

# ANNUAL REPORT

(2020-2021)

OPHTHALMOLOGY DEPARTMENT

RAWALPINDI MEDICAL UNIVERSITY

## Standard Operating Procedures

### Eye Department RMU & Allied Hospitals

SOPs of the department of Ophthalmology RMC & Allied Hospitals will be described in terms of its **i). Staff ii). Activities**

**iii). Electro-medical Equipments**

## STAFF

**Designation: Professor**

**Reporting to: VC job**

**Responsibilities:**

- a. Head of department.
- b. Is responsible for teaching of medical students.
- c. Is supervisor of residents.
- d. He chairs all the academic, clinical, surgical and administrative issues.
- e. To make grand round in the ward weekly.

**Designation: Associate Professor**

**Reporting to: Professor Job**

**Responsibilities:**

- a. Teaching to the medical students and residents
- b. Clinical work according to the ward roster
- c. Looks after the department in the absence of Head of department.
- d. To facilitate all the departmental activities.
- e. To look after the research activities in the department.

**Designation: Assistant Professor**

**Reporting to: Professor Job**

**Responsibilities:**

- a. Teaching to the medical students and residents.
- b. Makes daily ward round.
- c. Supervises the junior staff in their clinical, surgical and academic activities.
- d. Looks after the research activities in the department.

**Designation: Senior Registrar**

**Reporting to: Professor Job**

**Responsibilities:**

- a. Checks the patients file and notes written by Medical Officers, residents and house surgeons.
- b. Does morning and evening rounds.
- c. Manages the emergency works of the department.
- d. Has a close liaison with the administration.
- e. Checks the attendance and the work of junior staff.

- f. Looks after the department regarding smooth working of clinical, surgical and academic activities of the department.
- g. Has to maintain the OT list and ensure the availability of essential items required in OT and will keep liaison with anesthesia department.

**DESIGNATION: CONSULTANT OPHTHALMOLOGIST**

**REPORTING TO: MEDICAL SUPERINTENDENT JOB**

**RESPONSIBILITIES:**

- a. Conducts consultant OPD.
- b. Manages surgical activities of the department
- c. Medico legal certificates
- d. Medical certificates
- e. Research activities.

**Designation: Ophthalmology Resident**

**Reporting to: SR/AP**

**Job Responsibilities:**

- a. To perform OPD work and refer the cases for consultation
- b. To perform morning and evening ward round.
- c. To maintain the record of admitted patients.
- d. To start the initial treatment of the patient.
- e. He is responsible for pre and postoperative patient care.
- f. To perform various emergency surgical procedure under supervision of consultant.
- g. To assist and participate in various academic and research projects.

**Designation: House Surgeon**

**Reporting to: SR/Resident Job**

**Responsibilities:**

- a. To take history and to carry out orders as advised by consultant.
- b. To do pre-operative preparation for surgical procedures.
- c. To get anesthetist's and other department's consultation when required.
- d. To assist his senior in OT and Emergencies.
- e. To perform minor procedure under supervision.
- f. To attend and participate all academic activities.

## Activities

### O.P.D

Active OPD clinics are run six days a week (Except Sunday) from 8am till 2pm. Patient in the eye OPD first reports to the reception counter for slips and then patient is sent to the vision room from where the patient is screened and sent to the relevant clinic (Refraction room or Resident room). Two medical officer and three residents on rotation basis attends OPD on all the working days of the week. They are released from the ward duties and operation theatre duties. OPD days will be distributed among Assistant Professor, Senior Registrar & Distt. Ophthalmologist. All the patients presenting in the OPD have to be screened by residents and medical officers before being referred to the consultant.

### REFRACTION

Refraction is performed in the Optometry Room and maximum numbers of patients are refracted per day. Further appointments are given if required.

### WARD

In the morning there is a ward round which has to be attended by all the doctors. House surgeons and residents have to see the patients prior to the round and write the progress notes. Round is conducted by the Professor or senior doctor present at the time. Ward round is conducted only on OPD days. Any discharges to be made are decided during the round.

Operation list is prepared and the pre-operative done accordingly.

### ADMISSIONS

Patients are admitted on admission days and emergency can be admitted at any time.

Only consultants are allowed to admit the patients. Any admission made by the resident has to be counter signed by the consultant.

Any admission through emergency can be done by resident at any time.

### EMERGENCY SERVICES

House surgeon (1<sup>st</sup> on call) and ophthalmology resident (2<sup>nd</sup> on call) attend the emergencies 24 hours on rotation basis. The consultant (3<sup>rd</sup> on call) is available as and when required.

### OPERATION THEATRE

There are two OTs at present: One for G.A and Emergency Cases, (the same one being stand by ENT department): the second OT solely for L.A Cases of Eye department. The one for L.A Cases is located in front of the ward and it's a newly renovated operation theatre. The operation theatre is fully equipped with the state of the art of microscopes and phacoemulsification system. List is done thrice weekly. List starts at 8:00 am.

Head of the department or the senior present at the time will mark the list.

Head of the department will head the lists. It is professor's discretion to nominate AP & SR as in charge of separate lists or have a combined list.

## MINOR OT

Residents and house surgeons will be deputed in the Minor OT on the main operation days.

