

A PRIMER ON
**OPHTHALMIC
MEDICAL ASSISTING**

**Education, Training,
Certification, and Accreditation**



Presented by:



*JCAHPO Education and Research Foundation
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Best Practices for Developing Your Eye Care Team

In a growing and changing world, the need for consistent and ever-improving eye care becomes more evident each day. As a result, there is a great need for qualified, skilled, and certified Eye Care Teams and accredited ophthalmic training programs.

The Eye Care Team consists of ophthalmologists, optometrists, nurses, ophthalmic assistants/technicians/medical technologists, refractionists, opticians, orthoptists, ophthalmic photographers, low vision therapists, and others. Non-clinical staff who support the Eye Care Team may include receptionists, billing clerks, secretaries, office managers, clinic officers, and other staff. All clinical and non-clinical workers have an important role in overall patient care.

Ophthalmic Allied Health Personnel is a common term that refers to all members of the Eye Care Team, other than the ophthalmologist. Specifically, this document addresses the core group of ophthalmic medical personnel (OMP) that are ophthalmic assistants, ophthalmic technicians, refractionists, and ophthalmic medical technologists. In some parts of the world, these eye care team members may be referred to as mid-level personnel, para-ophthalmic specialists, and other ophthalmic health care workers. In Canada and the United States, as well as in other countries, many of these positions are listed as occupations with very specific government-recognized job titles, such as Ophthalmic Medical Technician (OMT).

Ophthalmic medical personnel (OMP and/or OMT) perform assigned procedures under the direction or supervision of

Productivity and the Eye Care Team



a physician licensed to practice medicine and surgery, and qualified in ophthalmology.

Some of the most common tasks performed by OMP/OMT at all levels of certification include:

- Taking patient histories
- Taking eye measurements
- Administering eye tests and evaluations
- Providing patient services
- Maintaining instruments
- Performing a variety of clinical tasks

OMP may be trained on-the-job (OJT) or be a graduate of an accredited ophthalmic training program. Graduates and OJT staff may become certified or licensed (depending upon location or country). Certification communicates to patients, the public, and the ophthalmologist a higher-level of qualifications.

Understanding Accreditation, Licensure, and Certification

Accreditation

In general, accreditation is a voluntary process which is overseen by a non-governmental organization providing regulations, that:

- Are based upon guided self-evaluation and self-improvement.
- Rely upon peer review that in turn stimulates evaluation and program improvement, and
- Evaluate the effectiveness of the academic unit against a set of defined standards.

Licensure/Registration

Licensure and registration are defined as the permission to do something as given by a governmental authority with the implication that one would not be permitted to do this activity without such permission. A license is recognized by the laws of the state, province, or government in which it is granted.

Certification

Certification is the recognition by the private sector of voluntarily-achieved standards. Certification is therefore distinguished from licensure because it is usually non-governmental and voluntary. Certification may also be required by a governmental or third party payee.

Accreditation Versus Certification

Accreditation applies only to institutions and programs; individuals are not accredited. Individuals are certified or licensed.

Benefits of Developing a Training Program

Starting an Accredited Training Program

By developing an accredited training program, the institution will gain a variety of benefits for the future of the institution, students, employers, and patients worldwide. Accreditation emphasizes learning quality, responsibility, and improvement through a process of reflection and analysis.

Benefits of an Accredited Training Program

Institution

- May qualify schools and programs for government funding.
- Increases enrollment at accredited institutions.

Employers

- Establishes a baseline of professional and quality standards.
- Improves training of ophthalmic medical technicians to help eliminate eye disease and blindness.
- Helps meet the high demand for qualified ophthalmic medical technicians.
- Creates greater pool of talented and trained students for employers and a variety of health organizations.
- Ensures established knowledge base for all incoming employees.
- Keeps up with the latest advancements and treatments for the best patient care.

Students

- Provides a direct pathway for student eligibility for certification upon graduation.
- Earns respect and attention within the profession on both local and global levels.
- Offers more choices and opportunities for students and faculty in the eye care field.
- Gives students the opportunity to join a highly regarded profession.
- Provides immediate and long-term benefits to help students' education in the direction of progress, advancement, and relocation.

Ophthalmic Community

- Improves quality of life by providing better patient eye care in the community.

