

# BCLA 2019 CET POINTS



BCLA 2019 Clinical Conference - Approved CET sessions	Start-End Time	Lead Presenter	CET ID	Location	No. Of CET points	CET ref	Competencies Covered: OPTOM	Competencies Covered: CLO	Competencies Covered: TP	Competencies Covered: DO	Learning objectives:
<b>Thursday 30 May</b>											
Getting started in Orthokeratology: engaging reverse gear	10.30-11.30	Nick Howard	C-70843	Charter Room 3	3	Skills Workshop	CL's, Ocular Examination	CL's, Ocular Examination, Verification & Identification			5.3.3 Discusses the techniques involved in reverse geometry rigid gas permeable CL's, and applies and assesses the lenses. 3.2.1 Is able to use instruments to measure, and interpret information on, corneal curvature and irregularity. 3.1.1 Is able to use instruments to measure, and interpret information on, corneal curvature and irregularity. 4.2.1 Distinguishes between the design of standard RGP lenses and that of reverse geometry lenses. 5.5.3
Contact Lens Discomfort. Is it as good now as it will ever be?	9.20-10.20	Eric Papas	C-71324	Exchange Auditorium	1	Lecture	CL's,	CL's		CLs	5.1.1 Uses new insights into the mechanisms of contact lens discomfort, to inform the decision on the most appropriate soft contact lens material to use for each patient. 5.1.1 Uses new insights into the mechanisms of contact lens discomfort, to inform the decision on the most appropriate soft contact lens material to use for each patient. 5.1.1 Uses new insights into the mechanisms of contact lens discomfort, to understand how the most appropriate soft contact lens material may be used for each patient. 5.2.1 Reviews current knowledge on the mechanisms and risk factors for contact lens discomfort, to inform management strategies. 5.4.2 Reviews current knowledge on the mechanisms and risk factors for contact lens discomfort, to inform management strategies. 5.2.2 Reviews current knowledge on the mechanisms and risk factors for contact lens discomfort, to understand how this may be managed.
What contact lenses are we prescribing and why?	10.20-11.30	Lyndon Jones	C-71325	Exchange Auditorium	1	Lecture	CL's,	CL's		CLs	5.1.1 Uses new insights into the causes of contact lens discomfort, to inform the decision on the most appropriate soft contact lens material to use for each patient. 5.1.1 Uses new insights into the causes of contact lens discomfort, to inform the decision on the most appropriate soft contact lens material to use for each patient. 5.1.1 Uses new insights into the causes of contact lens discomfort, to understand how the most appropriate soft contact lens material may be used for each patient. 5.2.1 Reviews recent research into the impact of different designs, materials and modalities on ocular surface health, to inform the aftercare management of soft lens wearers. 5.4.2 Reviews recent research into the impact of different designs, materials and modalities on ocular surface health, to inform the aftercare management of soft lens wearers. 5.2.2 Reviews recent research into the impact of different designs, materials and modalities on ocular surface health, to understand the aftercare management of soft lens wearers.
Complications from Global Eyelash Obsessions	10.30-11.30	Bridgitte Shen Lee	C-71417	Charter 2	3	Peer Discussion Group	Communication, Ocular Disease	Communication	Options, Share Decision Making	Communication, Ocular Abnormalities	1.2.1 Explores methods of communicating to patients the dangers and ocular side effects of lash extensions, false lashes and lash growth serums. 1.2.1 Explores methods of communicating to patients the dangers and ocular side effects of lash extensions, false lashes and lash growth serums, particularly in the context of contact lens wear. 1.2.1 Explores methods of communicating to patients the dangers and ocular side effects of lash extensions, false lashes and lash growth serums. 2.1.6 Reviews the treatment options which may be employed in the management of a variety of ocular complications associated with lash extensions, false lashes and lash growth serums. 6.1.11 Discusses the treatment options available for blepharitis and conjunctivitis. 8.1.3 Understands the management options which may be offered to a patient with blepharitis and dry eye disease. 3.1.10 Through explanation of the causes of complications associated with the use of lash extensions, false lashes and lash growth serums, supports patients in making the decisions to continue, cease or alter their current procedures, and, where appropriate to take responsibility for the self-management of these complications.