## PUBLICATIONS:

Following is the list of published and ongoing research articles at Ophthalmology Department, RMU

1. Noor-ul-huda, Muhammad & Tehsin, Samabia & Ahmed, Sairam & A.K. Niazi, Fuad & Murtaza, Zeerish. (2018). Retinal images benchmark for the detection of diabetic retinopathy and clinically significant macular edema (CSME). Biomedical Engineering / Biomedizinische Technik. 10.1515/bmt-2018-0098.
2. Niazi FAK, Janiua MI, Khan MR, Niazi MAK. Effect of Preoperative Intravitreal Bevacizumab on the Success of Trabeculectomy with Mitomycin C in Neovascular Glaucoma. J Rawal Med Coll Jan – Sep 2015; 19(2):143-5
3. Niazi FAK, Mirza BH, Niazi M, Niazi MAK. Diabetic Macular Edema; Role of Intravitreal Bevacizumab in Treating Clinically Significant Diabetic Macular Edema. Professional Med J 2014;21 (4): 810-815.
4. Zia S, Khan QA, Iqbal Y, Khan FAK. Visual outcome after cataract surgery in penetrating ocular trauma. Gomal JMC 2014; 12(2): 628-631.
5. Niazi FAK, Khan AM, Niazi M, Niazi MAK. Clinical Manifestations of Goldenhar Syndrome. Professional Med J. 2013 Jul-Aug;20(4) 617-622.
6. Khan AM, Niazi FAK, Shahid S, Mahmood S. Awareness of Complications of Contact Lenses in Medical Students. PJMHS 2013 Apr-Jun;7(2): 465-467.
7. Iqbal Y, Niazi FAK, Niazi MAK. Frequencies of eye diseases in school age children. PJO 2009 Oct; 25(4): 185-190.
8. Baig MM, Niazi MAK, Niazi FAK, Najeeb T. Rhino-Orbito-Cerebral mucormycosis: clinical presentation and outcome. ANNALS OF PIMS 2009 Apr-Jun; 5(2):108-111.
9. Saeed M, Niazi FAK. Ocular injuries in earthquake victims. JRMC 2007 Jan- Jun; 11(1): 30-32.
10. Niazi FAK, Niazi MAK. Periocular basal cell carcinoma: Characteristics and distribution among patients. JRMC 2003; Jul-Dec; 7(2):63-68.

11. Niazi FAK, Niazi MAK. Safety and efficacy of sliding conjunctival autograft including limbal stem cells compared to simple sliding conjunctival autograft in treating recurrent pterygium. *JRMC* 2003 Jul-Dec; 7(2):59-62.
12. Niazi FAK, Niazi MAK. Normal Tension Glaucoma: Identification of Associated Factors. *JRMC* 2005 Jan- Jun;9(1):5-11.
13. Gull A, AHMED S, ALI S, RAZA A. phacomulsification in senile white mature cataracts; its safety and efficacy. *Pakistan Journal of Ophthalmology*. 2019;35(4):281-6.
14. Gull A, Ahmad S, Niazi FA, Raza A. Clinical Outcome of Pars Plana Vitrectomy With Or Without Intravitreal Bevacizumab As A Pretreatment in Advanced Diabetic Eye Disease. *Pakistan Journal of Ophthalmology*. 2020 Jul 24;36(4).
15. Gul AG. Visual Outcome of Open Globe Injuries in Paediatric Patients. *Journal of Rawalpindi Medical College*. 2017;21(3):226-8.
16. Gull A. Visual Screening and Refractive Errors among school aged children. *Journal of Rawalpindi Medical College*. 2014 Jun 30;18(1):97-100.
17. Zubair M, Kant UA, Baloch MR, Munshi M, Mirza BH, Niazi FA. Frequency of Raised Intraocular Pressure and its Correlations to the energy used following Neodymium YAG Laser Posterior Capsulotomy in Pseudophakes. *Journal of Rawalpindi Medical College*. 2020 Jun 26;24(2):144-8.
18. Munshi M, Abbasi KZ, Zia A, Rasool W, Zubair M, Niazi FA. Success rate of Nasolacrimal Duct Probing in children with Congenital Nasolacrimal Duct Obstruction after the age of one year. *Journal of Rawalpindi Medical College*. 2021 Mar 30;25(1):16-20.
19. Gull A, Niazi FA, Raza A. Treatment of Severe Recalcitrant Fungal Keratitis Using Subconjunctival Fluconazole as an Adjunctive Therapy. *Pakistan Journal of Ophthalmology*. 2021 Jan 26;37(2).
20. Ahmed S, Ghazanfar I, Niazi FA, Raza A. Role of Nepafenac 0.1% Ophthalmic Solution in Preventing Intraoperative Miosis during Phacoemulsification. *Pakistan Journal of Ophthalmology*. 2021;37(1).
21. Saira B, Sumaya K, Mahnoor W, Moniba I, Hamza WB, Ali R Effect of pterygium excision on mean corneal curvature. *The professional medical journal*;2021; 2: 568-571
22. Muhammad IJ, Saira B, Ali R. Retinopathy in Pregnancy Induced Hypertension. *Pak J Ophthalmol* 2015; 4: 172-176.
23. Muhammad IJ, Saira B, Ali R. Efficacy and Tolerability of Latanoprost 0.005% in Treatment of Primary Open Angle Glaucoma (POAG). *Pak J Ophthalmol* 2017; 3: 163-168.
24. Mushtaq A, Khan AA, Sadia MA, Qavvum S, Khan MR, Raza A. Retinoblastoma treatment outcomes in Pakistan. *The Professional Medical Journal*. 2020 Nov 10;27(11):2499-503.
25. Rafi PM, Khan MR, Azhar MN. Evaluation of the Frequency of Posterior Segment Pathologies Determined by B-Scan Ultrasonography in Patients with Congenital Cataract. *Pakistan Journal of Ophthalmology*. 2013;29(04).
26. Khan MR, Azhar MN, Mahmood MS. Comparison between Topical Olopatadine Hydrochloride 0.1% and Ketotifen Fumarate 0.025% for the Relief of Symptoms of Vernal Keratoconjunctivitis (VKC). *Pakistan Journal of Ophthalmology*. 2013;29(04).
27. Amin A, Gulzar A, Arif I, Zulfiqar A, Javed I, Khan MR. Refractory Errors: Myopia V/S Hypermetropia And Eye Correction Techniques Used Among Adult Population Visiting A Tertiary Care Health Facility. *Journal of Rawalpindi Medical College*. 2018 Dec 29;22(S-1):11-4.
28. Jabeen S, Khan R, Raza A. Prophylaxis of Macular edema with Per-operative Intravitreal Bevacizumab in Diabetic Retinopathy Patients Undergoing Phacoemulsification. *Pakistan Journal of Ophthalmology*. 2019 Jan;35(1):1.