Major Steps to Developing a Training Program

1. Obtain a copy of the *Standards and Guidelines for Accreditation* from one of the following that applies to you:

Commission on Accreditation of
Ophthalmic Medical Programs (CoA-OMP)
2025 Woodlane Drive, St. Paul, MN 55125-2998 U.S.A.
(651) 731-2944, www.coa-omp.org

Conjoint Accreditation Services, Canadian Medical Association
1867 Alta Vista Drive, Ottawa, Ontario K1G 5W8 Canada
(888) 855-2555, www.cma.ca

International Joint Commission on Allied Health
Personnel in Ophthalmology (IJCAHPO)
2025 Woodlane Drive, St. Paul, MN 55125-2998 U.S.A.
(651) 731-2944, + 001 1 651 731 2944, www.ijcahpo.org

2. Conduct a needs assessment; survey communities of interest, e.g., ophthalmologists, professional organizations of allied health personnel.
3. Research local, state, and national government policies regarding educational programs.
4. Identify a post-secondary academic institution, hospital, medical center, or other government, education, or medical service to host and sponsor the program.
5. Secure contracts with qualified personnel (Qualifications and responsibilities are outlined in the *Standards and Guidelines for Accreditation*):
 - Medical Director
 - Program Director
 - Instructors
 - Clerical Support
6. Develop a budget and guarantee funding to support the program, e.g., expenses such as classroom space, laboratories, equipment, faculty, etc.
7. Develop the curriculum according to the *Standards and Guidelines for Accreditation*.
8. Pursue accreditation following the *Standards and Guidelines for Accreditation*.
9. Encourage JCAHPO certification of graduates. Obtain the *Criteria for Certification & Recertification* at www.jcahpo.org or (800) 284-3937 (US/Canada only).

Accreditation Standards Overview

The *Standards and Guidelines for Accreditation* is the basis for accreditation of educational programs for ophthalmic medical technicians. The term “Standards” refers to the minimum requirement for accrediting ophthalmic training programs. The term “Guidelines” refers to documented evidence to measure meeting the Standards.

The accreditation process strives for high quality patient care by maintaining national and international educational Standards for ophthalmic medical technicians. The Standards have the following characteristics:

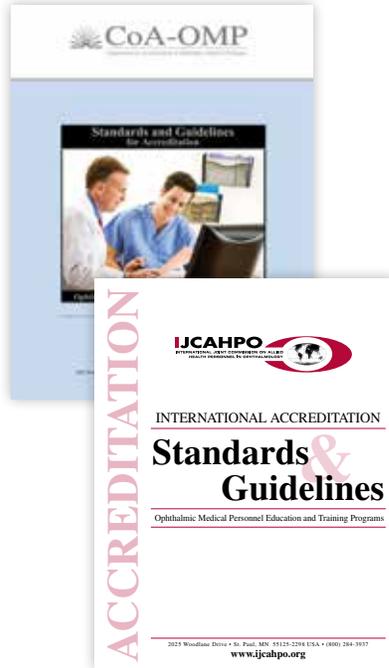
1. Standards are qualitative, not quantitative. There are no arbitrary numerical indicators.
2. Standards are broad in purpose. They must apply to many different types of programs and institutions. It is the program’s responsibility to create a program that adheres to the Standards. There is no single template for a successful accredited program.
3. Standards are expected to acknowledge and respect the basic right of institutions to be self-defining and self-determining.
4. Standards represent prescriptive rather than proscriptive requirements that are acceptable to the communities of interest that use the Standards.
5. Standards are designed to allow for quality, continuity, and flexibility. The curriculum is not directly correlated to the JCAHPO certification exam.

Maintaining Accreditation

Accreditation is an ongoing process. Programs enter the process, and once they gain accreditation, must maintain continuous self-study and improvement mechanisms. Administrative requirements for maintaining accreditation, include:

1. Submit the self-study report one year before expiration.
2. Schedule a site visit before accreditation expiration.
3. Provide an Annual Report at the end of each year.
4. Remit annual fees.

