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OPHTHALMIC PLASTIC &
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Questions and Answers from the live webinar chat

ASOPRS and Young ASOPRS (YASOPRS) Present

The Anatomy of Oculoplastics: A Webinar on Dissecting Fellowship Applications, Training, and Career Options in Oculofacial Plastic Surgery

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Q&A

Q: Hello, thank you to the panelists for hosting this session as well as the speakers for their wise words. I am a first year medical student with an early interest in Ophthalmology. I am curious to know any advice and opinions of the speakers regarding what medical students can do at an early stage in their career to get exposure within Ophthalmology and Oculoplastics, in addition to standing out in future residency applications. My name is Mohit Uppal and I am a student at Rush Medical College. Thank you so much!

A: Thanks for being on Mohit! I think the most important thing I did was to expose myself to as many different things as a medical student, whether that was ENT, plastic surgery or dermatology. Getting the experience of being in the OR, and suturing was invaluable. Try everything and then just indicate your interest in ophthalmology if that's what you choose!

A: I would take a more aggressive approach to ophthalmology and oculoplastics if you have the opportunity. You can really do great research and help write papers as a med student, so I would seek out those opportunities. There are some great oculoplastic surgeons you can reach out to in the Chicago area.

Q: Hello! Thank you so much for this exceptional webinar! How does an oculoplastic surgeon navigate the overlap in scope of practice with plastic surgeons, ENT facial plastic surgeons, and/or dermatologists (especially in regard to cosmetic procedures)? Thank you so much! (Gabriella Schmuter, Incoming MS4, City University of New York School of Medicine)

A: Thanks for your question! To be honest, I think we do it by just being really specialized. I have been in private practice and academics and it was the same in both places. By being a niche specialty you have the advantage of just being really good at a few things instead of working on the whole body. I have a lot of "competition" in my town and honestly I love being able to tell patients that I'm the eyelid surgeon and it's all I do. It's very powerful. I hope that answers your question!

Q&A

Q: Thank you so much to all the physicians for sharing your insight! Could you please speak about the scope of global health opportunities within oculoplastics? (Alisha Kamboj, PGY2, University of Minnesota)

A: Hi Alisha! Thanks for being on. We have a lot of members that travel through ORBIS or other community organizations to serve internationally. We also have a teaching program to teach other surgeons internationally through the ASOPRS Foundation

Q: Thank you to all the panelists and organizers! Question for all the panelists: What are your thoughts and experiences with applicants or fellows who have decided to take time out of the training path after residency and before applying for ASOPRS? Duaa Sharfi, New York Eye and Ear Infirmary

A: Many successful ASOPRS members did comprehensive first, or had a non-traditional pathway. Don't be discouraged! I think if you're a hard worker and can embody the 3 A's in training, you'll get where you want to be.

A: I agree, Duaa. After not deciding until third year and then not matching the first time I applied, I was out of medicine for TWO YEARS trying to regroup. I took care of my infant and toddler so it wasn't a "wasted" two years! When there's a will there can sometimes be a way. But probably a good idea to have a plan B for your career as well.

Q&A

Q: Hi, thank you very much for taking the time to host this wonderful and informative event! I was hoping the panelists could discuss how they see the field evolving over the next 5-10 years? Also, what are things they wish they would have thought of/done differently throughout their application process? Thanks, again! Carisa Bohnak, PGY-III, Vanderbilt Eye Institute

A: Hi Carisa! Thanks for your question. I think our specialty is in a really good position. More and more people do their research before finding a doctor, and having a niche specialty makes it easy for us to demonstrate our expertise.

As far as the application process, I would say any chance you get to meet an ASOPRS member, or even attend a meeting, is invaluable. We are a small group and mostly know each other, so you never know how people are connected.

Q: Hello everybody, thank you very much for hosting this informative session. Just a general question for the panelists: Considering going through the ophthalmology residency, are there any opportunities to still perform intraocular surgeries as an oculoplastic surgeon? Are there any moments when you miss that aspect of ophthalmology (both in terms of surgeries and pathology)? Thank you!

