



**Service Priorities and Programmes**  
**Electronic Presentations**

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**Submitting author:** Ms Y Y YU

**Post title:** Advanced Practice Nurse, Caritas Medical Centre, KWC

**Enhancement Programme to Increase the Deliverability of Optical Coherence Tomography (OCT) Scanning for Glaucoma Patients**

*Yu YY, Tam CK, Lam RF, Yuen YF*

*Department of Ophthalmology, Caritas Medical Centre*

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**Introduction**

Glaucoma is one of the leading causes of blindness worldwide. International guidelines recommend OCT scanning should be performed for the initial diagnosis and regularly in subsequent follow-ups in glaucoma patients to monitor disease progression. In many Ophthalmic centres in HA currently and in our centre in the past, OCT scanning is/was performed by doctors. Due to manpower limitations, service capacity of OCT scanning was unable to meet the service demand and waiting times were increased progressively. Average waiting time for OCT scanning was 1.5 years in Jan 2011 in our centre. In order to ensure timely and quality services to our patients, our department has recently implemented the enhancement programme below.

**Objectives**

1. To increase the service capacity of OCT scanning by increasing the number of cases performed in each OCT scanning session. 2. To develop a training program for Eye Care Assistants to operate OCT machines and increase cost-effectiveness by recruiting them as OCT machine operators once they qualify. 3. To target pressured areas by adopting a triage system to separate patients who require OCT scanning for the diagnosis vs. those for the purpose of monitoring.

**Methodology**

The above enhancement programme was implemented in our department since January 2011. Outcomes variables, including the number of cases performed and the waiting times for OCT scanning were compared three years prior vs. three years after the implementation of the enhancement programme, i.e. from years 2008 to 2013.

**Result**

From Jan 2008 to Dec 2010, 7,768 patients were served. Their average waiting times were 1.5 years. From Jan 2011 to Dec 2013, 21,232 patients were served. Their average waiting times were 9 months. In summary, the above enhancement programme almost tripled our service capacity and halved the waiting times.

**Conclusions:** By implementing this enhancement program, service capacity of OCT examination was increased in a cost-effective manner and patients' waiting times

were decreased. Pressured areas were also tackled to enable prompt scanning of patients who required the OCT for the diagnosis vs. those for the purpose of monitoring.