## ON-GOING RESEARCHES/DISSERTATIONS

1. Effectiveness of intralesional/subconjunctival Bevacizumab in Pterygium. (Synopsis Submitted)
2. Effect of prophylactic use of fixed combination of topical dorzolamide and timolol on intraocular pressure spike after intravitreal Bevacizumab. (Synopsis Submitted)
3. Comparison of topical proparacaine versus retrobulbar lignocaine for cataract surgery in terms of patient's satisfaction and pain relief. (Synopsis Submitted)
4. Use of topical insulin for refractory corneal ulcer. (Synopsis Submitted)
5. Pulse diode laser in refractory glaucoma. (Synopsis Submitted)
6. Long term impact of Pan-retinal photocoagulation and intravitreal Bevacizumab on choroidal thickness of Diabetic Retinopathy patients. (Synopsis Submitted)
7. Effect of smoking on pre-corneal tear film and ocular surfaces. (Synopsis Writing)
8. Effect of single intraoperative injection of sub-tenon triamcinolone acetonide on mean macular thickness and visual outcome of the diabetic patients undergoing cataract surgery. (Synopsis Submitted)
9. Effect of sub-conjunctival bevacizumab combined with fine needle-diathermy on outcome of penetrating keratoplasty in vascularized cornea. . (Synopsis Writing)
10. Timing of the surgical intervention and visual outcomes in cases of traumatic globe perforation. . (Synopsis Writing)

# Annual Report (20-21)

## Eye Department

### Holy Family Hospital

#### Faculty and Residents

##### Ophthalmology

**Professor & Head of Department:** Prof. Dr. Fuad Ahmad Khan Niazi

**Assistant Prof:**

Dr. Sidra Jabeen

**Senior Registrar:**

Dr. Rizwan Khan

Dr. Saira Bano

Dr. Sidra Naseem

**Medical Officers:**

Dr. Arshad Malik

Dr. Sikandar

Dr. Rumaisa

**Residents (FCPS/MS):**

Dr. Aneeqa Ali

Dr. Laiba Tabassum

Dr. Muhammad Rafeeq

Dr. Maryum Noor

Dr. Faryal Ahmed

Dr. Amna Khalid

Dr. Hassan Hamid  
Dr. Ayesha Bakhtawar  
Dr. Aiza  
Dr. Mahnoor

## Optometry

**Refractionist:**

Miss Tehmina  
Miss Aale Zara

**Optometrist (teaching)**

Miss Maryum  
Miss Nazish

## EYE OPD AND WARD STATISTICS

Month	No. of patients in OPD	Refraction	No. of patients in DR clinic	Pan-retinal photocoagulation	Ward Admissions
July 2020	1121	933	367	8	47
August 2020	36	20	7	2	70
September 2020	1188	957	326	6	93
October 2020	4067	1155	439	18	140
November 2020	3138	1171	298	11	127

