

Curricular Outcomes

Entry Level Practice Standards

The faculty has approved the following optometric Entry-level Standards:

Doctors of Optometry must have an established knowledge of the basic and clinical sciences in order to provide quality eye and vision care to their patients. The academic foundation must be broad and include the biological, medical, vision and optical sciences, as well as a basic understanding of the health care delivery system. A doctor of Optometry must recognize the dynamic nature of knowledge and possess the commitment and skills needed to responsibly assess and apply new information and treatment strategies throughout their career.

The UMSL College of Optometry shall ensure that before graduation each student will effectively utilize and demonstrate a working knowledge in patient care with each of the following areas:

I. PATIENT HISTORY

1. the basic elements of a comprehensive patient history
2. the ability to obtain an efficient patient history necessary for a problem oriented examination
3. the proper standard of recording patient history in EHR
4. the ability to relate patient history to examination findings

II. OPTOMETRIC KNOWLEDGE

5. basic body systems, with special emphasis on the ocular and visual system and their interrelationships to the body as a whole;
6. the impact of genes and their interaction with behavior, diet and the environment on human health;
7. the various processes and causes that lead to dysfunction and disease and the effect that these processes can have on the body and its major organ systems, with special emphasis on the ocular and visual systems;
8. the mechanisms of actions of the various classes of pharmaceutical agents, including injectable agents, and their interactions;
9. the structures and processes contributing to the development of refractive error and other optical or perceptual abnormalities of the visual system;
10. the optics of the eye and ophthalmic lens systems - including spectacles, contact lenses, and low vision devices;
11. the use of ophthalmic lasers in the management of refractive error and other anomalies of the eye;

III. PATIENT CARE

12. ophthalmic lens systems used to correct refractive, oculomotor and other vision disorders;
13. visual development and vision function with respect to deviation and enhancement of conditions such as, but not limited to, strabismus, amblyopia, ocular motility, accommodation, vergence and visual perception;
14. vision therapy and other rehabilitative methods used for the management of common visual disorders;
15. the detection, diagnosis, treatment and management of ocular disease and ocular manifestations of systemic disease;
16. the safe and effective use of pharmaceutical agents for the treatment of disease and conditions affecting the eye and visual system, and recognize adverse reactions;

17. the utilization of injectable agents for the management of ocular and systemic diseases
18. the concepts of refractive surgery and its management;
19. basic life support skills for prevention and response to life-threatening emergencies;
20. the use of ophthalmic lasers in the management of refractive error and other anomalies of the eye;
21. the use of evidence from well designed and conducted research in healthcare decision-making

IV. CLINICAL SKILLS

22. the importance of performing necessary examination techniques competently and efficiently
23. the capacity to adapt the administration of clinical tests to meet the needs of the patient
24. the obligation to maintain clinical skills through practice and repetition

V. RECORD KEEPING

25. the significance of proper documentation in the electronic health record
26. the proper use of abbreviations
27. the appropriate notation of clinical observations

VI. INTERPERSONAL AND COMMUNICATION SKILLS

28. the critical elements of verbal and written communications with patients and other health care professionals;
29. the psychosocial dynamics of the doctor/patient relationship;
30. the need for clear, accurate and appropriate documentation of patient encounters;
31. the manner in which people of diverse cultures and belief systems perceive human health and illness and respond to various symptoms, diseases and treatments;

VII. INTRA/INTER PROFESSIONAL CONSULTATION/PRACTICE

32. when there is a requirement for intra/inter professional consultation
33. the process of coordination among professionals involved in a patient's care

VIII. PROFESSIONALISM

34. the need for a commitment to uphold the ethical obligations of the Optometric Oath;
35. the specific duties and responsibilities toward the individuals they serve and toward society as a whole;
36. the provisions to guarantee patient privacy and medical record security as expressed by HIPAA regulations;
37. inter-professional values, related ethics and relationships among the professions;

IX. SYSTEMS-BASED PRACTICE

38. the practice management structure and strategies as they pertain to different practice settings;
39. the broad-based, multidisciplinary nature of the health care delivery system;
40. the role of the optometrist as a primary health care provider;

X. PRACTICE-BASED LEARNING

41. the conscientious use of current best practices in patient care decision making;
42. the necessity for a commitment to lifelong learning;
43. the information management systems and technology used in the delivery of eye and health care.

2001 College of Optometry; Revised 2001, 2010, 2011, 2012 and 2015