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The management of contact lens cases presenting to eye casualty - Peer discussion	12.00-13.10	Jonathan Jackson	C-71092	Charter Room 2	3	Peer Discussion Group	Communication, CLs, Ocular Examination, Ocular Disease	Communication, CLs, Ocular Examination,	Options, Self & Others	Ocular Abnormalities	<p>1.1.1 Identifies the key triage questions to use in the elicitation of ocular disease risk factors and symptoms.</p> <p>1.1.1 Identifies the key triage questions to use in the elicitation of ocular disease risk factors and symptoms in the contact lens wearer.</p> <p>5.2.1 Discusses methods which may be employed in the management of contact lens wearers with a variety of ocular diseases.</p> <p>5.4.2 Discusses methods which may be employed in the management of contact lens wearers with a variety of ocular diseases.</p> <p>2.1.6 Reviews the various treatment options which may be employed in the management of a variety of ocular diseases.</p> <p>3.1.2 Discusses the use of slit lamp and other investigative techniques which may be employed when triaging and diagnosing cases of ocular surface disease.</p> <p>3.2.2 Discusses the use of slit lamp and other investigative techniques which may be employed when triaging and diagnosing cases of ocular surface disease.</p> <p>6.1.4 Discusses the various methods used to identify ocular surface disease, and compares treatment options.</p> <p>8.1.6 Recognises the symptoms and external signs of a range of ocular surface diseases, and discusses their urgency of referral.</p> <p>9.1.1 Considers the best ways of working with colleagues in the hospital eye service, to ensure correct continuity of care, in cases of ocular disease presenting in practice.</p>
Are You Seeing Comfortably?	12.00-13.00	Trusit Dave	C-71326	Exchange Auditorium	1	Lecture	Assesment of Visual Function, CLs	CLs		Refractive Management	<p>7.1.1 Reviews a variety of methods which may be used in the assessment of visual function and comfort.</p> <p>7.1.1 Reviews a variety of methods which may be used in the assessment of visual function and comfort.</p> <p>5.2.1 Carries out relevant tests and assessments of visual function and comfort in the aftercare of soft lens wearers.</p> <p>5.3.1 Carries out relevant tests and assessments of visual function and comfort in the aftercare of soft lens wearers.</p>
Walk the talk - getting the most out of multifocal contact lenses	14.00-15.00	Louise Terry	C-71108	Charter Room 2	3	Discussion Workshop	Communcation, Assesment of visual function, CLs	Communication, CLs,			<p>1.1.1 Formulate appropriate questioning and listening techniques to successfully engage patients in the process of multifocal contact lens fitting including within: areas of work, lifestyle requirements and previous vision correction issues.</p> <p>1.1.1 Formulate appropriate questioning and listening techniques to successfully engage patients in the process of multifocal contact lens fitting including within: areas of work, lifestyle requirements and previous vision correction issues.</p> <p>7.1.1 Employs appropriate over-refraction, ocular dominance testing and prescription refinement techniques, to elicit the correct refractive outcome in multifocal contact lens fitting.</p> <p>5.5.2 Discusses the fitting techniques of a variety of multifocal contact lens designs.</p> <p>5.3.2 Discusses the fitting techniques of a variety of multifocal contact lens designs.</p>
Tip Top Topogrpaphy	14.00-15.00	Nick Howard	C-70847	Charter Room 3	3	Skills Workshop	Ocular Examination, Ocular disease, CLs	Ocular Examination			<p>3.1.1 Demonstrates use of a topographer to analyse corneal curvature.</p> <p>3.2.1 Demonstrates use of a topographer to analyse corneal curvature.</p> <p>6.1.4 Uses corneal topography to identify corneal disease, including keratoconus.</p> <p>5.1.2 Uses digital data to construct the relevant lens from the topography.</p> <p>5.1.3 Uses digital data to construct the relevant lens from the topography.</p>
The Tear Film and Contact Lenses: Friend or Foe?	14.10-15.10	Lyndon Jones	C-71327	Exchange Auditorium	1	Lecture	CLs,	CLs		CLs	<p>5.1.1 Describes the influence of the quality of the tear film on the choice of soft contact lens material.</p> <p>5.1.1 Describes the influence of the quality of the tear film on the choice of soft contact lens material.</p> <p>5.1.1 Describes the influence of the quality of the tear film on the choice of soft contact lens material.</p>

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How to fit dry eye & MGD Assessment into your routine	15.30-17.00	Emma Gibson	C-70857	Charter Room 3	3	Skills Workshop	Ocular Examination, Ocular disease,	Ocular Examination			6.1.5 Recognises dry eye disease & meibomian gland dysfunction. 3.2.4 Uses a variety of methods to assess the quality and quantity of the tear film. 3.1.7 Uses a variety of methods to assess the quality and quantity of the tear film.
