#### SOCIETA' ITALIANA di CHIRURGIA OFTALMO-PLASTICA



Presidente: GIUSEPPE VADALA' Segretario: FAUSTO TRIVELLA Tesoriere: LUIGI COLANGELO

www.sicopweb.it

Sede Legale: Via Archimede, 201 – 00197 Roma Segreteria: Via Pansini, 5 – 80131 Napoli

info@sicopweb.it

# **"OBSERVERSHIP GRANT OF**

# THE ITALIAN SOCIETY OF OPHTHALMIC PLASTIC SURGERY"

The **Observership Grant of the Italian Society of Ophthalmic Plastic Surgery** (SICOP – Società Italiana di Chirurgia Oftalmo-Plastica) is designed to support ophthalmologists of developing countries\* at acquiring an up to date experience in diseases and surgery of the eyelids, the orbit and the lacrimal drainage system by attending the everyday practice of tutors selected among Full Members of SICOP.

The Observership will last 6 months and will be supported by a grant of 6000,00 (six thousand//00)  $\in$ . Based on the Observership Programme a final oral text by a SICOP commission of 3 members, which may not include those who acted as tutors, will grant the title of "Fellow of the Italian Society of Ophthalmic Plastic Surgery". Such a position will be connected with a lifelong complementary inscription to the SICOP annual meeting granting a continued education facility.

Applications are now invited for the above post. To apply send a detailed Curriculum Vitae including Certificate of Medical Degree and Certification attesting post degree training in Ophthalmology to info@sicopweb.it by 28.02.2022.

The Observership Programme will start for six consecutive months in 2022 as the conditions of the pandemic allow access to the designated ophthalmologist.

\* priority will be given in the assignment to ophthalmologists from developing countries identified for 2022 by the Ministry of Research and University of the Italian Republic:

Afghanistan, Bangladesh, Benin, Bhutan, Burkina Faso, Burundi, Cambodia, Central African Republic Chad, Comoros, Democratic People's Republic of Korea Democratic Republic of the Congo Djibouti, Eritrea, Ethiopia, Gambia, Guinea, Guinea-Bissau, Haiti, Kiribati, Lao People's Democratic Republic Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mozambique, Myanmar, Nepal, Niger, Rwanda, Sao Tome and Principe, Senegal, Sierra Leone, Solomon Islands, Somalia, South Sudan, Sudan, Tanzania, Timor-Leste, Togo, Tuvalu, Uganda, Yemen, Zambia, Zimbabwe.

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## **OBSERVERSHIP PROGRAMME**

#### General tasks

By assisting the assigned tutor the observer fellow should become competent in the clinical evaluation of orbital, oculoplastic and lacrimal diseases including mastering appropriate documentation as applied to these pathologies.

The Observer fellow should develop knowledge and skills concerning diagnosis and differential diagnosis as well as management of the major orbital, oculoplastic and lacrimal disorders.

Observer fellow should learn the indication and the interpretation of orbital imaging such as ultrasonography, computer tomography, magnetic resonance and vascular techniques.

Observer fellow will be asked to participate in orbital, oculoplastic and lacrimal rounds and to prepare the discussion of clinical cases on a weekly basis.

## Specific tasks

The Observer fellow should learn to evaluate and manage the commonest orbital, oculoplastic and lacrimal emergencies such as:

- Eyelid, orbital and canalicular traumas
- Orbital haemorrhages
- Orbital cellulitis
- Acute dacryocystitis

The Observer fellow should understand the age distribution of orbital diseases The Observer fellow should learn how to diagnose, evaluate and manage disthyroid orbitopathy. The Observer fellow should learn how to differentiate patients with clinical evidence of eyelid and orbital benign or malignant tumours. The Observer fellow should learn how to diagnose and treat chalazia.

The Observer fellow should learn how to assess eyelid malpositions such as ectropion, entropion and identify their aetiology.

The Observer fellow should learn how to diagnose, recognise and propose therapy for ptosis patients. The Observer fellow should learn the work-up of patients presenting tearing/epiphora problems.

The Observer fellow should learn the indications for enucleation and evisceration and the problems connected with post enucleation socket syndrome.

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# Surgery

Regarding surgery observer fellow will be expected to learn how the following procedures should be performed:

Oculoplastic surgery

- temporary and permanent tarsorrhaphies
- biopsies of eyelid or conjunctiva
- management of simple entropion/ectropion and trichiasis
- simple cases of eyelid reconstruction following trauma or surgery
- functional upper eyelid blepharoplasty and direct browlift
- correction of ptosis by external approach and conjunctival approach
- correction of eyelid retraction
- lateral canthotomy/cantholysis

#### Lacrimal Surgery

- probing of the lacrimal drainage system
- intubation of the lacrimal drainage system
- external dacryocystorhinostomy
- adjustment of simple lacrimal puncta malposition (tarso-coniunctival diamond, partial carunculectomy or reduction of the semilunaris plica)
- repair of canalicular lacerations

#### Orbital Surgery

- enucleation + primary implant
- evisceration + primary implant
- socket reconstructions
- orbital decompression
- anterior trans-septal orbitotomy for open sky biopsies