case of exotropia
- Research progress evaluation



3rd Quarter

Diagnosis and management. Strabismus surgical training

- ROP screening guidelines
- Congenital nasolacrimal duct obstruction
- Congenital ptosis
- Acquired esotropia
- Sixth nerve palsy
- Third nerve palsy
- Fourth nerve palsy
- Research progress evaluation

4th Quarter

Diagnosis and management. Independent strabismus surgeries, training in pediatric cataract surgeries

- Optic neuritis
- Ischemic optic neuropthies
- Pipillary abnormalities
- IOL power selection in children
- Complications in pediatric cataract
- Amblyopia management
- Evidence in amblyopia management
- Progress in research

5th Quarter

Diagnosis and management of complex cases. Independent surgeries Managing a peripheral centre by own once a week

- Dissociated deviations
- Transposition procedures
- Pulley surgeries
- Botox in strabismus
- Glaucoma in aphakia
- Pediatric lid disorders
- Syndromes in pediatric ophthalmology
- Research progress evaluation



6th Quarter

Final assessment of research Paper presentation and analysis Discussion of meta analysis Training of junior fellows Discussion of topics

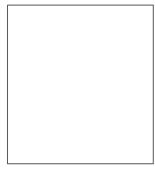
7th and 8th Quarter

Final evaluation of performance Surgical audit

Fellow would be posted in some other centre for 3 months for surgical and OPD exposure



APPENDIX- A APPLICATION FORM- ASG FELLOWSHIP



Please attach a good-quality passportsize photograph. The photograph will be scanned. PLEASE DO NOT STAPLE

Please complete ALL SECTIONS (BOTH SIDES) of this form using CAPITAL LETTERS

First name	Last Name
	tly as you wish it to appear on a certificate. Your name on all the documents, including the certificate, as you write it on this application form. Please be sure that it is correct as no further changes will be allowed
Address	
City	
State	
Postal Code	Country
Gender Male] Female
Nationality	
Telephone numb	per (including country code)
Email address	
Date of birth	
Present place of	work
Location/Choice	of Exam centre
Jodhpur Bh	opal 🗌 Varanasi 📗 Kolkata 🗌 Guwahati 📗 Bikaner 📗 Mumbai 📗
Ambala Ra	nchi 🗌



Sub speciality choice (number as per preference)	
A. Phaco with medical retina	
B. Phaco and Refractive	
C. Vitreo- Retina	
D. Phaco with Pediatric Ophthalmology	
Degree(s)/Qualifications (with dates)	
Medical Registration number and state of registration	
I agree that my name can appear on the ASG website	
reproduced by ASG in connection with the Examination	on(s)
I hereby apply to be admitted to the test to be held	on 15th September 2024, Sunday
Signature of Candidate	Date

Please scan and send this completed form to the following email address before

10th September 2024

fellowship@asgeyehospital.com



ASG Domestic Centres across India

ASSAM

Guwahati (Adabari) Guwahati (Down Town) Guwahati (Paltan Bazaar)

BIHAR

Darbhanga Hajipur Muzaffarpur Patna (Rajendra Nagar) Patna (Danapur)

CHATTISGARH

Raipur

DELHI & NCR

Greater Noida Delhi (Pitampura)

GOA

GUJARAT

Surat Anand

HARYANA Ambala

JAMMU AND KASHMIR Srinagar

IHARKHAND

Jamshedpur

KARNATAKA

Mysore

MADHYA PRADESH

Bhopal Gwalior Indore Jabalpur Sehore Ujjain

MAHARASHTRA

Aurangabad Dombiyali Kalyan Nashik Pimpri Pune Vashi South Mumbai Dadar Mumbai

ODISHA Bhubaneswar

PUNJAB Amritsar Ludhiana

RAJASTHAN

laipur Jodhpur (Sardarpura Skin) Jodhpur (Pal Link Road) Jodhpur (Paota) Nagaur Udaipur

UTTAR PRADESH

Allahabad Kanpur Lucknow (Aliganj) Lucknow (Gomti Nagar) Lucknow (Nirala Nagar) Varanasi (Mahmoorganj) Varanasi (Shivdaspur) Prayagraj Aagra

West Bengal Kolkata (Sreebhumi) Kolkata (BT Road) Kolkata (Tollygunge)

International Centres

UGANDA Kampala

NEPAL

Vasan Eyecare Hospital (an ASG Enterprise)

ANDHRA PRADESH

Guntur Kakinada Kurnool Nellore Tirupati Vijayawada Gajuwaka Vizag Anantapur

TELANGANA

Hyderabad Kukkatpaly A.S.Rao Nagar Begumpet Chanda Nagar Dilshuk Secunderabad Karimnagar Khammam Warangal

TAMIL NADU Chennai

Salem Main Ambattur Chrompet Ammapet Hosur (Krishnagiri) Madipakam Ambur (Tirupattur) Neelankarai Perambur Kanchipuram Vellore Poonmalle Coonoor (Nilgiris) Saidapet Dharmapuri Tambaram Erode Tandiarpet Pollachi Vadapalani Tirupur Coimbatore Namakkal Karaikudi (2) K.Muthur L.Mills Karur R.S.Puram Kumbakonam Thudiyalu Perambalur Madurai Anna Nagar By-Pass Pudukottai Tanjore Thirunagar Dindugul Trichy Nagarkoil Trichy Main Sivagangai Theni Ramnad Tirunelveli Tuticorin Thiruvallur

KARNATAKA

Bangalore Banaswadi Bannerghatta HSR Layout Jayanagar Koramangala Maratha Raja Rajeswari Sarakki Yelahanka Whitefield Belgaum (Belagavi) Davengere Dharwad Hassan Hubli Kolar Mysore Shimoga Tumkur

KERALA

Calicut Kochi Kannur Kottayam Thrissur Thiruvananthapuram Trivandrum Trivandrum (Neyyattinkara)

PONDICHERRY

Pondycherry Karaikal







83 **Cities**



160 Super Speciality Eye Hospitals

Join 2nd largest chain of eye Hospitals

World's second-largest chain of eye hospitals Most trusted hospital for all eye ailments.

500+ Consultants