Avoiding Drop Out	15.30-17.10	Gurraj Singh Jabbal	C-70942	Charter Room 2	3	Peer Discussion Group	Standards of Practice, Communication, CL's	Standards of Practice, Communication, CL's		Standards of practice, Communication, CL's	2.5.3 Understands the current body of research surrounding contact lens drop out. Understands the main reasons given by patients dropping out of lens wear and what can be done to help avoid or address those situations before the patient ceases lens wear. 1.1.3 Understands the importance of communication and methodologies for a proactive approach to communicating contact lens types, care regimens, wearing times and back up spectacles to reduce contact lens drop out. 5.2.1 Understands the causes of contact lens drop out (discomfort, vision, cost and handling) and how to identify the probable cause and manage the various causes using the right combination of lens material, lens design, wearing modality and care products. 2.5.3 Understands the current body of research surrounding contact lens drop out. Understands the main reasons given by patients dropping out of lens wear and what can be done to help avoid or address those situations before the patient ceases lens wear. 1.2.1 Understands the importance of communication and methodologies for a proactive approach to communicating contact lens types, care regimens, wearing times and back up spectacles to reduce contact lens drop out. 5.3.1 Understands the causes of contact lens drop out (discomfort, vision, cost and handling) and how to identify the probable cause and manage the various causes using the right combination of lens material, lens design, wearing modality and care products. 2.5.3 Understands the current body of research surrounding contact lens drop out. Understands the main reasons given by patients dropping out of lens wear and what can be done to help avoid or address those situations before the patient ceases lens wear. 1.2.1 Understands the importance of communication and methodologies for a proactive approach to communicating contact lens types, care regimens, wearing times and back up spectacles to reduce contact lens drop out. Understands the importance of communication at practice team level. 5.2.2 Understands the causes of contact lens drop out (discomfort, vision, cost and handling) and how the probable causes can be identified and managed using the right combination of lens material, lens design, wearing modality and care products.
Mini global speciality lens symposium	15.30-17.00	Eef van der Worp	C71523	Exchange Auditorium	1	Lecture	CL's,	CL's		CL's	5.3.3 Discusses a variety of complex lens fittings, including: keratoconic corneal RGPs; sclerals; and custom- made soft lenses. 5.5.3 Discusses a variety of complex lens fittings, including: keratoconic corneal RGPs; sclerals; and custom- made soft lenses. 5.1.1 Understands, at a basic level, the various complex lenses which may be offered to patients, including: keratoconic corneal RGPs; sclerals; and custom- made soft lenses.

