# Table of Contents

1. Information about the Course ........................................................................................................................................... 2
2. Staff Involved in the Course ............................................................................................................................................... 2
3. Course Details .................................................................................................................................................................. 3
   All practical classes and tutorials ........................................................................................................................................ 4
4. Rationale and Strategies Underpinning the Course ........................................................................................................... 4
5. Course Schedule .............................................................................................................................................................. 5
6. Assessment Tasks and Feedback ......................................................................................................................................... 6
7. Additional Resources and Support ..................................................................................................................................... 12
8. Required Equipment, Training and Enabling Skills .......................................................................................................... 13
9. Course Evaluation and Development .................................................................................................................................. 13
10. Administration Matters ....................................................................................................................................................... 13
11. UNSW Academic Honesty and Plagiarism ......................................................................................................................... 16
1. Information about the Course

NB: Some of this information is available on the UNSW Handbook.

<table>
<thead>
<tr>
<th>Component</th>
<th>HPW</th>
<th>Time</th>
<th>Day</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lectures</td>
<td>4</td>
<td>4-6 pm</td>
<td>Tuesday</td>
<td>ASB220</td>
</tr>
<tr>
<td>Lectures 1-2 (weeks 1-12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lecture 3-4 (weeks 1-12)</td>
<td></td>
<td>4-6 pm</td>
<td>Thursday</td>
<td>Rupert Myer Theatre</td>
</tr>
<tr>
<td>Lecture 5-6 (weeks 1 &amp; 2 only)</td>
<td></td>
<td>9-11 am</td>
<td>Friday</td>
<td>Tyree LG05</td>
</tr>
<tr>
<td>Laboratory—practical classes</td>
<td>2</td>
<td>Mon 11-1, Tues 10-12 or Wed 4-6, depending on group.</td>
<td>Preclinic lab</td>
<td></td>
</tr>
<tr>
<td>CL prac (weeks 2, 3, 4, 8, 11 &amp; 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BV prac (weeks 6, 7, 9 and 13)</td>
<td>Mon 11-1 or Tues 10-12, depending on group. Note there are 2 groups for BV prac and 3 groups for CL pracs</td>
<td>Preclinic lab</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LV Lab (weeks 3-5 for 1 group and 6-8 for the other)</td>
<td>12-2</td>
<td>Tuesday</td>
<td>OMB25 &amp;/or AOP seminar room, depending on the week</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Special Details: Groups may need to be re-assigned (ie if unequal numbers, etc) once enrollments are known. Due to conflicts with clinic times, groups may change somewhat during session. See year 4 timetable for details.

2. Staff Involved in the Course

<table>
<thead>
<tr>
<th>Staff</th>
<th>Role</th>
<th>Name</th>
<th>Contact Details</th>
<th>Consultation Times</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Convenor</td>
<td>Dr L Asper</td>
<td><a href="mailto:l.asper@unsw.edu.au">l.asper@unsw.edu.au</a></td>
<td>Arrange appointment via email</td>
<td></td>
</tr>
<tr>
<td>Additional Teaching Staff</td>
<td>Contact Lenses</td>
<td>Prof H Swarbrick</td>
<td><a href="mailto:h.swarbrick@unsw.edu.au">h.swarbrick@unsw.edu.au</a></td>
<td>Arrange appointment via email</td>
</tr>
<tr>
<td></td>
<td>Low Vision</td>
<td>Dr M Boon</td>
<td><a href="mailto:m.boon@unsw.edu.au">m.boon@unsw.edu.au</a></td>
<td>Arrange appointment via email</td>
</tr>
<tr>
<td></td>
<td>Binocular Vision</td>
<td>Dr L Asper</td>
<td>See above</td>
<td>See above</td>
</tr>
<tr>
<td></td>
<td>Pre-clinic lab manager</td>
<td>Dr D Larden</td>
<td><a href="mailto:d.larden@unsw.edu.au">d.larden@unsw.edu.au</a></td>
<td>Arrange appointment via email</td>
</tr>
</tbody>
</table>

Unfortunately it has become necessary for me to remind you that members of staff are human beings who work much of the time but have an outside-of-work life as well. Therefore, while you are free to email us at any time, you are not free to expect an answer outside of working hours; nor should you expect an immediate answer during working hours.

1 UNSW Online Handbook: http://www.handbook.unsw.edu.au
### 3. Course Details

#### Course Description

**Objectives:** As the final course of this series of six, OPTM4211 will further develop the integration of student knowledge of the basic sciences with clinical competency in the areas of contact lenses, binocular vision and low vision. The contact lens theory component will integrate strongly with earlier courses in ocular disease. The contact lens practical component will incorporate a lens-wearing experience for all students. In addition, students will be introduced to the care and assessment of patients with strabismus, amblyopia, nystagmus, low vision or severe visual impairment. Students will need to apply knowledge from earlier courses such as ocular disease, physiology and optics in order to prescribe visual aids which best alleviate the detrimental effects of visual deficits. The course will be delivered using lectures, tutorials, practical classes and self-directed learning.