(Fereshteh Azad, incoming PGY2 Kresge Eye Institute)

A: Hi Fereshteh! Thanks for being on. There are a lot of ASOPRS members that still do cataract surgery. Probably less and less as time goes on but plenty that still do.

A: I do know some people who maintain general ophthalmology practices. But not many. The great thing is there's usually so much flexibility in what path you want your career to take. I'm in practice with three general ophthalmologists which I was told was a no no. 21 years later, working well for me still!

Q&A

Q: Thanks again for the wonderful panel! I was wondering if the panelists could share some thoughts regarding some meaningful things one could do if they do not match the first time while applying for ASOPRS but determined to apply again. Thank you! (Senmiao Mimi Zhan, PGY3 Virginia Commonwealth University)

A: Hi Mimi! Thanks for being on. Mimi, there are a TON of members in our specialty who didn't match the first time around, and are some of the leaders in our field. It is very common and I think the important thing is, if you are interested beyond that first try, to just try to reach out to members, get to know people in the society, and keep working toward the goal of being a Member.

Q: Good evening! Thanks for this great opportunity. Are there any “essential” features that you look for when reviewing applicants? Specifically how does your process differ from the ophthalmology residency process? -Marielle Mahan, PGY2, Georgetown

A: Hi Marielle! Thanks for being on. I think in the past there was a focus on OKAP scores etc but now the process is more fair. We decided as a panel not to have any primary preceptors on the panel to eliminate bias, so I can't speak to this from the perspective of an application reviewer but that is what I would suggest.

Q: Thank you Young ASOPRS for this event! Is there a role or opportunity for away electives for fellowship applicants? (Liane Dallalzadeh, PGY3, UCSD)

A: I think if your program provides the opportunity to rotate elsewhere this could potentially help you decide if you want to do ASOPRS and get to know a program. Dr. Fante mentioned that Dr. Ken Morgenstern in Philadelphia has offered to accept residents for a rotation. I think it's also acceptable to consider trying to spend even a few days with someone instead of a few weeks. Just a little bit of exposure can go a long way.

Q&A

Q: Thank you for this panel! Are Chief years looked upon positively when applying for oculoplastics fellowship? -Sahil Aggarwal, PGY-2, Duke

A: Hi Sahil, I think Chief years - where applicable - are definitely a positive if you choose to do it. Everyone loves a mature surgeon, and being a Chief definitely helps with that. Hope that helps!

Q: Thank you so much for this talk! Could you talk a little bit more about the ASOPRS Foundation and some of the work that they do? (Wanja Mathenge, PGY4 at Howard ,incoming global ophthalmology fellow at Stanford)

A: Feel free to reach out to me. I am Secretary of the Foundation. I would love to connect with you and tell you about the work we are doing. Thanks, Erin Shriver erin-shriver@uiowa.edu

Q: Hello! Thanks so much for holding this amazing panel! Could you touch upon some of the other niche/specialized areas of oculoplastics? Eg pediatric oculoplastics?

A: Hi Jane! The fellowships do have some variation with specific areas of focus. Some fellowships really emphasize pediatrics, especially in the Academic Programs. It's hard to have a program where pediatrics are performed at a high volume unless it is based in a children's hospital, because in practice the pediatric cases are less common than adult cases. Other niche areas include trauma - some fellowships include primary face call as part of the training at a Level 1 trauma center - and cosmetics. Some fellowships do facelifting, rhinoplasty, laser medicine, and have a medical spa as part of the practice which gives the fellow the opportunity to learn about these different models.

Q&A

Q: Is the alternative pathway still available? The last time I checked the ASOPRS website, there was a statement reporting the alternative pathway is not accepting applications at this time and the pathway is currently being updated. Do you know what the update for this would be? -Jessica Duddleston, PGY-3, UNC

A: The Education Committee is still working on the details of an updated alternate pathway to membership. The goal is to have it in place by January 2022.