For more specific information, refer to the *CoA-OMP Standards and Guidelines for Accreditation - Ophthalmic Medical Technician Training Programs* found online at www.coa-omp.org, *IJCAHPO Accreditation Standards and Guidelines* are at www.ijcahpo.org, and Canadian Medical Association, Conjoint Accreditation Services can be found at www.cma.ca/learning/conjointaccreditation.



The Primary Standards

Standard I. Sponsoring Institution

- Individual Institution
- Consortium
- Responsibilities of Sponsor

Standard II. Resources

- Program Director
- Medical Director
- Faculty and/or Instructional Staff
- Professional Development
- Financial Resources
- Learning and Physical Resources
- Affiliation Agreements

Standard III. Students

- Admission Policies and Procedures
- Evaluation of Students
- Health
- Guidance

Standard IV. Operational Policies

- Fair Practices

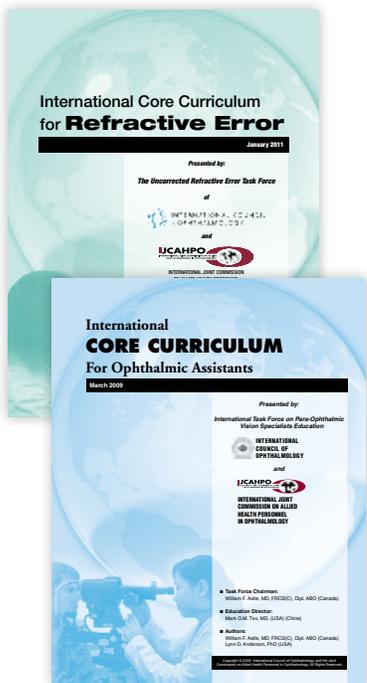
Standard V. Program Evaluation

- Program Evaluation
- Outcomes
- Results of Ongoing Program Evaluation

Standard VI. Curriculum

- Description of the Program
 - Program Design
 - Instruction Plan Including Curriculum Sequencing, Course Syllabi, and Documented Evaluation
 - Common Didactic Curriculum for the Ophthalmic Assistant Program, Ophthalmic Technician Program, and Ophthalmic Medical Technologist Program
- (Note: International Standards include Refractionist)

International Core Curriculum for Ophthalmic Assistants and International Core Curriculum for Refractive Error



Curricula available: *International Core Curriculum for Ophthalmic Assistants* and the *International Core Curriculum for Refractive Error*, which were developed by the *International Joint Commission on Allied Health Personnel in Ophthalmology (IJCAHPO)* and the *International Council of Ophthalmology (ICO)*

With comprehensive analysis and input from content experts and educators from around the world, the core curricula are well-designed, clearly defined, and carefully organized. The curricula employ a modular system that can be used internationally by educators and ophthalmic specialists and are compatible with local practice and regulations. Consistent with “best practices” in ophthalmology and patient care across the globe, the curricula are designed to provide learners with content domains or categories and the appropriate performance objectives to accomplish eye care job tasks.

The foundational Ophthalmic Assisting knowledge and skills required of ophthalmic medical personnel are the following five core competencies:

- Patient care
- Medical knowledge
- Professionalism, interpersonal and communication skills
- Technical and scientific skills
- Community and health services

These Ophthalmic Assisting competencies in the core curriculum are organized into the following three sections:

A. Introduction to Ophthalmology

1. Clinic and Personnel Functions
2. Medical Ethics, Regulatory, and Legal Issues
3. Communication Skills, Patient Education, and Ophthalmic Counseling
4. Ophthalmic Patient Services and Relations (Triage)
5. Community Health Eye Care
6. Safety
7. Administrative Duties
8. Medical Terminology
9. General and Ocular Anatomy, Physiology
10. Pharmacology
11. Microbiology
12. History Taking

B. Basic Skills

1. Vital Signs
2. Visual Testing (Distance and Near)
3. Pupillary Assessment
4. Lensometry
5. Keratometry
6. Tonometry
7. Supplementary Tests - Basic Skill Level
8. Clinical Equipment and Supplies Maintenance
9. Examination of the Eye and Face
10. Clinical Optics
11. Biometry

B. Basic Skills (continued)

12. Eye Diseases
13. Systemic Diseases

C. Advanced Skills

1. Low Vision
2. Supplementary Test - Advanced Skill Level
3. Ophthalmic Imaging
4. Surgical Procedures
5. Refractometry, Retinoscopy, Refinement
6. Ocular Motility
7. Contact Lenses
8. Supervision and Training Support