#### Brief Curriculum:

**Contact lenses:** advanced contact lens fitting, adverse effects of contact lenses, strategies to avoid adverse effects; and practical aspects of contact lens patient management. **Binocular vision:** amblyopia, comitant and noncomitant strabismus, aniseikonia, nystagmus. **Low vision** – aids, current low vision aids, adaptive technology, the multidisciplinary mode of practice.

#### Course Aims

To produce a student with professional attitude and good communication skills who has the ability to integrate scientific and clinical aspects of optometry and make well-reasoned decisions while undertaking patient care at the UNSW Optometry Clinic under supervision of a registered optometrist. To advance student knowledge and to stimulate students’ interest in optometric subspecialties such as low vision, binocular vision and contact lenses.

#### Student Learning Outcomes

As is evident from the objectives listed above, Optometry 4B covers a variety of topics. Therefore, specific learning outcomes have been developed for you as an aid in understanding what you should achieve in this course.

The learning outcomes for Contact Lenses are as follows:
- To apply appropriate clinical strategies for contact lens selection, fitting and dispensing, and for patient selection, education and aftercare
- To understand the etiology, diagnosis and management of contact lens related complications
- To understand how to fit and manage patients in rigid and soft spherical, toric, and tinted contact lenses.

The learning outcomes for Binocular Vision are as follows:
- To have a thorough understanding of strabismus and related sensory anomalies
- To choose appropriate testing to obtain an accurate diagnosis
- To choose appropriate therapy for a patient with strabismus and/or amblyopia
- To identify and correctly manage strabismus that may indicate pathology
- To have a thorough understanding of aniseikonia, including isokonic lens design
- To identify and appropriately manage a variety of ocular motility disorders
- To appropriately diagnose and manage a patient with nystagmus

The learning outcomes for Low Vision are as follows:
- To have a thorough understanding of visual disability
- To accurately interpret clinical data to develop a valid clinical management plan
- To be aware of the range of low vision aids and services designed to maximise independence and quality of life of people with visual disability

#### Graduate Attributes Developed in this Course

<table>
<thead>
<tr>
<th>Science Graduate Attributes</th>
<th>Select the level of FOCUS</th>
<th>Activities / Assessment</th>
</tr>
</thead>
</table>
| Research, inquiry and analytical thinking abilities | 3 | **Contact Lenses:** lectures, practical classes, assignments, practical examination and final examination  
**Binocular Vision:** class case analysis activities, practical classes, assignments, lectures, practical and theory examinations  
**Low Vision:** Lectures, practical classes, assignment, final examination (theory and practical). |
| Capability and motivation for intellectual development | 3 | **Contact Lenses:** lectures, practical classes, assignments, practical examination and final examination  
**Binocular Vision:** class case analysis activities, assignments, practical examination and final examination  
**Low Vision:** Lectures, practical classes, assignment, final examination (theory and practical). |

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Contact Lenses: fitting the astigmat; etiology, diagnosis and management of contact lens complications; avoiding adverse effects; advanced clinical topics.


Low Vision: Introduction to theoretical and practical aspects of care of the patient with low vision. Includes: epidemiology of low vision and visual impairment (definitions, NB this was covered in VISN3111 so you should revise those notes prior to attending your first low vision lecture), low vision assessment (refraction, visual function, functional vision), prescribing optical aids for low vision (magnification determination, types of low vision aids, adaptive technology), low vision rehabilitation (multidisciplinary model of low vision rehabilitation).

Relationship to Other Courses within the Program
Optometry 4B builds upon knowledge and skills gained in previous courses in the Optometry curriculum. In addition, new knowledge in binocular vision, low vision and contact lenses will be introduced.

4. Rationale and Strategies Underpinning the Course

Teaching Strategies
Teaching strategies include the following:

- Lectures to provide the necessary background and theory underpinning the study of topics included in this course.
- Authentic learning in practical classes to develop basic skills and personal experience in a variety of procedures and skills and in case analysis
- Class exercises and assignments - self-directed learning reinforces and extends theoretical principles learned in lectures
- Interaction with low vision patients and allied health professionals in low vision rehabilitation.

Rationale for learning and teaching in this course
Learning and teaching in Optometry 4B build upon your prior experience and knowledge obtained throughout your life, including prior visual science and clinical optometry courses. A linear model of education is followed in that the subject matter generally starts with knowledge and facts and builds towards the application of your knowledge in the broader context of patient care. You are encouraged to take responsibility for your own learning, as this will prepare you for the life-long learning that is expected from a health care professional.
## 5. Course Schedule

Some of this information is available on the [Online Handbook](http://www.handbook.unsw.edu.au) and the [UNSW Timetable](http://www.timetable.unsw.edu.au/).