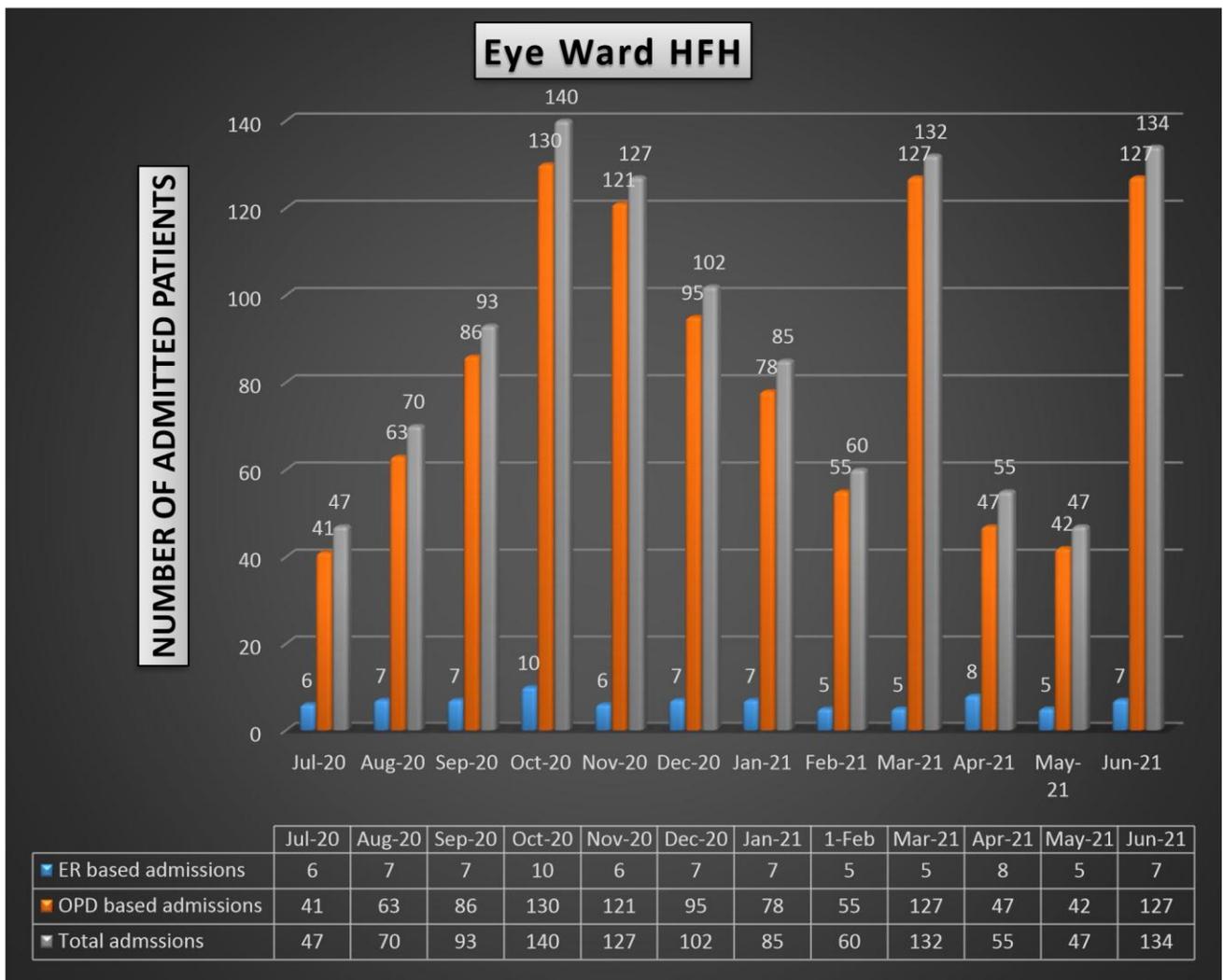
<b>December 2020</b>	3397	1092	310	13	102
<b>January 2021</b>	3780	1439	350	15	85
<b>February 2021</b>	4028	1536	381	7	60
<b>March 2021</b>	4059	1672	400	12	132
<b>April 2021</b>	1470	612	120	6	55
<b>May 2021</b>	698	268	1	1	47
<b>June 2021</b>	4070	1304	380	7	134

## **EYE OPERATING ROOM STATISTICS**

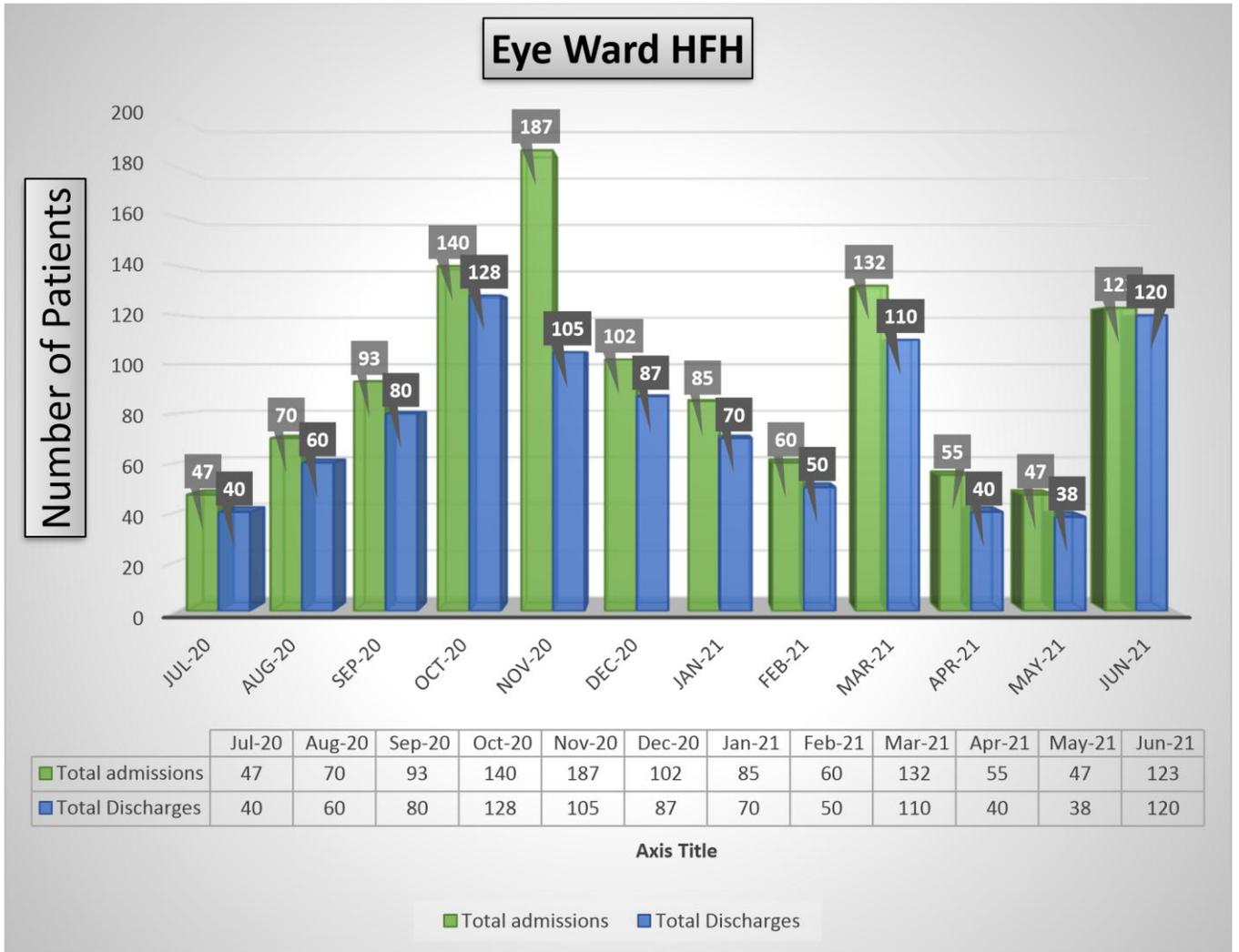
<b>Name of Surgery</b>	<b>No. of cases performed</b>
Cataract	465
Parsplana Vitrectomy (PPV)	87
Scleral Buckling	26
Dacryocystorhinostomy (DCR)	35
Squint Surgery	12