Basic Training Equipment Needed for Curriculum

- Basic Exam Equipment (Occluders, Patches, Pinhole, Reading Cards, etc.)
- Trial lenses/Phoropter
- Lensometer/Test Glasses
- Keratometer
- Retinoscope
- Slit Lamp
- Tonometer
- Prisms
- Fundus Camera
- Perimeter
- Handlight/Penlight
- Color Plates/Tests
- Media for Microbiology Culture of Ocular Infection
- Library Resources:
 - Eye Dictionary
 - Ophthalmic Assisting Text Books

(Equipment needs should be based on enrollment.)

For more detailed information and performance objectives for each competency, refer to the *International Core Curriculum for Ophthalmic Assistants* and *International Core Curriculum for Refractive Error*. They are available online at www.ijcahpo.org.

Checklist for Developing an Ophthalmic Training Program

The purpose of this checklist^{1,2,3} is to provide support for those seeking to set up an ophthalmic training program. The checklist may be adapted for each individual situation. It may be used as a precursor to developing an accredited training program or for evaluating an existing training program preparing for accreditation.

¹ Adapted from *Checklist for Setting up an Education Programme*, (2007), Renee du Toit and Ingrid Mason.

² CoA-OMP *Standards and Guidelines for Accreditation*

³ IJCAHPO's *Accreditation Standards and Guidelines*

I. Initial Analysis			
Objectives	Tasks	Lead Person	Timeline
A. A Thorough Understanding of the Program Environment is Required	Obtain information about: <ul style="list-style-type: none"> • Need for the training • Educational regulations • Professional regulations • Sources from which students may be recruited • Risks of attrition • University, college, or hospital systems of credit • Training programs already in existence 		
B. Stakeholders Analysis	Identify stakeholders to contribute to program development (e.g., instructors, beneficiaries, professional groups, etc.) Document goals of course (match course content and job description of graduate)		
C. Planning	Establish a steering committee of key stakeholders		
D. Development of Training Program	Convene a workshop to plan and empower those involved in the program Report recommendations by steering committee to stakeholders Have clear activity plan to take program forward		
II. Recognition of Qualifications			
Objectives	Tasks	Lead Person	Timeline
A. Educational Standards	Establish: <ul style="list-style-type: none"> • Admission requirements • Length of course • Vocational qualifications • Feasibility of delivering the course within a modular system 		
B. Recognition by Professional Body, e.g., State Societies, Local Ophthalmic Medical Personnel Groups, etc.	Meet with professional bodies for networking and support		
C. Accreditation	Review CoA-OMP/IJCAHPO/CMA accreditation process		
D. Certification	Review JCAHPO certification requirements		

III. Selection of Students			
Objectives	Tasks	Lead Person	Timeline
A. Documented Selection Criteria and Process	Consider: <ul style="list-style-type: none"> • Interest, aptitude, manual dexterity • Experience in eye or health care • Academic background • Funding/scholarships • Job after training 		
IV. Curriculum Development			
Objectives	Tasks	Lead Person	Timeline
A. Content	Ensure that: <ul style="list-style-type: none"> • There is a match between documented role of graduate and job description • Learning outcomes include essential knowledge and skills • Soft skills/attitudes, e.g., leadership, teamwork, information technology are included • Specialist areas, e.g., low vision, systemic diseases, glaucoma, refraction, included where required • Training of other eye team members to provide support to clinicians • Short courses to train support staff 		
B. Method	Teaching methodology, didactic and clinical, should include: <ul style="list-style-type: none"> • Active learning, problem-based approach, self-directed learning, and critical thinking • Assessment of practical procedures: logbooks, journals, goal setting • Specification of contact hours for knowledge and practical experience 		
C. Curriculum	Ensure the curriculum is: <ul style="list-style-type: none"> • Documented and available to faculty, students, and external training institutions • Competency-based • Includes criteria and indicators to measure success • Regularly evaluated 		
D. Assessment of Learning	Ensure validity/reliability of assessment, e.g., external examiners Include both continuous and final assessment knowledge and skills Types of assessment: <ul style="list-style-type: none"> • Journals/logbooks, wetlab, and practicals • Case studies/presentations • Peer and self assessment, e.g., clinical audit against skills 		
E. Training Faculty	Teaching skills match faculty, selection criteria External faculty (specialist areas) Number required (permanent or other departments) Establish: <ul style="list-style-type: none"> • Opportunities for continuing education • Systems for evaluation of teaching 		
F. Clinical Experience	Ensure that students have at the clinical sites: <ul style="list-style-type: none"> • Supervision and monitoring during training • Adequate equipment 		
G. Final Accreditation	Establish appropriate accreditation/certification by government/university/outside agency/professional body		