<table>
<thead>
<tr>
<th>Week</th>
<th>Lecture 1 Tuesday 4-5</th>
<th>Lecture 2 Tuesday 5-6</th>
<th>Lecture 3 Thursday 4-5</th>
<th>Lecture 4 Thursday 5-6</th>
<th>Lecture 5 &amp; 6 Friday 9-11</th>
<th>Practical: CL pracs are Mon 11-1, Tues 12-2 or Wed 4-6. BV pracs are Mon 11-1 and Tues 12-2</th>
<th>Low Vision Practical Tuesday 12-2</th>
<th>Assignment and Submission dates (see also ‘Assessment Tasks &amp; Feedback’)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 1</td>
<td>LV (Who has low vision? Role of the optometrist)</td>
<td>LV (Multidisciplinary low vision rehabilitation)</td>
<td>CL 1</td>
<td>CL 2</td>
<td>BV 1 in 1st hour and CL 3 in 2nd hour</td>
<td>No Prac</td>
<td>No Prac</td>
<td></td>
</tr>
<tr>
<td>Week 2</td>
<td>LV (LV assessment 1)</td>
<td>LV (LV assessment 2)</td>
<td>CL 4</td>
<td>CL 5</td>
<td>CL 6 in 1st hour and BV 2 in 2nd hour</td>
<td>CL – Rigid lenses</td>
<td>No Prac</td>
<td>CL rigid toric exercise due Monday 3/8</td>
</tr>
<tr>
<td>Week 3</td>
<td>LV (prescribing LV aids 1)</td>
<td>LV (prescribing LV aids 2)</td>
<td>CL 7</td>
<td>CL 8</td>
<td>No Lecture</td>
<td>CL – Soft lenses</td>
<td>LOW VISION 1 (experiencing LV through simulators)</td>
<td>BV annotated bibliography due Friday (21/8) week 3 (5 pm)</td>
</tr>
<tr>
<td>Week 4</td>
<td>LV (prescribing LV aids 3)</td>
<td>LV (Creating a management plan)</td>
<td>BV 3</td>
<td>CL 9</td>
<td>No Lecture</td>
<td>CL – Torics and Tints</td>
<td>LOW VISION 2 (experiencing LV aids)</td>
<td></td>
</tr>
<tr>
<td>Week 5</td>
<td>BV 4</td>
<td>BV 5</td>
<td>BV 6</td>
<td>BV 7</td>
<td>No Lecture</td>
<td>No Prac</td>
<td>LOW VISION 3 (multidisciplinary care of the LV patient)</td>
<td></td>
</tr>
<tr>
<td>Week 6 *</td>
<td>BV 8</td>
<td>BV 9</td>
<td>BV 10</td>
<td>CL 10</td>
<td>No Lecture</td>
<td>BV</td>
<td>LOW VISION 1</td>
<td>CL critical Dk/t exercise due Monday (31/8)</td>
</tr>
<tr>
<td>Week 7</td>
<td>CL 11</td>
<td>BV 11</td>
<td>BV 12</td>
<td>CL 12</td>
<td>No Lecture</td>
<td>BV</td>
<td>LOW VISION 2</td>
<td></td>
</tr>
<tr>
<td>Week 8</td>
<td>CL 13</td>
<td>BV 13</td>
<td>BV 14</td>
<td>CL 14</td>
<td>No Lecture</td>
<td>CL - Dispensing</td>
<td>LOW VISION 3</td>
<td></td>
</tr>
<tr>
<td>Week 9</td>
<td>BV 15</td>
<td>BV 16</td>
<td>CL 15 (Ms Lily Ho)</td>
<td>BV 17</td>
<td>No Lecture</td>
<td>BV</td>
<td>No Prac</td>
<td>LV assignment due Monday Aniseikonia assignment due Friday (25/9)</td>
</tr>
<tr>
<td>Week 10</td>
<td>LV FINAL EXAM THEORY</td>
<td>LV FINAL EXAM THEORY</td>
<td>TBA</td>
<td>TBA</td>
<td>No Lecture</td>
<td>No Prac</td>
<td>No Prac</td>
<td>LV theory exam Tuesday BV video assignment due Friday week 10 – (9/10)</td>
</tr>
<tr>
<td>Week 11</td>
<td>BV 18</td>
<td>TBA</td>
<td>CL 16 (Ms Lily Ho)</td>
<td>TBA</td>
<td>No Lecture</td>
<td>CL – Aftercare 1</td>
<td>No Prac</td>
<td>BV evaluation of group work due Thursday (15/10)</td>
</tr>
<tr>
<td>Week 12</td>
<td>CL 17</td>
<td>TBA</td>
<td>CL 18</td>
<td>TBA</td>
<td>No Lecture</td>
<td>CL – Aftercare 2</td>
<td>No Prac</td>
<td>BV evaluation of videos due Thurs (22/10) CL adverse response table due Friday (23/10)</td>
</tr>
<tr>
<td>Week 13</td>
<td>No Lecture</td>
<td>No Lecture</td>
<td>No Lecture</td>
<td>No Lecture</td>
<td>No Lecture</td>
<td>BV</td>
<td>No Prac</td>
<td>CL aftercare report due Friday (30/10)</td>
</tr>
</tbody>
</table>

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6. UNSW Timetable: [http://www.timetable.unsw.edu.au/](http://www.timetable.unsw.edu.au/)
## 6. Assessment Tasks and Feedback