Penetrating Keratoplasty (PKP)	15
Diode Laser cycloablation (DLCA)	32
Emergency procedures (Corneal/Scleral repairs)	119
Minor Procedures	797

**Statistics for Admissions in EYE ward (20-21)**



**Statistics showing Admissions/Discharges in EYE ward (20-21)**



## **Diabetic Retinopathy Clinic**

With collaboration with Sight Savers, Eye department HFH has established its separate diabetic retinopathy clinic in main OPD.

More than 3300 patients were managed annually.

Fundus photograph camera is available in the clinic for quick evaluation of diabetic changes on retina.

Laser treatment facility is also available. Pan retinal photocoagulation, barrage laser and grid/focal lasers are performed.

## **Vitreoretinal surgeries**

Holy family hospital is the only public sector hospital which is offering Vitreoretinal surgeries in Rawalpindi district.

Following pathologies are treated here with vitreoretinal surgery:

- Retinal detachment
- Macular Hole
- Non-resolving Vitreous hemorrhage
- Advanced diabetic eye disease
- Retinal Endolaser treatment
- Retinal Cryotherapy

## **Project of free Corneal Transplant**

A project of free corneal transplant has been initiated by eye department with collaboration from APPNA organization.

We have successfully transplanted 15 corneas in this year.



**PROJECT OF FREE KERATOPLASTY**  
**(A GIFT OF SIGHT FROM APPNA)**  
*AT*  
**DEPARTMENT OF OPHTHALMOLOGY**  
**HOLY FAMILY HOSPITAL, RMU**  
**UNDER SUPERVISION OF**

**PROF. DR FUAD AHMAD KHAN NIAZI**  
*Head of Ophthalmology Department*  
*RMU and Allied Hospital*  
*Rawalpindi*

**DR FAWAD ZAFAR**  
*Consultant Urologist*  
*United States of America*

## Diode Laser Cycloablation

End stage glaucoma disease eventually results in a very painful blind eye.

Patients are treated with a big load of topical medications in order to control their intraocular pressure and even then mostly are left in a miserable situation.

Diode laser cycloablation is a procedure to suppress the aqueous production and eventually a normal intraocular pressure.

We have done 3 sessions of DLCA in this year and treated 32 patients with almost all of them being cured of this painful condition.

## **Artificial intelligence program**

With collaboration from COMSATS university we are part of a major ongoing artificial intelligence program in Rawalpindi Medical University.

A research article has also been published showing the role of artificial intelligence in diagnosing diabetic retinopathy and even staging the disease.

In near future we are looking forward for further excellence in this program.

## **2<sup>nd</sup> Annual RMU Resident Research Conference 2020**

Two Posters were presented by Eye Department in poster competition, Holy Family hospital held on 16<sup>th</sup> December, 2020.



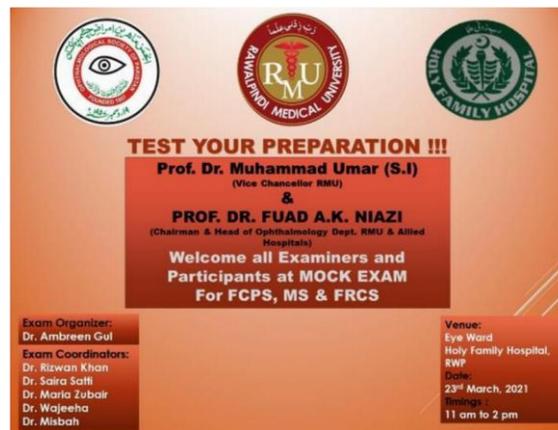
One of our Post-graduate residents, Dr. Faryal Ahmed, participated in research article presentation competition and took 3<sup>rd</sup> position.



