

Estimates of the cost of chlamydial screening vary, but a cost-effectiveness analysis of screening in women aged 15 to 29 years estimates a cost of US\$13 per woman screened.¹²

In light of these arguments, we urge the CPS to reconsider this position statement. We urge a retraction of the recommendation to abandon mandatory prophylaxis until the safety and efficacy of alternative protocols are known and until it can be shown that such a change would not place infants of socially disadvantaged mothers at excessive risk. We urge consultation with the Canadian Association of Pediatric Ophthalmology and Strabismus in the development of a new position statement.

Conor Mulholland, FRCOphth, FRCSC,

Jane Gardiner, MD, FRCSC

Canadian Association of Pediatric Ophthalmology and Strabismus

Correspondence to:

Conor Mulholland, FRCOphth, FRCSC: cmulholland@hsc.mb.ca

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Can J Ophthalmol 2015;50:328-329

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http://dx.doi.org/10.1016/j.jco.2015.04.014

National cross-sectional study of Canadian ophthalmology residency participation in external courses

Dear Editor:

The Canadian Ophthalmological Residents' Society (CORS), a committee of the Canadian Ophthalmological Society, is an organization with representation from each of the 15 ophthalmology training programs in Canada that are listed in [Figure 1](#). Comparisons of ophthalmology residency programs in Canada are lacking in the medical education literature. To better serve our members, we analyzed observational data comparing various aspects of residency training. The first of our studies, "National Cross-Sectional Study of Canadian Ophthalmology Residency Participation in External Courses," was presented at the 2014 Royal College of Physicians and Surgeons of Canada International Conference on Residency Education. The purpose was to compare resident participation in external courses across Canadian ophthalmology residency programs.

External courses ([Fig. 2](#)) were defined as reputable North American ophthalmology basic science or review

courses of at least 1-week duration. Inclusion criteria for external courses required funded participation from at least 1 Canadian ophthalmology residency program from 2009 to 2013. Data were gathered via interviews with key informants from each residency program. Descriptive statistics were used to determine the distribution of attendance across programs and courses as of 2013. Enabling factors were qualitatively explored.

The response rate was 100% with representation from each residency program. Every Canadian ophthalmology resident participated in at least 2 external courses during residency. In decreasing order of participation, residents participated in the following 7 courses from [Figure 3](#) (number of programs enrolled): Toronto Ophthalmology Resident Introductory Course (TORIC) (15), Lancaster Course in Ophthalmology (10), San Antonio Ophthalmology Course (7), Wills Eye Review Course (6), University of Texas Basic Science Course in Ophthalmology (3), Bay Area Ophthalmology Course (2), and Illinois Eye Review Course (1). Enabling factors displayed in [Figure 4](#) include funding, allocated study leave, attendance by previous residents, geographic proximity, and a weekly attendance option.



Fig. 1—Canadian ophthalmology residency programs map.



Fig. 2—External courses map.

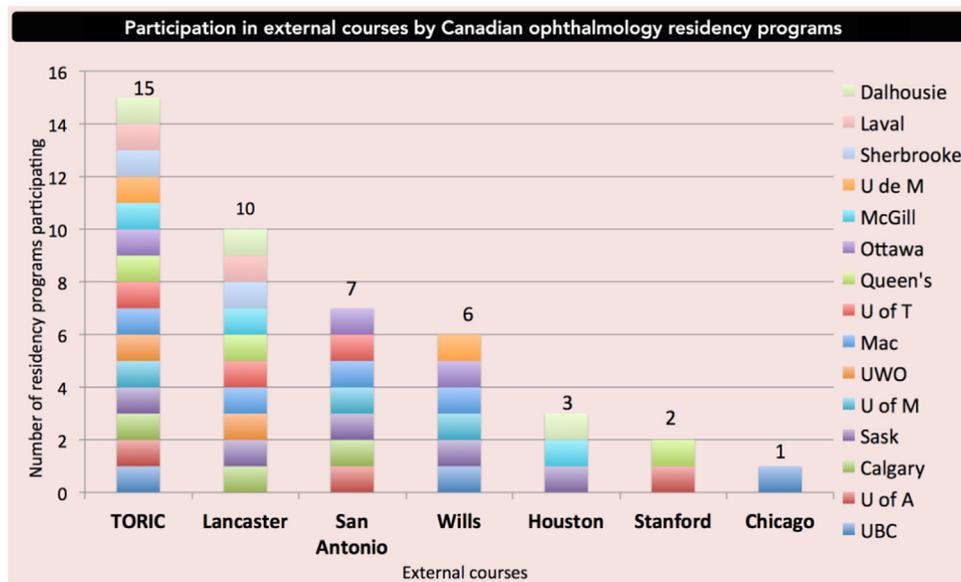


Fig. 3—Participation in external courses by Canadian ophthalmology residency programs.