<table>
<thead>
<tr>
<th>Task</th>
<th>Knowledge &amp; abilities assessed</th>
<th>Assessment Criteria</th>
<th>% of total mark</th>
<th>Date of</th>
<th>Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Release</td>
<td>Submission</td>
</tr>
<tr>
<td>CL exercise: Rigid toric lenses</td>
<td>Ability to calculate correctly the parameters of a rigid bitoric lens</td>
<td>Correct calculation of bitoric lens parameters and specifications; appropriate use of units</td>
<td>1%</td>
<td>30/7</td>
<td>3/8</td>
</tr>
<tr>
<td>CL exercise: Critical lens Dk/t</td>
<td>Confidence in calculating and clinically interpreting contact lens Dk/t</td>
<td>Appropriate selection of lens examples; correct calculation of Dk/t and use of units; appropriate interpretation of critical Dk/t results</td>
<td>2%</td>
<td>13/8</td>
<td>31/8</td>
</tr>
<tr>
<td>CL exercise: Adverse effects</td>
<td>Understanding of strategies to minimize adverse effects of contact lenses</td>
<td>Correct identification of clinical strategies to reduce adverse responses</td>
<td>1%</td>
<td>19/10</td>
<td>23/10</td>
</tr>
<tr>
<td>CL major assignment: Aftercare report</td>
<td>Understanding the requirements for a contact lens aftercare examination; interpretation of clinical signs and symptoms in contact lens wear</td>
<td>Appropriate recording and interpretation of contact lens related signs and symptoms; synthesis of aftercare findings to develop sound clinical management strategies</td>
<td>6%</td>
<td>3-5/8</td>
<td>30/10</td>
</tr>
<tr>
<td>CL slide test and practical examination</td>
<td>Competence in clinical application of contact lens related techniques; recognition of clinical signs and identification of appropriate management strategies</td>
<td>Slide test: correct interpretation of contact lens history and clinical signs. Practical exam: competence in lens handling, ability to interpret rigid and soft lens fitting variables; instruction on lens care procedures</td>
<td>10%</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td>CL theory examination</td>
<td>Overall knowledge and understanding of the course material on the theory and practice of contact lenses</td>
<td>Correct answers to written examination questions on contact lens curriculum</td>
<td>20%</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td>BV Assignment stage 1 – Annotated bibliography</td>
<td>Available 27/7/15 with assignment</td>
<td>Available 27/7/15 with assignment</td>
<td>Stages 1-5 combined = 18%. For 27/7/15</td>
<td>21/8/15, 5 pm</td>
<td>Dr Asper</td>
</tr>
<tr>
<td>Breakdown, see assignment</td>
<td>BV Assignment stage 2 – Video</td>
<td>Available 27/7/15 with assignment</td>
<td>Available 27/7/15 with assignment</td>
<td>27/7/15</td>
<td>9/10/15, 5 pm</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-------------------------------</td>
<td>----------------------------------</td>
<td>----------------------------------</td>
<td>--------</td>
<td>--------------</td>
</tr>
<tr>
<td>BV Assignment stage 3</td>
<td>Available 27/7/15 with assignment</td>
<td>Available 27/7/15 with assignment</td>
<td>27/7/15</td>
<td>15/10/15, 2 pm</td>
<td>Dr Asper</td>
</tr>
<tr>
<td>BV Assignment stage 4</td>
<td>Available 27/7/15 with assignment</td>
<td>Available 27/7/15 with assignment</td>
<td>27/7/15</td>
<td>22/10/15, 2 pm</td>
<td>Dr Asper</td>
</tr>
<tr>
<td>BV Aniseikonia Assignment</td>
<td>Available 31/7/15 with assignment</td>
<td>Available 31/7/15 with assignment</td>
<td>2%</td>
<td>31/7/15</td>
<td>25/9/15 at 5 pm</td>
</tr>
<tr>
<td>Binocular Vision</td>
<td>Material covered includes all lectures, readings, videos from video assignment and practical classes. Knowledge of basic information needed to diagnose and manage strabismus and amblyopia; ability to pass requirements of optometric professional competencies; ability to integrate knowledge to develop beneficial management routines. Ability to select, describe performance, and interpret appropriate diagnostic testing and basic vision therapy tasks.</td>
<td>Correct answers to written questions on binocular vision curriculum including theory and practical classes. Correct interpretation of all testing and training procedures covered in practical classes, as well as ability to describe set-up, purpose and use of these procedures.</td>
<td>20%</td>
<td>During exam period</td>
<td>During exam period</td>
</tr>
<tr>
<td>LV practical 1 (LV assessment)</td>
<td>Ability to consolidate what it feels like to have visual impairment and tests used to assess visual function and functional vision</td>
<td>Satisfactory participation in practical Satisfactory analysis of personal and group data</td>
<td>hurdle</td>
<td>as practical schedule</td>
<td>during practical</td>
</tr>
<tr>
<td>LV practical 2 (LV aids)</td>
<td>Ability to familiarize yourself with the use of low vision aids</td>
<td>Satisfactory participation in practical</td>
<td>hurdle</td>
<td>as practical schedule</td>
<td>during practical</td>
</tr>
<tr>
<td>LV practical 3 (multidisciplinary rehabilitation)</td>
<td>Knowledge of the role of multidisciplinary rehabilitation in the care of the patient with low vision</td>
<td>Satisfactory participation in practical</td>
<td>hurdle</td>
<td>as practical schedule</td>
<td>during practical</td>
</tr>
<tr>
<td>Low vision assignment</td>
<td>Ability to research, analyse and reflect on low vision related readings and their application</td>
<td>Accuracy of answers and thoughtfulness of responses</td>
<td>4%</td>
<td>Week 2</td>
<td>Monday of Week 9</td>
</tr>
<tr>
<td>Test Type</td>
<td>Description</td>
<td>Score</td>
<td>Time</td>
<td>Grader</td>
<td>Final Marks</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>-------</td>
<td>------------------------</td>
<td>-------------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>LV practical skills test</td>
<td>Ability to administer low vision clinical tests</td>
<td>6%</td>
<td>During exam period</td>
<td>Dr M Boon and other instructors</td>
<td>Final marks</td>
</tr>
<tr>
<td></td>
<td>Ability to use and explain how to use common low vision aids (telescopes, high add magnifiers, hand magnifiers, stand magnifiers, electronic vision enhancement systems) Ability to create a management plan for a low vision patient case and select appropriate low vision aids for that case.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low vision final examination</td>
<td>Knowledge of low vision epidemiology Knowledge of low vision assessment methods Ability to interpret clinical data to prescribe optical low vision aids Knowledge of how optometry interacts with the multidisciplinary care required for low vision patients</td>
<td>10%</td>
<td>Week 10</td>
<td>Dr M Boon</td>
<td>Final marks</td>
</tr>
</tbody>
</table>
Your future patients, the general public, the clinic supervisors and the profession of Optometry expect that you will be able to perform the procedures taught in this course, interpret findings and relate them to other aspects of patient care, and establish a diagnosis and treatment plan for your patient. The assessment components of this subject are designed to assure that you meet these expectations.