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Diagnosing and managing Demodex blepharitis	9.15-10.30	Etty Bitton	C-70915	Charter Room 3	3	Skills Workshop	Ocular Disease, Ocular Examination	Ocular Disease, Ocular Examination	Knowledge, Options		6.1.4 Identifies anterior blepharitis secondary to demodex. 3.2.2 Uses appropriate slit lamp techniques to identify demodex-related blepharitis. 3.1.2 Uses appropriate slit lamp techniques to identify demodex-related blepharitis. 5.4.2 Manages in the contact lens wearer anterior blepharitis related to demodex folliculorum. 1.1.2 Demonstrates techniques for the management of anterior blepharitis secondary to demodex folliculorum. 2.1.2 Demonstrates clinical techniques appropriate for the detection of anterior blepharitis secondary to demodex folliculorum.
Acanthamoeba Keratitis, from the lab to the eye	9.15-10.15	Nicole Carnt	C-71110	Charter Room 2	3	Discussion Workshop	Standards of Practice, CL's , Ocular Disease	Standards of Practice, CL's	Options	Ocular Abnormalities, Standards of Practice	2.5.3 Reviews current good practice, regarding evidence-based advice for patients wishing to swim in contact lenses. 2.5.3 Reviews current good practice, regarding evidence-based advice for patients wishing to swim in contact lenses. 8.1.6 Recognises the symptoms of acanthamoeba keratitis and discusses the urgency and route of referral. 5.4.1 Recognises the signs and symptoms of early and late contact lens related Acanthamoeba keratitis and differentiates from Herpes Simplex keratitis. 5.2.1 Recognises the signs and symptoms of early and late contact lens related Acanthamoeba keratitis and differentiates from Herpes Simplex keratitis. 2.1.2 Uses appropriate techniques to enable diagnosis of Acanthamoeba keratitis and differentiate it from Herpes Simplex keratitis. 2.5.3 Reviews current good practice, regarding evidence-based advice for patients wishing to swim in contact lenses. 6.1.7 Uses appropriate techniques to enable diagnosis of Acanthamoeba keratitis and differentiate it from Herpes Simplex keratitis.
Myopia control	9.00-10.00	Jeffery Walline	C-71328	Exchange Auditorium	1	Lecture	CL's	CL	Knowledge, Options	CL's	5.3.3 Compares methods of fitting contact lenses for myopia control. 5.1.1 Understands the relative risks and benefits of orthokeratology and multifocal contact lenses for myopia control. 1.1.2 Understands both contact lens and pharmaceutical approaches which may be used in the pursuit of myopia control, and compares outcomes of each. 5.5.3 Compares methods of fitting contact lenses for myopia control. 2.1.6 Considers both pharmacological and contact lens-based treatments for myopia control, and compares these to the prognosis when no treatment is given.
Scleral Lenses from both sides of the pond	11.00-12.30	Vijay Anand	C-70916	Charter Room 3	3	Skills Workshop	CL's	CL's			5.1.3 Applies scleral lenses, and evaluates their fit. 5.1.2 Applies scleral lenses, and evaluates their fit. 5.2.2 Demonstrates application and removal techniques for scleral lenses. 5.1.4 Demonstrates application and removal techniques for scleral lenses.