These courses are highly concentrated learning opportunities taught by renowned faculty. The basic science courses designed for junior residents focus on the fundamentals of ophthalmology, whereas the review courses help senior residents prepare for progress and licensing examinations. All residents participated in TORIC, the recently developed mandatory Canadian basic science course, at the end of their intern year. Participation in other courses varied by program, but all residents attended at least 1 funded basic science or review course, in addition to TORIC during residency. Lancaster, the longest standing basic science course, was the second most popular.¹ Saskatchewan and McMaster were the program leaders, both funding 4 courses.

Clinician-educators have noted the increasing volume of knowledge for residents to acquire over the years, and have suggested supplemental learning modalities, especially for

optics, anatomy, and pharmacology.² Qualitative results from our study confirm that optics and pathology were the highest yield topics for residents across courses. Programs can enable resident participation by providing funding and study leave. Courses can promote attendance by providing weekly enrolment options.

This is the first study to describe participation of Canadian ophthalmology residents in external courses, which are valued ancillary learning forums. As a cross-sectional study, it has limitations. Course participation changes from year to year. Data accuracy was dependent on the knowledge of our key informants. However, our results are applicable to medical students who consider participation in these courses when they rank residency programs. Future CORS studies will compare other aspects of ophthalmology training, which will allow individual programs to evaluate their training models in relation to national trends.

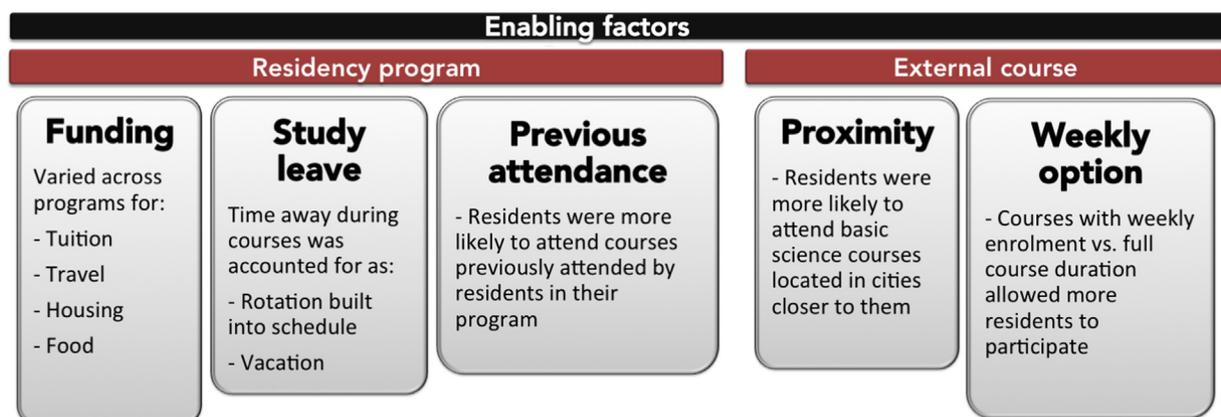


Fig. 4—Enabling factors.

Acknowledgements: We would like to thank the following key informants from ophthalmology programs across Canada: Erica Doucet, Jeremy Murphy, Aaron Joe, Ugo Dodd, Ziad Butty, Nawaaz Nathoo, Andre Jastrzebski, Christine Law, Imran Jivraj, Lulu Bursztyn, Silvia Odorcic, Faazil Kassam, Vasudha Gupta, and Kinda Najem. We would also like to thank the Canadian Ophthalmological Society for supporting this project.

Kim Le, MD, MPH,*† Mona Harissi-Dagher, MD, FRCSC, DipABO‡,§

*McGill University, Montreal, Que.; †Canadian Ophthalmological Residents' Society, Ottawa, Ont.; ‡University of Montreal, Montreal, Que.; and §Canadian Ophthalmological Society, Ottawa, Ont.

Correspondence to:

Kim Le, MD, MPH: kim.le@aya.yale.edu

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Can J Ophthalmol 2015;50:329-332

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<http://dx.doi.org/10.1016/j.jcjo.2015.04.012>