Checklist for Developing an Ophthalmic Training Program

V. Teaching Institution

Objectives	Tasks	Lead Person	Timeline
A. Sharing Teaching and Infrastructure Resources	Establish networks/communities to facilitate: <ul style="list-style-type: none"> • Use of teaching materials and support staff • Use of other modules, faculty, and visiting faculty 		
B. Training Institution Resources	Obtain and set up systems to maintain: <ul style="list-style-type: none"> • Clinical sites with affiliation agreements • Teaching aids • Equipment and clinical instruments • Resource center (books, journals, internet) • Course coordinator with organizational skills 		
C. Student-Related Learning Costs	Document and provide to students information about: <ul style="list-style-type: none"> • Accommodations • Educational materials/books • Indemnity • Transport to outreach • Examination fees • Health 		
D. Funding for the Program	Write a budget and obtain funding that includes: <ul style="list-style-type: none"> • Costs to operate • Equipment • Indemnity for faculty • Regular evaluation (internal and external) 		
E. Funding for Graduate Support	Write a budget and obtain funding for support of graduates after training that includes: <ul style="list-style-type: none"> • Supervisory visits • Workshops/conferences • Professional development/continuing education • Regular evaluation (internal and external) 		

VI. Monitoring and Evaluation

Objectives	Tasks	Lead Person	Timeline
A. Program Effectiveness	Evaluate the: <ul style="list-style-type: none"> • Students' performance—knowledge, skills, and attitude • Faculty—self, peer, and student assessment • Consistency with job description, aim of course, and what is being taught 		

VII. Graduates

Objectives	Tasks	Lead Person	Timeline
A. Professional Recognition	Provide support for graduates to establish career structure and salary		
B. Professional Development of Graduate	Provide support for graduates to establish: <ul style="list-style-type: none"> • Job description • Continuing education • Membership in professional body 		

Certification

The Joint Commission on Allied Health Personnel in Ophthalmology's (JCAHPO®) mission is to enhance the quality and availability of ophthalmic patient care by promoting the value of qualified allied health personnel and providing certification and education.

Upon completion of an accredited training program or OJT and work experience, candidates may apply for JCAHPO certification. Certification reinforces the skills and knowledge that ophthalmic medical technicians attained through education and training.

Core Levels of Certification

JCAHPO's three core levels of certification comprise a solid ladder for progressive career development.



• Certified Ophthalmic Assistant (COA®)

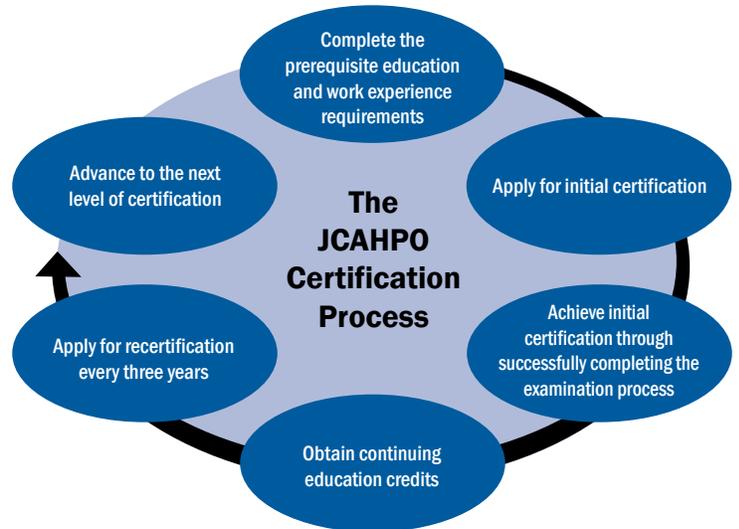
The COA is the entry-level designation designed to start eye care professionals on the path to success. The COA designation offers the opportunity for assistants to confirm their knowledge in 19 specific content areas.