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Smoothing out the lumps and bumps in identification and management	11.00-12.00	Alexandra Webster	C-71111	Charter Room 2	3	discussion Workshop	Communication, CLs, Ocular Examination,	Communication, Ocular Examination,		Ocular Abnormalities, Communication	<p>1.1.2 Develop appropriate communication strategies to elicit details of relevant symptoms and history in relation to signs of lid and or adnexa lumps and bumps.</p> <p>1.1.2 Develop appropriate communication strategies to elicit details of relevant symptoms and history in relation to signs of lid and or adnexa lumps and bumps.</p> <p>3.1.2 Discusses a simple and effective routine for slit-lamp examination of the lids and adnexa for use in every day contact lens practice.</p> <p>3.2.2 Discusses a simple and effective routine for slit-lamp examination of the lids and adnexa for use in every day contact lens practice.</p> <p>6.1.5 Review and identify lid and adnexa pathology, and consider differential diagnosis.</p> <p>8.1.1 Review and identify lid and adnexa pathology, and consider differential diagnosis.</p> <p>1.1.2 Develop appropriate communication strategies to elicit details of relevant symptoms and history in relation to signs of lid and or adnexa lumps and bumps.</p>
Exploring the myths, misconceptions and misunderstandings of myopia management	11.00-13.10	Nicola Logan	C-41454	Exchange Auditorium	1	Lecture	CLs, Communication, Binocular Vision	CLs, Communication	Share Decision Making, Options	CLs, Communication, Paediatric Dispensing	<p>5.3.3 Compares the risks and benefits of fitting contact lenses for myopia control, and advises patients accordingly.</p> <p>5.1.1 Understands the relative risks and benefits of the different types of contact lenses used for myopia control.</p> <p>3.1.7 Explains to parents the rationale, risks and benefits of fitting contact lenses for myopia control to children.</p> <p>5.3.3 Demonstrates an understanding of the types of lenses which may be used for myopia control, and their risks and benefits.</p> <p>2.1.8 Reviews the risks and benefits of fitting contact lenses for myopia control in children, and compares these to potential outcomes if no treatment is used..</p> <p>1.2.5 Considers options for methods of discussing with parents the fitting of contact lenses for myopia control in children.</p> <p>1.2.5 Considers options for methods of discussing with parents the fitting of contact lenses for myopia control in children.</p> <p>1.2.5 Considers options for methods of discussing with parents the fitting of contact lenses for myopia control in children.</p> <p>8.1.2 Understands the relevance of binocular vision status in managing a child with progressive myopia.</p> <p>9.2.2 Understands the relevance of binocular vision status in managing a child with progressive myopia.</p>
Making dry eye patients happy without ending up in tears!	14.15-15.30	Sarah Farrant	C-71002	Charter Room 3	3	skills Workshop	Ocular Examination, Ocular disease, CLs	CLs, Ocular Examination	Information, Knowledge, Options		<p>6.1.4 Uses appropriate tests to identify dry eye disease.</p> <p>5.2.1 Develops a management plan for the soft contact lens wearer for whom dry eye is affecting successful wear.</p> <p>3.2.4 Demonstrates appropriate use of specialist equipment to identify dry eye disease in potential and existing contact lens wearers.</p> <p>5.4.1 Uses appropriate tear film tests to identify dry eye disease in existing contact lens wearers.</p> <p>3.1.7 Demonstrates appropriate use of specialist equipment to assess the tear film in potential and existing contact lens wearers.</p> <p>8.1.3 Reviews the evidence produced by DEWSII, in order to apply this in the differential diagnosis and management of dry eye disease.</p> <p>1.1.1 Uses the results of DEWSII to better understand dry eye disease and assess its severity.</p> <p>2.1.2 Undertakes appropriate clinical assessment and differential diagnosis of dry eye disease.</p>

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<b>Friday 31 May 2019 (continued)</b>											