### **Mock Exam for FCPS, MS and FRCS**

A mock exam was conducted for FCPS, MS and FRCS residents on 23<sup>rd</sup> March, 2021. All of the renowned examiners from CPSP were invited and post-graduate trainees not only from Punjab

but also from other provinces participated in this exam



The poster features three logos at the top: the logo of the Ministry of Health, Government of Punjab; the logo of Rawalpindi Medical University (RMU); and the logo of Holy Family Hospital. The main text reads: "TEST YOUR PREPARATION !!! Prof. Dr. Muhammad Umar (S.I) (Vice Chancellor RMU) & PROF. DR. FUAD A.K. NIAZI (Chairman & Head of Ophthalmology Dept. RMU & Allied Hospitals) Welcome all Examiners and Participants at MOCK EXAM For FCPS, MS & FRCS". At the bottom, it lists the Exam Organizer (Dr. Ambreen Gul), Exam Coordinators (Dr. Rizwan Khan, Dr. Saira Sultani, Dr. Maria Zubair, Dr. Wajeeha, Dr. Misbah), and Venue (Eye Ward, Holy Family Hospital, RWP) with the date (23rd March, 2021) and time (11 am to 2 pm).



## Post-graduate resident academics

### Monthly test:

A test is conducted every month for PGTs comprising of Multiple Choice questions which are contributed by each and every consultant of Ophthalmology department, RMU.

During Covid Pandemic the tests were conducted online every month.

**Journal Club:**

Journal club is conducted by our worthy Professor of Ophthalmology, Dr. Fuad Ahmed Khan Niazi, fortnightly, with residents presenting journal on multimedia setup.

**Direct observation of practical skills (DOPS):**

DOPS are conducted six monthly to assess and improve the surgical skills of residents.

**Six monthly Evaluation:**

360 degrees six monthly evaluation of all residents is done by supervisor and faculty members which includes their behavior with patients and colleagues, long case, dops and mini Cx.

**B.Sc (Hons) Optometry and Orthoptics**

100 students are inducted in our department for B.Sc (Hons) Optometry and Orthoptics.

They are provided all the facilities and equipment to carry out research in clinical ophthalmology and optometry

Departmental skill lab for orthoptic assessment have been established in eye ward.

Hands on Workshop and seminar were also arranged to improve knowledge and skills of our students.

## **Undergraduate MBBS program**

HFH eye department carry out the following programs for our undergraduate MBBS students

- 1) Ward classes
- 2) Ward tests
- 3) Lectures
- 4) Send up examination
- 5) Annual exam Viva and OSCE
- 6) Supplementary Viva and OSCE