Strands
Optometry 4B (Opt4B) is divided into 3 strands. At the end of the session students will receive a single mark for Opt4B based on the entire course. However, each strand is assessed separately and each strand must be passed before a pass can be given for Opt4B. Both theory and practical examinations, where applicable, must be passed in order for the strand to be passed. Note below that, in most cases, if either theory or practical components are failed, the LOWER of the two marks is the strand mark.

Pass Standard
In order to pass Opt4B a student must have a mark of at least 50% in each of ALL three strands AND have a final composite mark of at least 50%. If you fail any strand, you will be awarded a fail (FL) if the aggregate is below 46%; otherwise you will be awarded a grade of “unsatisfactory fail” (UF), even if your course aggregate is greater than 50.

Explanation of individual strands (The strands and assessment within each are indicated below):

1. Low vision (20%)  
   (Dr Boon)

   The Low Vision strand mark will be assessed and weighted as follows:
   - Practical Reports hurdle (can lose 5% of strand mark for each report not completed)
   - Low vision assignment 20%
   - Practical examination 30%
   - Final examination (Week 9) 50%

   Hurdle: Satisfactory attendance, participation and completion of tasks in Low Vision Practical classes

   You must pass both theory and practical examinations in order to pass the strand.
   If the theory examination mark ≥ 50 and the prac exam mark is ≥ 65%, the weightings are as above.
   If the theory examination < 50% or the prac exam is < 65%, the strand mark will be no higher than 45.

2. Binocular vision (40%)  
   (Dr Asper)

   The BV strand mark will be weighted as follows:
   - Assignment – noncomitant deviations 45% (for marks related to each component – see the assignment)
   - Assignment – aniseikonia 5%
   - Combined theory and practical examination 50%

   Hurdles: Satisfactory attendance, participation and completion of tasks during prac sessions
Satisfactory performance in final examination (50% or more)

You must pass the combined theory and practical examination with a mark of 50% or more in order to pass the strand.
If the theory/practical examination is \(\geq 50\%\), the weightings are as above.
If the theory/practical examination mark < 50%, the strand mark will be no higher than the failed exam mark.

3. Contact Lenses (40%)  (Professor Swarbrick)

The CL strand mark will be weighted as follows:
- CL exercise: rigid toric lenses 2.5%
- CL exercise: critical lens Dk/t 5%
- CL exercise: adverse effects 2.5%
- CL major aftercare assignment 15%
- CL slide test and practical examination 25%
- CL theory examination 50%

You must pass both theory and practical examinations in order to pass the strand.
If the theory examination mark and prac examination marks are both \(\geq 50\%\), the weightings are as above.
If the theory examination and/or prac examination < 50%, the strand mark will be the failed exam mark.

Scaling: There are 2 ways in which your marks may be scaled.

1. Multiple choice tests are scaled for guessing. A formula is applied to the raw mark to produce a scaled mark. This scaling will occur before marks are posted.

2. The CL slide test and practical examination will be scaled to a 60% pass.

Supplementary Assessment - special issues that relate to Opt 4B

If a student fails one strand of OPTM4211, 20 to 40% of the course is failed. Therefore reassessment will rarely be granted. The School Examinations Committee will decide in November who is entitled to supplementary assessment. Supplementary assessment, if granted, may consist of a written, practical, and/or an oral examination with one or more examiners. If more than one supplementary assessment is granted (extremely unlikely), it is possible that they will all be held the same day.

Failure in the supplementary assessment or absence for the additional assessment will result in a fail or a "UF" for the subject.