Acanthamoeba Keratitis: keeping contact lens wearers out of the 'naughty cornea'	14.30-15.30	Nicole Carnt	C-71381	Exchange Auditorium	1	Lecture	CL's, Ocular Disease, Standards of practice	Standards of Practice, CL's	Knowledge, Information	CL's, Ocular Abnormalities, Standards of Practice	<p>5.2.1 Recognises the clinical features and symptoms of acanthamoeba keratitis in soft contact lens wearers.</p> <p>5.4.1 Recognises the clinical features and symptoms of acanthamoeba keratitis in soft contact lens wearers.</p> <p>5.2.2 Recognises the clinical features and symptoms of acanthamoeba keratitis in soft contact lens wearers.</p> <p>8.1.1 Recognises the clinical features and symptoms of acanthamoeba keratitis.</p> <p>6.1.2 Recognises the relevant presenting symptoms of acanthamoeba keratitis, and recalls the clinical tests available to aid diagnosis.</p> <p>2.5.3 Is aware of recent research and current guidelines regarding the risk factors, diagnosis and management of acanthamoeba keratitis.</p> <p>2.5.3 Is aware of recent research and current guidelines regarding the risk factors, diagnosis and management of acanthamoeba keratitis.</p> <p>2.5.3 Is aware of recent research and current guidelines regarding the risk factors, diagnosis and management of acanthamoeba keratitis in contact lens wearers.</p> <p>1.1.1 Understands the longstanding disease course and impact on suffers of acanthamoeba keratitis, and the clinical tests available to assess its severity.</p> <p>8.1.3 Reviews the evidence from recent research into the diagnosis and management of acanthamoeba keratitis.</p>
Keratometry – Doing the best with what we've got	16.00-17.00	Alexandra Webster	C-71003	Charter Room 3	3	Skills Workshop	CL's, Ocular Examination	CL's, Ocular Examination			<p>3.1.1 Demonstrates use of a keratometer to analyse corneal curvature.</p> <p>3.2.1 Demonstrates use of a keratometer to analyse corneal curvature.</p> <p>5.1.2 Demonstrates an understanding of the choice of appropriate rigid lens parameters based on keratometry measurements.</p> <p>5.1.3 Demonstrates an understanding of the choice of appropriate rigid lens parameters based on keratometry measurements.</p>
Would I lie to you? - Anterior eye conundrums	16.00-17.00	Sunil Shah	C-71413	Exchange Auditorium	1	Lecture	Ocular Disease	CL's	Self & Others, Options		<p>9.1.1 Discusses cases of red eye with fellow optometrists and with ophthalmologists, to review options for management.</p> <p>2.1.4 Considers the differential diagnoses of various red eye presentations.</p> <p>6.1.7 Discusses the differential diagnosis and management of patients presenting with red eye/s.</p> <p>5.4.1 Discusses the differential diagnosis of contact lens wearing patients presenting with red eye/s.</p>

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<b>Saturday 1 June 2019</b>											
Scleral Lens Fitting Using Three Different Procedures	9.15-10.45	Daddi Fadel	C-71048	Charter Room 3	3	Skills Workshop	Ocular Examination, CL's, Communication	Ocular Examination, CL's, Communication			<p>3.1.1 Demonstrates use of a topographer to analyse corneal and scleral curvature.</p> <p>3.2.1 Demonstrates use of a topographer to analyse corneal and scleral curvature.</p> <p>5.1.2 Uses topographic mapping to aid selection and design of scleral lenses.</p> <p>5.1.3 Uses topographic mapping to aid selection and design of scleral lenses.</p> <p>1.2.1 Describes the examination and fitting procedure for scleral lenses in language which patients will understand.</p> <p>1.2.1 Describes the examination and fitting procedure for scleral lenses in language which patients will understand.</p>
Controversies in ocular surface disease diagnosis and management	9.00-10.00	Jennifer Craig	C-71568	Exchange Auditorium	1	Lecture	CL's, Ocular Disease, Standards of practice	CL's, Standards of Practice,	Options, Safe, Information	CL's, Ocular Abnormalities, Standards of Practice,	<p>5.2.1 Manages the aftercare of soft contact lens wearers with dry eye and ocular surface disease.</p> <p>5.4.2 Manages the aftercare of contact lens wearers with dry eye and ocular surface disease.</p> <p>5.2.2 Understands, at a basic level, some of the management options for contact lens wearers with dry eye and ocular surface disease.</p> <p>8.1.3 Understands the clinical treatment options for dry eye disease.</p> <p>6.1.5 Recalls the clinical tests available to aid diagnosis of dry eye and ocular surface disease.</p> <p>2.5.3 Is aware of recent research and current best practice regarding the diagnosis and management of dry eye and ocular surface disease.</p> <p>2.5.3 Is aware of recent research and current best practice regarding the diagnosis and management of dry eye and ocular surface disease.</p> <p>2.5.3 Is aware of recent research and current best practice regarding the diagnosis and management of dry eye and ocular surface disease in contact lens wearers.</p> <p>2.1.6 Considers the various treatment options available for dry eye and ocular surface disease.</p> <p>4.1.5 Reviews the evidence from recent research into the use of steroids in the treatment of dry eye disease.</p> <p>8.1.3 Reviews recent evidence behind a range of therapeutic strategies which may be used in dry eye and ocular surface disease.</p>