• Certified Ophthalmic Technician (COT®)

The COT is the second step on the ladder to success. The COT designation confirms knowledge in 19 content areas and 7 skill areas specifically designed to test the Certified Ophthalmic Assistant or program graduate who intends to move to the next level of their career in the eye care field. *The skill areas for the COT Skill Evaluation are shown on the next page.*

• Certified Ophthalmic Medical Technologist (COMT®)

The COMT certification designation recognizes those individuals who have progressed through the COA and COT levels or who have graduated from a COMT training program as accomplished eye care professionals. The COMT designation confirms knowledge in 17 content areas and 12 skill areas to include the simulated Skill Evaluation and Performance Test covering specific areas that the ophthalmic professional seeking the COMT designation performs on a daily basis. *The skill areas for the Skill Evaluation and Performance Test are shown on the next page.*



Sub-Specialty Certification

Those who are certified at a core level may choose to become certified in the following sub-specialty area.

• Ophthalmic Surgical Assisting (OSA®)

Achievement of this sub-specialty certification exemplifies knowledge in the procedures and instrumentation necessary to assist in ophthalmic surgical suites.

Specialty Certifications

The following certifications do not require a core-level certification and can be attained separately.

• **Registered Ophthalmic Ultrasound Biometrist (ROUB®)** The designation of ROUB signifies that the individual, who performs A-scan biometry on the eye, has a knowledge base in biometry and physics.

• **Certified Diagnostic Ophthalmic Sonographer (CDOS®)** The designation of CDOS conveys that the individual, who performs the diagnostic B-scan sonography on the eye, has obtained a knowledge base in the principles and instrumentation needed to perform eye exams using high frequency sound waves.

Maintaining Certification

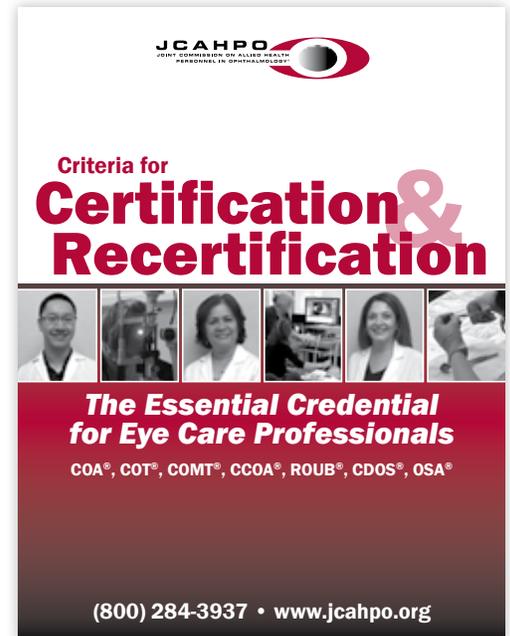
An initial certification is valid for 36 months. Recertification is required every three years to maintain use of the credential. The recertification process requires ophthalmic medical personnel to stay current on new developments in the field of ophthalmology through continuing education credits or re-examination.

For more information, visit www.jcahpo.org or call (651) 731-2944.

Content Area Percentages on Multiple-Choice Exams for COA, COT, and COMT Levels

The exam has the same content domains at all levels, but with each level of certification the degree of difficulty increases and exam content tested changes in the depth and breadth of knowledge as well as skill required.

Content Area	COA %	COT %	COMT %
History Taking	8	6	3
Pupillary Assessment	3	5	4
Contact Lenses	2	3	0
Equipment Maintenance and Repair	4	4	3
Lensometry	3	5	6
Keratometry	3	5	3
Medical Ethics, Legal and Regulatory Issues	5	3	5
Microbiology	2	3	5
Pharmacology	8	5	8
Ocular Motility	3	5	11
Assisting in Surgical Procedures	7	6	3
Ophthalmic Patient Services and Education	16	7	10
Ophthalmic Imaging	3	7	6
Refractometry	6	7	6
Spectacle Skills	3	3	0
Supplemental Skills	8	9	10
Tonometry	4	5	5
Visual Assessment	8	6	6
Visual Fields	4	6	6



Go to www.jcahpo.org, Certification/Recertification, "Get Certified" to download the JCAHPO Certification Criteria Book.