Please read carefully the pages of this course outline that give important information regarding supplementary examinations.
## 7. Additional Resources and Support

| Text Books | **Low Vision:**  
| --- | --- |
|  | • Low Vision Manual by Jonathon Jackson and James Wolffsohn. As this is out-of-print, another good text is "The Lighthouse Ophthalmology Resident Training Manual A New Look at Low Vision Care" by Lighthouse International.  
|  | • Low Vision, Principles and Practice by Christine Dickinson. (avail bookshop)  
| Contact lenses: | **The following are recommended texts:**  
| Binocular Vision: | • Scheiman and Wick’s Clinical Management of Binocular Vision. Lippincott Williams & Wilkins (avail library and bookshop)  

| Course Manual | **Low Vision:**  
| --- | --- |
|  | Lecture handouts available on Moodle. A lab manual will be supplied during the lectures before the lab classes.  
|  | **Contact Lenses:** Lecture handouts available on Moodle.  
|  | **Binocular Vision:** Lecture handouts available on Moodle. A manual for the Binocular Vision prac will be given out during the first week of BV lectures.  

| Required Readings | **Low Vision:** You will be informed of any required readings at the first Low Vision Lecture  
| --- | --- |
|  | **Contact Lenses:** You will be informed of any required readings at the first CL lecture  
|  | **Binocular Vision:** You will need access to Scheiman and Wick’s Clinical Management of Binocular Vision for the aniseikonia assignment and in order to read the nystagmus chapter. “Study kit” – online readings available after week 5. You will be informed of other required reading during lectures, before week 6 (second week of BV lectures).  

| Additional Readings | **Low Vision:** A reading list will be announced in lectures  
| --- | --- |
|  | **Contact Lenses:** Any additional readings will be announced in lectures  
| Binocular Vision: | **Recommended reading for first 3 hours of binocular vision lecture:**  
|  | Grosvenor. Primary Care Optometry, 3rd edition (1996), Ch.4, p 105-113. (you own this text from year 2, I believe)  
| Other recommended reading: | Griffen and Grisham, Binocular Anomalies, Diagnosis and Vision Therapy, 3rd edition, Chapter 2, Vision efficiency skills  
|  | Scheiman and Wick, Clinical Management of Binocular Vision: Heterophoric, accommodative, and eye movement disorders, Chapters 5-8 (ie part II) covering vision training procedures.  

| Recommended Internet Sites |  
| --- | --- |

| Societies |  
| --- | --- |
|  | **Low Vision**  
|  | • Vision Australia  
|  | • Guide Dogs NSW/ACT  
|  | • Retina Australia  
|  | • Macular Degeneration Foundation  
|  | • Fred Hollows Foundation  
|  | • ICEE  

8. Required Equipment, Training and Enabling Skills

<table>
<thead>
<tr>
<th>Equipment Required</th>
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</thead>
<tbody>
<tr>
<td><strong>Binocular vision:</strong> “pocket equipment” including but not limited to occluder, red/green goggles, polarisers, pen torch, and VT pocket equipment. Ophthalmoscope also needed.</td>
</tr>
<tr>
<td><strong>Low Vision:</strong> occluder, clinical equipment when seeing LV patient in clinic.</td>
</tr>
<tr>
<td><strong>Contact lenses:</strong> you will need your “pocket equipment”, including occluder, pen torch, and PD ruler. Contact lens wearers will be required to bring their contact lens case to practical classes.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Enabling Skills Training Required to Complete this Course</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students are expected to be computer and information literate at this stage of the program. Students should have completed the ELISE course or similar information literacy courses offered by UNSW (eg LILT or BIOS). Students need to also aware that contact lens laboratories involved direct contact with the eye. The contact lens related aspects of WHS safety will be covered by Prof Swarbrick.</td>
</tr>
</tbody>
</table>

9. Course Evaluation and Development

Student feedback is gathered periodically by various means. Such feedback is considered carefully with a view to acting on it constructively wherever possible. This course outline conveys how feedback has helped to shape and develop this course.

<table>
<thead>
<tr>
<th>Mechanisms of Review</th>
<th>Last Review Date</th>
<th>Comments or Changes Resulting from Reviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major Course Review</td>
<td>2010 &amp; 2012</td>
<td>Feedback from these years resulted in making more of the class material available online, and giving out prac exam marking criteria earlier than previously. It also resulted in more equitable weighting of assignments.</td>
</tr>
<tr>
<td>CATEI</td>
<td>2014</td>
<td>Student feedback from 2014 indicates a need for quicker marking of assignments. Lecturers have been informed of this. More equitable weighting of assignments has occurred as suggested by students. The BV course material on noncomitant deviations was reported to seem fragmented. This is partly the nature of the topics, and therefore it was decided to teach these topics differently – ie via the video assignment. The overlap of lecture and prac material in the BV section has been addressed by combining the practical knowledge and theoretical knowledge assessment into one exam.</td>
</tr>
<tr>
<td>Other</td>
<td>2009</td>
<td>As a result of student surveys, all lecturers in the course will attempt to be available by Moodle for discussion. Students are also informed via this outline that lecturers are available for discussion – email for an appointment.</td>
</tr>
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</table>