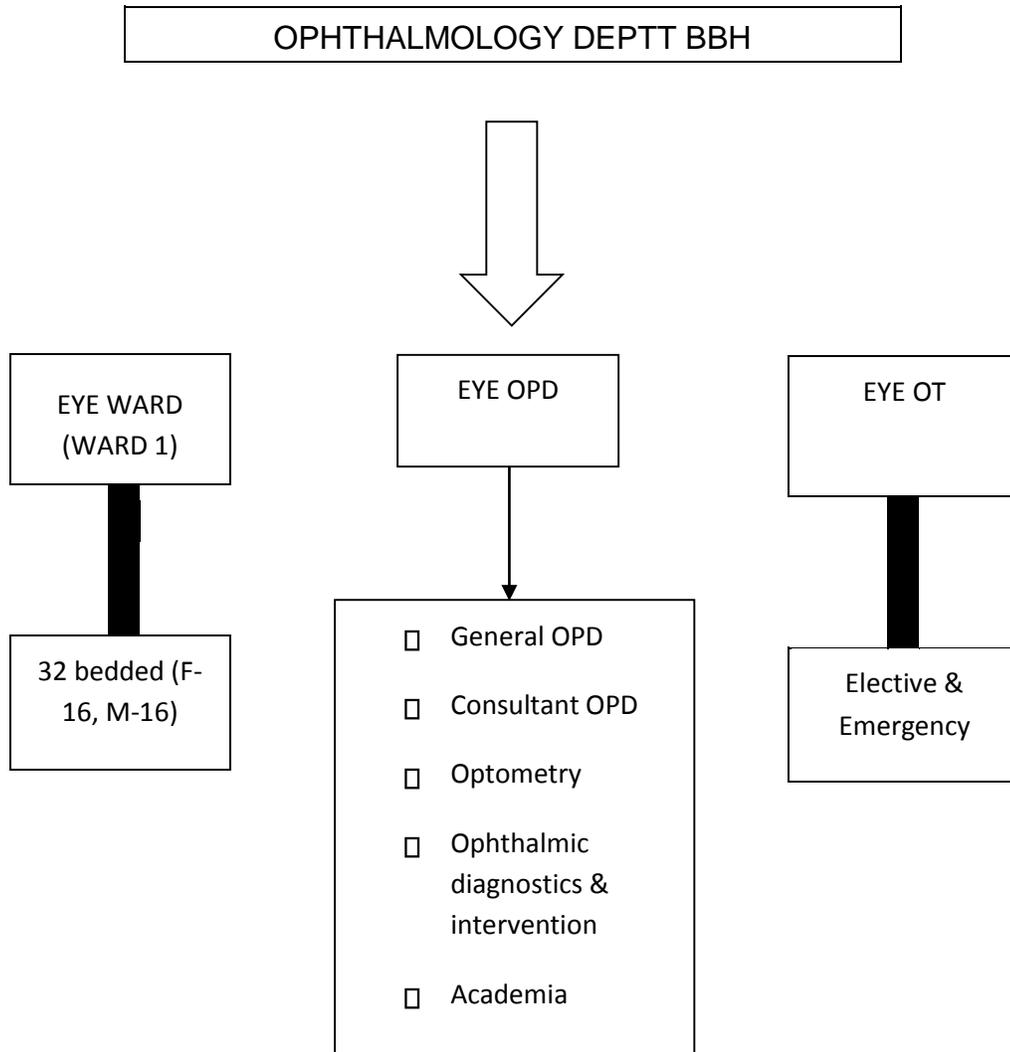
# **Annual Report**

**July 2020 – Jun 2021**

**Ophthalmology Department**

**Benazir Bhutto Hospital Rawalpindi**

## BRIEF INTRODUCTION:



## STAFF

### Ophthalmology

Professor & Head of Department:	Prof. Dr. Fuad Ahmad Khan Niazi
Assistant Prof:	Dr. Ambreen Gul
Senior Registrar:	Dr. Wajeeha Rasool Dr. Maria Waqas
Consultant Ophthalmologist:	Dr. Aamna javed
Medical Officers:	Dr. Mehreen
Residents (FCPS):	Dr. Ameera Jamil Dr. Ain-us-Sehr Dr. Maimoona Mohsin Dr. Iqra Shahjahan Dr. Omaimah Qamar Dr. Bushra Ali Dr. Nida Hafeez Dr. Ali Khalid Dr. Laila-tul-Bushra Dr. Munazza Kanwal Ahmed
Residents (MS Ophthalmology):	Dr. Seher Rehmat Dr. Jawad Awan Dr. M. Irfan

### Optometry

Optometry department is involved in teaching of optometry classes e.g., 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> and final year.

Optometry department consists of

Ophthalmic technologist	Saira Falak
Optometrist	Saima Asghar
Refractionist:	Shazia Rehan Kashmala Rafique

### Ophthalmic Technicians

Ophthalmic technician:	Amjad Mehboob Razia Yousaf Fauzia Parveen
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### Departmental Performance Events

- Micropulse Diode Laser workshop(Hands on)
- Symposium on Dry Eye disease
- Mock Exam Conduction for (FCPS, MS. FRCS)
- Virtual Participation in world Glaucoma E. Congress 2021
- Facilitation of workshops “Assessment of Competence” ➤ Facilitation of contact Session of Family Physicians.
- Facilitation of Mid Training Assessment Preparatory Course for Medicine & Allied Science
- Co-facilitation of a assesment Module Contact session of CHPE,RMU.
- Symposium on post operative inflammation

### Significant achievements

- Paper presentation at APTOS 2021 (The Asia-Pacific Teleophthalmology Society Congress) Quiz participation in APTOS 2021 Quiz
- 3 faculty and 3 Resident papers Presentation at FRF and RRF conference 2020, Secured top 3 positions in Resident Research forum paper presentation
- E-poster presentation at KEMCA UK International CPD Programme 3<sup>rd</sup> universal healthcare symposium

### Developments

- Functioning of Fundus Fluorescein Angiography machine & Fundus camera

### Tabular Statistics for Ophthalmology Operation Theatre – Elective July 2020 to June 202 1

Indicator	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
Total Operations	9	58	159	157	100	143	172	165	165	77	57	152	1414
Male	3	29	93	95	55	79	93	90	96	50	48	78	809

Gender	Female	6	29	66	62	45	64	79	75	69	27	9	74	605
	Major	0	19	75	76	62	56	68	77	81	23	7	59	603
Operation	Minor	9	39	84	81	38	87	104	88	84	54	50	93	811
Anesthesia	GA	0	4	16	76	8	13	13	8	15	6	3	6	168
	LA	9	54	143	81	92	130	159	157	150	71	54	146	1246
Operation performed by	Head of the Department	-	-	3	6	5	4	6	14	9	-	-	11	58
	Associate professor/ Assistant Professor	-/-	4/-	22/-	4/-	7/-	5/-	7/-	10 / 15	5/19	6/2	1/-	9/2	80/38
	SR	-	15	52	60	44	38	56	30	25	6	2	22	350
	MO/PGT/HO	-/-/9	- /30/0 9	- /78/0 4	- /78/0 9	- /40/0 4	- /82/1 4	/96/ 07	- /88/8	/89/ 18	/56/ 07	- /42/ 12	/84/ 24	-/763 /125

**TABULAR STATISTICS GENERAL AND CONSULTANT OPD  
(JULY2020 TO JUNE 2021)**

S.No	Month	General	Consultant	Total
1	July 2020	910	800	1710
2	August 2020	800	1000	1800
3	September 2020	1022	509	1531
4	October 2020	842	421	1263



Month		FFA	YAG	ARGON	PERIMETERY	B-SCAN	BIO METERY	TOTAL
July 2020	Paid	-	-	-	16			16
	Free	-	-	-	12			12
August 2020	Paid	-	02	-	16	16	08	42
	Free	-		-	15		01	16
September 2020	Paid	-	07	-	18	41	45	111
	Free	-		-	20		04	24
October 2020	Paid	-	08	-	10	33	35	86
	Free	-	-	-	08		08	16
November 2020	Paid	-	07	-	11	25	44	87
	Free	-		-	08		07	15
December 2020	Paid	-	08	-	12	21	56	97
	Free	-		-	5		08	13
January 2021	Paid	-	14	-	15	19	47	95
	Free	-	04	-	09	03	9	25
February 2021	Paid	-	14	-	02	20	61	97
	Free	-	02	-	02	02	12	18
March 2021	Paid	-	04	-	01	04	55	64
	Free	-	00	-	02	04	14	20
April 2021	Paid	-	01	-	00	03	10	14
	Free	-	00	-	00	00	10	10
May 2021	Paid	-	01	-	01	03	05	10
	Free	-	03	-	03	01	03	10
June 2021	Paid	-	09	-	04	18	25	56
	Free	-	-	-	00	04	03	7