Skill Areas for the COT Skill Evaluation

Candidates will be asked to demonstrate their skill in each of the following seven areas:

- Lensometry
- Visual fields
- Ocular motility
- Keratometry
- Retinoscopy
- Refinement
- Tonometry

Skill Areas for the COMT Performance Test

Candidates will be asked to demonstrate their skill in each of the seven COT Skill areas and the following five areas:

- Ocular motility using prism and cover tests at distance
- Lensometry - measure and identify prism
- Fundus photography and fluorescein angiography
- Pupil assessment
- Versions and ductions

Certification designates that the candidate is part of an elite group of more than 19,000 certified ophthalmic assistants, technicians, technologists, surgical assistants, and sonographers worldwide. The credentials achieved by the candidate are internationally recognized by physicians, employers, administrators, and patients. The candidate will be recognized as a skilled, highly trained professional.

Four out of five ophthalmologists agree that certified ophthalmic medical technicians (OMT) render their practice more productive. Studies have shown that certified OMT contribute more than non-certified personnel to the efficiency and quality of care in a practice. Just as in other professions, the value of certification and the importance of employing educated, trained, and qualified professionals should be a best practice in ophthalmology.

Woodworth K, et al. Eye & Contact Lens 34(1) 2008

Resources for Programs and Students

Resources

EyeCareCE

www.eyecarece.org

The largest, most comprehensive online continuing education resource available for the eye care team.

- Over 200 comprehensive courses including interactive simulations
- 20 Ophthalmic categories
- Basic, Intermediate, Advanced Levels
- Courses for Ophthalmic Medical Technicians, Refractionists, Nurses, Photographers, Orthoptists, Opticians

Webinars

www.jcahpo.org/education/webinars.aspx

The JCAHPO & ATPO Webinar (web-based seminars) continuing education series is a cost-effective way for the eye care team to take courses and earn credits from the convenience of their home or office. Webinars are courses or lectures transmitted over the internet from a remote location to registered attendees. Currently scheduled for one lecture a month, JCAHPO seminars can be viewed anywhere the attendee has a high-speed internet connection.

JCAHPO Bookstore

www.jcahpo.org/store/bookstore

The JCAHPO bookstore offers an expanded inventory of the latest ophthalmic publications including, but not limited to the Certified Ophthalmic Assistant (COA®), Certified Ophthalmic Technician (COT®), & Certified Ophthalmic Medical Technologist (COMT®) Exam Study Guides, JCAHPO® Learning Systems®, JCAHPO® Contact Lens Learning Systems®, ATPO's Certification Review Flashcards, and more!

JCAHPO Education & Research Foundation

www.jcahpo.org/foundation

The Joint Commission on Allied Health Personnel in Ophthalmology (JCAHPO®) established the Education and Research Foundation in 1990 to fund compelling needs in ophthalmic medical assisting, i.e., expansion of training programs, scholarships, support certification, and continued research into psychometric methods of testing and simulation of tasks critical to ensure valid and reliable examinations.

Ongoing Support Through the Following Organizations



The Consortium of Ophthalmic Training Programs (COTP) is comprised of accredited training program directors and delegates. It is organized exclusively for educational and scientific purposes including, but not limited to, promoting growth of ophthalmic training programs and promoting awareness of ophthalmic medical personnel through communication and interaction with groups affecting ophthalmic training programs.

Consortium of Ophthalmic Training Programs
2025 Woodlane Drive, St. Paul, MN
55125-2998 U.S.A.
(651) 731-7244, cotp@jcahpo.org
www.cotpedu.org



The Association of Technical Personnel in Ophthalmology (ATPO) represents a diverse group of ophthalmic medical technicians, including (but not limited to) ophthalmic assistants, technicians, technologists, surgical and keratorefractive technicians, photographers, nurses, and orthoptists. In addition to advocating for its members and profession, ATPO provides, expands, and supports scientific and educational opportunities for allied health personnel in ophthalmology.

