

Ophthalmology Service Census 2002~ 2007 National Eye Database

Second National NED Meeting
Nov 13 2008

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Scope of presentation

1. Introduction
2. Methods
3. Results
 1. Out-patients
 2. In patients
 3. Operation
 4. Cataract service
 5. Diabetic service
 6. Sub-speciality service -VR surgery
 7. Optometry service and low vision service
 8. Prevention of blindness effort-ROP screening
 9. QA indicator- Post intra-ocular op endophthalmitis
4. Limitation
5. Conclusion and recommendation



Why need service census

1. To obtain data for service planning
 1. Human resource planning
 2. Budget planning
2. To study practice pattern
3. To monitor Quality of care
4. To identify centres for post-graduate and subspecialty fellowship training



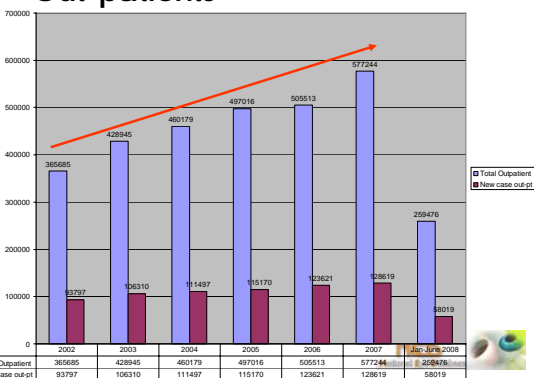
Method

- Participating centre – MOH hospitals
- 2002-2006 – hard copy, yearly
- 2007-2008 on line - Monthly
- Ascertainment for on line- in complete

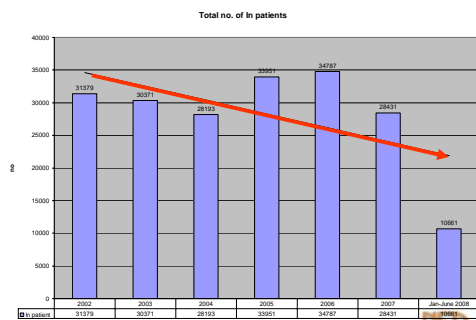
Year	No of Dept	
2002	29	hard copy
2003	32	hard copy
2004	32	hard copy
2005	32	hard copy
2006	34	hard copy
2007	36	NED on line
2008	34	NED on line



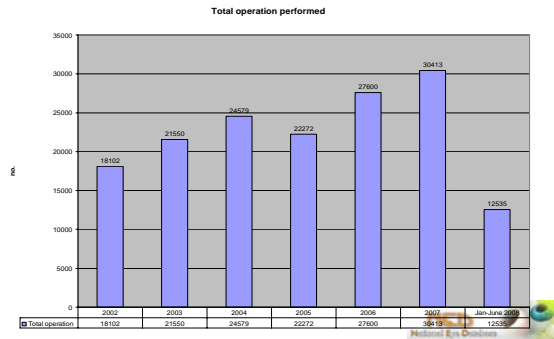
Ophthalmology clinics - Out-patients



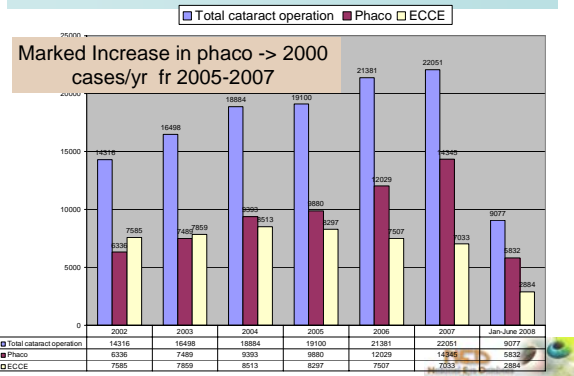
Eye Ward- In patient(admission)



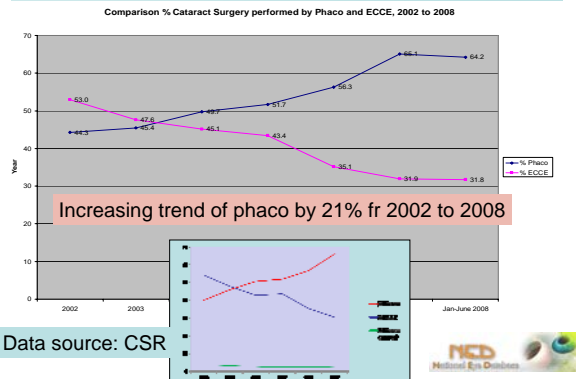
Total operation performed



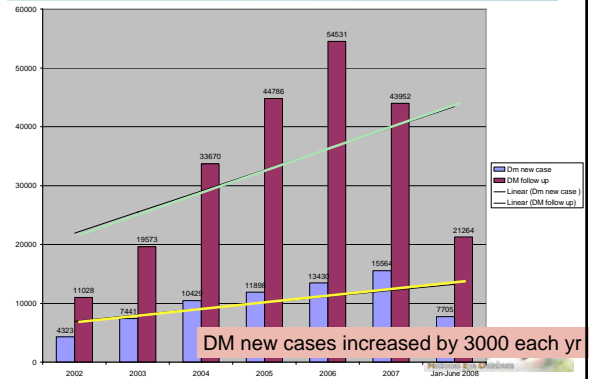
Cataract operations



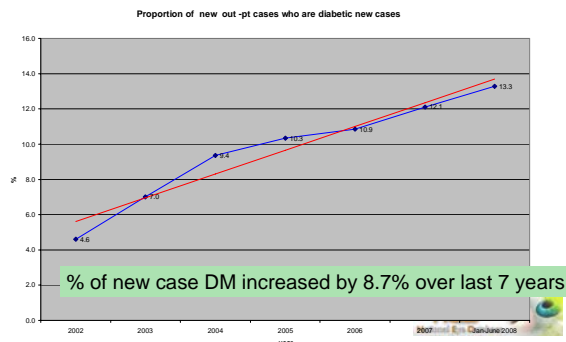
Trend in Phaco surgery over last 7 years data source: census return