Myopia management and how to deal with variation in response to myopia interventions	9.15-10.45	Nicola Logan	C-71186	Charter Room 2	3	Peer Discussion	CL's	CL's	Knowledge		<p>5.3.3 Describes techniques used in the control of myopia progression by the use of complex contact lenses.</p> <p>5.5.3 Demonstrates an understanding of myopia progression, and its control by the use of complex contact lenses.</p> <p>2.1.6 Reviews and compares the current success rates of the various myopia control intervention strategies, as an aid to decision-making in prescribing.</p>
Dry Eye Tech Live	10.00-11.00	James Wolffsohn	C-71383	Exchange Auditorium	1	lecture	CL's, Ocular Disease, Ocular Examination	CL'S, Ocular Examination	Knowledge, Information	CL'S, Ocular Abnormalities, Ocular Examination	<p>5.2.1 Describes the management options for soft contact lens wearers suffering with dry eye disease.</p> <p>5.4.2 Describes the management options for contact lens wearers suffering with dry eye disease.</p> <p>5.2.2 Understands the management options for contact lens wearers suffering with dry eye disease.</p> <p>8.1.3 Understands the management options for dry eye disease.</p> <p>6.1.11 Describes the management options for dry eye disease.</p> <p>3.1.7 Reviews a range of range of techniques for evaluating tear film homeostasis.</p> <p>3.2.4 Reviews a range of range of techniques for evaluating tear film homeostasis.</p> <p>1.1.2 Reviews non-pharmacological techniques which may be used in the management of dry eye disease.</p> <p>8.1.3 Reviews a number of techniques which may be used in the diagnosis and management of dry eye disease and critically appraises the evidence basis for their adoption.</p> <p>3.1.2 Understands a range of range of techniques used for evaluating the tear film.</p>

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Soft lenses: Just a dull piece of plastic - or more than meets the eye?	12.30-1.30	Lyndon Jones	C-71382	Exchange Auditorium	1	Lecture	CL's	CL's		CL's	<p>5.1.1 Describes how the clinical performance of contact lens materials depends upon their interaction with a variety of external components, and uses this information to inform the choice of material.</p> <p>5.1.1 Describes how the clinical performance of contact lens materials depends upon their interaction with a variety of external components, and uses this information to inform the choice of material.</p> <p>5.1.1 Understands how the clinical performance of contact lens materials depends upon their interaction with a variety of external components, and how this information may inform the choice of material.</p>
Let's fit sclerals - overview and hands on workshop	14.30-15.30	Renee Reeder	C-71089	Charter Room 3	3	SKills Workshop	CL's	CL's			<p>5.1.3 Applies scleral lenses, and evaluates their fitting.</p> <p>5.1.2 Applies scleral lenses, and evaluates their fitting.</p>
Disruptive Clinical Practice	14.50-16.00	James Wolffsohn	C-71608	Exchange Auditorium	1	Lecture	Communication, Standards of Practice	Communication, Standards of Practice		Communication, Standards of Practice	<p>"1.2.1 Considers the barriers to patients being prescribed with multifocal contact lenses and how improved communication skills can overcome these.</p> <p>1.2.1 Considers the barriers to patients being prescribed with multifocal contact lenses and how improved communication skills can overcome these.</p> <p>1.2.1 Considers the barriers to patients being prescribed with multifocal contact lenses and how improved communication skills can overcome these.</p> <p>2.1.7 Explores the concept of shared decision making between practitioner and patient, and considers evidence about its impact in clinical practice.</p> <p>2.1.7 Explores the concept of shared decision making between practitioner and patient, and considers evidence about its impact in clinical practice.</p> <p>2.1.7 Explores the concept of shared decision making between practitioner and patient, and considers evidence about its impact in clinical practice."</p>

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