10. Administration Matters

<table>
<thead>
<tr>
<th>Expectations of Students</th>
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</thead>
<tbody>
<tr>
<td>The University uses email as an official form of communication for students. All UNSW students have their own email account. The School of Optometry and Vision Science will also make use of this form of communication.</td>
</tr>
<tr>
<td>It is extremely important that you know how to use your Zmail and ensure that you check it regularly. You are advised to link your official UNSW email address to your habitual email address (e.g. hotmail). You will miss out on vital information from the School and University if you do not check your Zmail.</td>
</tr>
<tr>
<td>For more information or if you are having connection or access problems, see: IT Service Centre <a href="http://www.it.unsw.edu.au/">www.it.unsw.edu.au/</a> Telephone: 02 9385 1333 Email: <a href="mailto:itservicecentre@unsw.edu.au">itservicecentre@unsw.edu.au</a></td>
</tr>
<tr>
<td><strong>Attendance:</strong> As in previous pre-clinical courses, <strong>100% attendance for the practical component of each strand is expected as no catch up time is scheduled.</strong> For prac classes, late arrival (ie 15 min past hour or later) or early departure will be recorded as an absence for that lab. If you do not attend 100% of practical classes, your overall mark will default to no greater than 65% (if 90-99% of prac classes attended) or 45% (if &lt;90% of prac classes attended).</td>
</tr>
<tr>
<td><strong>Attendance at lectures is compulsory.</strong> If you do not attend at least 80% of lectures, it is likely that you will not be permitted to take the final examinations.</td>
</tr>
</tbody>
</table>
Moodle: All students should ensure during the first week of session that they can access Moodle. If you have difficulties, contact Dr Asper immediately.

Complaints: If you have complaints, suggestions, or difficulties with the subject matter, please contact the relevant lecturer first. The lecturers appreciate your input and the respect that you show by going to them personally. If your problem is still not solved, contact Dr Asper. If matters remain unresolved, the next person to contact is A/Prof. David Pye, the School of Optometry and Vision Science complaints officer.

For issues arising with the course as a whole and not about subject matter itself, contact Dr. Asper (see "contact details").

## Assignment Submissions

Depending on the assignment, assignments may be submitted
- directly to your lecturer or
- via the Assignment submission box at the Student Enquiry office (Rupert Myers Building, Room 3.003)
- the video assignment will need to be submitted online. More details of that are included on the assignment information sheets.

A completed copy of the Assignment Attachment Sheet must be attached to each assignment before submission.

Marked assignments can be collected from the:
- School Enquiry office during counter opening hours. You must show a valid student card to do this.

The School Policy on Submission of Assignments (including penalties for late assignments) and the Assignment Attachment Sheet are available from the School office (RMB3.003) and the School website at: [http://www.optometry.unsw.edu.au/current/policies-and-procedures](http://www.optometry.unsw.edu.au/current/policies-and-procedures)

## Work Health and Safety

Information on relevant policies and expectations is provided during General Safety Induction training. A copy of the Induction booklet distributed at this training is available from the School of Optometry and Vision Science office (RMB3.003) and the School website at: [http://www.optometry.unsw.edu.au/whs/work-health-and-safety](http://www.optometry.unsw.edu.au/whs/work-health-and-safety)

## Assessment Procedures

### UNSW Assessment Policy

SCHOOL OF OPTOMETRY AND VISION SCIENCE, UNSW
SUPPLEMENTARY EXAMINATION INFORMATION, 2015

There are two circumstances whereby a supplementary examination may be granted:

**COMPETENCY IN DOUBT**

Students whose competency level is in doubt after the final examination(s) may be eligible to sit a supplementary examination in the course(s) concerned.

**SPECIAL CONSIDERATION**

On some occasions, sickness, misadventure or other circumstances beyond your control may prevent you from completing a course requirement, such as attending a formal end of semester examination. In these cases you may apply for Special Consideration. To do this you must make formal application for Special Consideration for the course/s affected as soon as practicable after the problem occurs and within three working days of the assessment to which it refers. The application must be made via Online Services in myUNSW. Log into myUNSW and go to My Student Profile tab > My Student Services channel > Online Services > Special Consideration. Submit the application (including supporting documentation) to UNSW Student Central.

**Special Consideration - Pre-Existing Conditions**

Many conditions that are the subject of special consideration applications are pre-existing and could be used repeatedly to gain examinations at a later date. These include conditions aggravated or triggered by the stress of the assessment. With the help of your doctor and/or other health care practitioners, steps can be taken ahead of the assessment time to minimise or avoid the consequences of these conditions. When applying for special consideration on the basis of a condition that was already known to be a problem for you and which you have already used as the basis for a special consideration application, the School will require you to provide a certificate that details the preventative measures taken and why they were not successful. This will then be taken into account when considering the application.

Absence from a final examination is a serious matter, normally resulting in a Fail (FL) grade. **If you are medically unfit to attend an examination, YOU MUST CONTACT THE SCHOOL DIRECTLY ON THE DAY OF THE EXAMINATION TO ADVISE OF THIS** (telephone 02 9385 4639, email: optometry@unsw.edu.au). You must also submit a Request for Consideration application as detailed above.

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12 [UNSW OHS Home page](http://www.optometry.unsw.edu.au/whs/work-health-and-safety)
You are reminded that supplementary examinations are not granted lightly or automatically. Eligibility for supplementary examinations, for both of the above situations, is determined by the School Examination Committee, which meets soon after the formal examination period has ended. You cannot “apply” for a supplementary examination, so please do not contact the School or Course Controllers to request a supplementary examination.