Month		Refraction	LVA	ORTHOPTICS	TOTAL
July 2020	Paid	605	1	0	606
	Free	313	6	0	319
August 2020	Paid	500	0	01	501
	Free	205	5	0	210
September 2020	Paid	673	01	02	676
	Free	217	6	0	223
October 2020	Paid	398	0	3	401
	Free	202	09	1	212
November 2020	Paid	453	02	5	460
	Free	197	10	3	210
December 2020	Paid	749	01	02	752
	Free	298	06	0	304
January 2021	Paid	616	0	04	620
	Free	144	05	01	150

February 2021	Paid	1100	01	06	1107
	Free	317	02	02	322
March 2021	Paid	902	00	05	907
	Free	233	02	02	237
April 2021	Paid	191	00	00	191
	Free	40	02	02	44
May 2021	Paid	87	00	00	87
	Free	41	01	02	43
June 2021	Paid	481	03	00	484
	Free	173	11	02	186

### TABULAR STATISTICS OF CONSULTATIONS FOR DIFFERENT DEPARTMENTS

S.No	Month	Pediatrics	Psychiatry	Medicine	Surgery	ENT	DERMA	PATHALOGY	GYNAE/ ORBS
1	July 2020	23	20	05	01	-	-	-	12
2	August 2020	25	06	03	00	-	-	-	15

3	September 2020	26	10	06	02	-	01	-	2
4	October 2020	10	05	06	-	-	03	-	06
5	November 2020	18	01	08	-	01	-	-	05
6	December 2020	08	04	05	01	-	01	-	04
7	January 2021	20	03	05	01	-	-	-	12
8	February 2021	25	06	03	-	-	-	-	15
9	March 2021	26	10	06	-	-	-	-	07
10	April 2021	05	1	1	-	-	02	-	14
11	May 2021	06	1	7	-	-	03	-	09
12	June 2021	28	09	07	-	-	-	-	04

## [Clinical Audit of Cataract Surgery](#)

### [Department of Ophthalmology](#)

### [Benazir Bhutto Hospital, Rawalpindi](#)

A clinical audit was conducted at Department of Ophthalmology, Benazir Bhutto Hospital, Rawalpindi, of the cataract surgery cases performed from January to June, 2021.

#### **Team:**

The audit was conducted by:

1. Prof. Dr. Fuad Ahmed Khan Niazi  
Head of Ophthalmology Department
2. Dr. Wajeeha Rasool  
Senior Registrar Ophthalmology
3. Dr. Amna Javed  
Consultant Ophthalmologist

4. Dr. Bilal Humayun Mirza  
Senior Registrar Ophthalmology

5. Dr. Shawal Haseeb  
House Surgeon Ophthalmology

**Purpose:**

The purpose of this audit is to assess the management of the cataract surgery cases that are being performed at the Department of Ophthalmology, Benazir Bhutto Hospital, Rawalpindi and to give recommendations for improvement of the process and achieve an optimum level of patient care and better surgical outcomes.

**Method:**

For the purpose of this audit patient record files whose cataract surgery was performed were evaluated. The files selected were of duration of 06 months from January 2021 to June 2021. During the audit emphasis was given on the preoperative and postoperative assessment of the cases, per operative and postoperative complications.

**Results:**

A total of 237 files were evaluated for the purpose of this audit.

<b>Parameter Assessed</b>	<b>Results in Percentage</b>
Documentation of Patient Biodata	100
History	100
Preoperative ocular examination	100
Documentation of Preoperative visual status	100
Daily progress notes	100
Discharge summary	100
Documentation of Complications	100
Peroperative Complications Encountered	2.53

**Recommendations:**

We recommend that:

1. There should be incorporation of a resident assessment form to assess the surgical skills of the resident.
2. There should be either incorporation of a cataract surgery outcome monitoring software or the data of the patient's visual assessment should be entered in a form (either in hard copy or a soft copy) on every follow up.
3. There should be special emphasis on the documentation of the peroperative complications in the register and the status of the operation list should be signed by a faculty member in every OT day.
4. A repeat clinical audit should be performed after 6 months.

# **Annual Report**

## **2020-2021**

### **DHQ Hospital**

### **Rawalpindi**

## EYE DEPARTMENT

### DHQ HOSPITAL RAWALPINDI

Month	OT Major	OT Minor	Admissions	OPD
July 2020	03	11	05	247
August 2020	38	08	39	1219
September 2020	91	24	97	2127
October 2020	30	07	39	2015
November 2020	26	16	33	1716
December 2020	41	15	48	2237
January 2021	47	16	54	2190
February 2021	74	28	77	2384
March 2021	103	22	83	2580
April 2021	39	11	45	2411
May 2021	08	01	10	1320
June 2021	62	07	64	2717
<b>Total</b>	<b>562</b>	<b>166</b>	<b>594</b>	<b>23163</b>