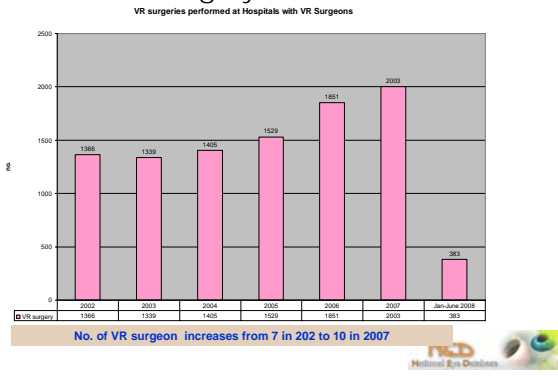
Diabetes patients seen at eye clinics



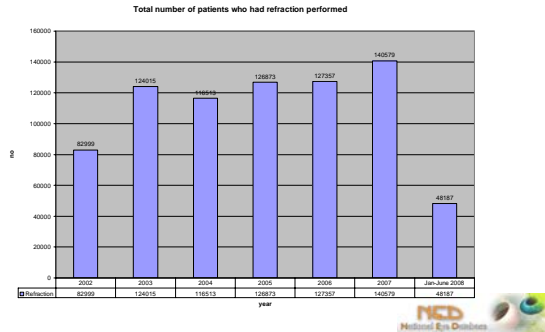
Proportion of new case seen at eye clinics who are diabetic new cases



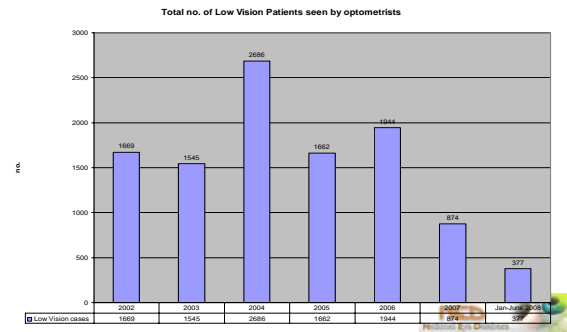
Subspecialty Development Vitreoretinal surgery



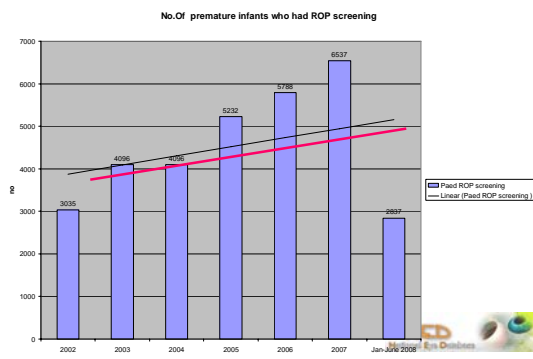
Optometry service (refraction)



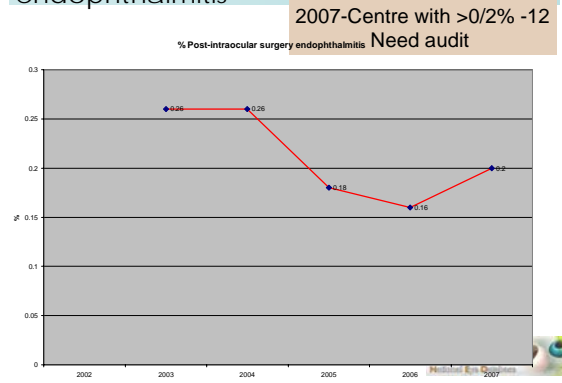
Low vision Service



Prevention of childhood blindness ROP screening



QA indicator -rate of post-op endophthalmitis



Limitations /Recommendation to improve

- Ascertainment- case
- Data quality
 - Missing values
 - Data accuracy
- Need a staff to be MA in charge
- Make data collection as part of work process
- Go back to NED to correct wrong entry
- Data quality
 - check for completeness
 - Check for accuracy
- Send hard copy CRF monthly to NED, Hosp Selayang for keying in

Discussion

- Improvement in Ophthalmology service over the last 8 years
 - Phaco – increased over 21 % over last 6 years
- Demand for eye care services due to change in disease pattern and awareness of doctors and patients
 - DM new case
 - ROP screening
 - Low vision
- QA- post- op endophthalmitis – certain SDP persistently higher > 0.2%
- Incomplete data entry- need to look into work process to have complete data entry
- HOD and Doctor in charge
 - monitor data entry
 - review and use data for dept planning

Acknowledgement

- The census is collected by dedicated teams of staff at all OPH departments
- We wish to thank
 - heads, site co-investigators, site coordinators and all the staff of Ophthalmology Departments, MOH
 - Registry coordinating Unit : SN Teng , Cik Norazah Md Yusoff, Cik Tuan Junaidah Tuan Jusoh