**It is the responsibility of the student to consult the web site or noticeboard to ascertain whether they have supplementary examinations. This information WILL NOT be conveyed in ANY other manner. Interstate, overseas, or any other absence cannot be used as an excuse.**

This information will be available on the School web site at [http://www.optometry.unsw.edu.au/](http://www.optometry.unsw.edu.au/) (do not confuse the School website with the myUNSW website) and posted on the notice board on Level 3. This information will be available as soon as possible after the School Examination Committee meeting.

**SUPPLEMENTARY EXAMINATIONS FOR 2015 WILL BE HELD AS FOLLOWS:**

**FOR SESSION 2:**
- **ALL COURSES:** DURING THE WEEK OF 30 NOVEMBER-4 DECEMBER 2015

Supplementary examinations will be held at the scheduled time only. If students who are granted supplementary examinations do not attend, a failure will be recorded for that course. **Students should not make travel arrangements, or any other commitments, before establishing whether or not they have supplementary examinations. Ignorance of these procedures, interstate, overseas or any other absence will not be accepted as an excuse.**

If additional assessment is not scheduled, this does NOT indicate whether or not a student has passed or failed the course. Results will be received in the usual way. Please do not contact the School in this regard.

Please note the above applies to OPTM and VISN courses only. Any information on supplementary examinations for servicing courses (e.g. CHEM****) is the responsibility of the School conducting the course.

School of Optometry and Vision Science, UNSW, 15 May 2015

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**Equity and Diversity**

Those students who have a disability that requires some adjustment in their teaching or learning environment are encouraged to discuss their study needs with the course Convenor prior to, or at the commencement of, their course, or with the Equity Officer (Disability) in the Equity and Diversity Unit (9385 4734 or [http://www.studentequity.unsw.edu.au/](http://www.studentequity.unsw.edu.au/)).

Issues to be discussed may include access to materials, signers or note-takers, the provision of services and additional exam and assessment arrangements. Early notification is essential to enable any necessary adjustments to be made.

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### Student Complaint Procedure

<table>
<thead>
<tr>
<th>School Contact</th>
<th>Faculty Contact</th>
<th>University Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>A/Prof. David Pye Associate Professor <a href="mailto:d.pye@unsw.edu.au">d.pye@unsw.edu.au</a> Tel: 9385 7874</td>
<td>Dr Chris Tisdell Associate Dean (Education) <a href="mailto:cct@unsw.edu.au">cct@unsw.edu.au</a> Tel: 9385 6792 or Dr Gavin Edwards Associate Dean (Undergraduate Programs) <a href="mailto:g.edwards@unsw.edu.au">g.edwards@unsw.edu.au</a> Tel: 9385 4652</td>
<td>Student Conduct and Appeals Officer (SCAO) within the Office of the Pro-Vice-Chancellor (Students) and Registrar. Telephone 02 9385 8515, email <a href="mailto:studentcomplaints@unsw.edu.au">studentcomplaints@unsw.edu.au</a> or University Counselling and Psychological Services 7 Tel: 9385 5418</td>
</tr>
</tbody>
</table>

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15 University Counselling and Psychological Services
11. UNSW Academic Honesty and Plagiarism

What is Plagiarism?

Plagiarism is the presentation of the thoughts or work of another as one’s own.
*Examples include:
- direct duplication of the thoughts or work of another, including by copying material, ideas or concepts from a book, article, report or other written document (whether published or unpublished), composition, artwork, design, drawing, circuitry, computer program or software, web site, Internet, other electronic resource, or another person’s assignment without appropriate acknowledgement;
- paraphrasing another person’s work with very minor changes keeping the meaning, form and/or progression of ideas of the original;
- piecing together sections of the work of others into a new whole;
- presenting an assessment item as independent work when it has been produced in whole or part in collusion with other people, for example, another student or a tutor; and
- claiming credit for a proportion a work contributed to a group assessment item that is greater than that actually contributed.†

For the purposes of this policy, submitting an assessment item that has already been submitted for academic credit elsewhere may be considered plagiarism.

Knowingly permitting your work to be copied by another student may also be considered to be plagiarism.

Note that an assessment item produced in oral, not written, form, or involving live presentation, may similarly contain plagiarised material.

The inclusion of the thoughts or work of another with attribution appropriate to the academic discipline does not amount to plagiarism.

The Learning Centre website is main repository for resources for staff and students on plagiarism and academic honesty. These resources can be located via:

https://student.unsw.edu.au/plagiarism

The Learning Centre also provides substantial educational written materials, workshops, and tutorials to aid students, for example, in:
- correct referencing practices;
- paraphrasing, summarising, essay writing, and time management;
- appropriate use of, and attribution for, a range of materials including text, images, formulae and concepts.

Individual assistance is available on request from The Learning Centre.

Students are also reminded that careful time management is an important part of study and one of the identified causes of plagiarism is poor time management. Students should allow sufficient time for research, drafting, and the proper referencing of sources in preparing all assessment items.

* Based on that proposed to the University of Newcastle by the St James Ethics Centre. Used with kind permission from the University of Newcastle
† Adapted with kind permission from the University of Melbourne