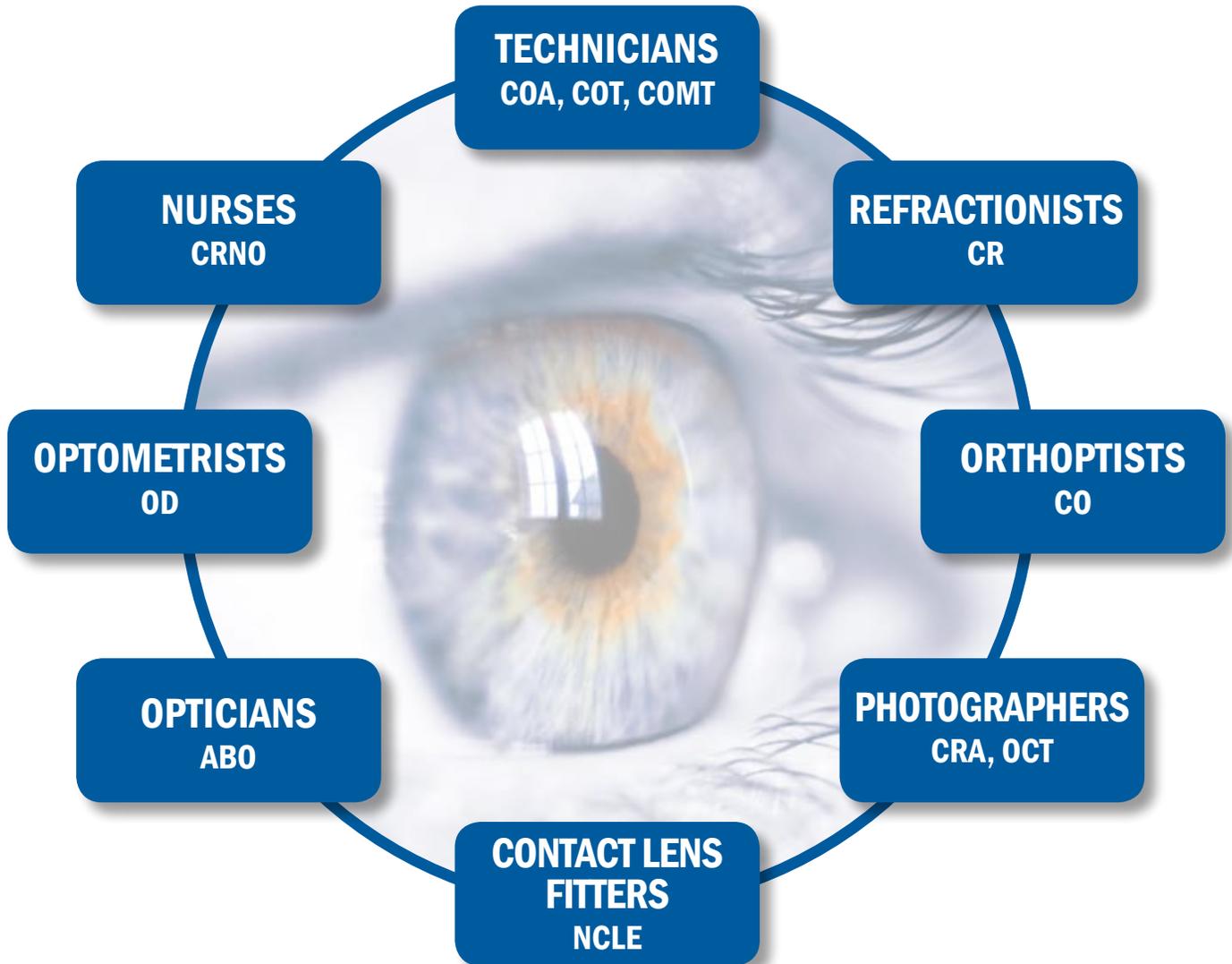
Association of Technical Personnel in Ophthalmology; 2025 Woodlane Drive, St. Paul, MN 55125-2998 U.S.A.; (651) 731-7245, (800) 482-4858 atpomembership@jcahpo.org, www.atpo.org



The Canadian Society of Ophthalmic Medical Personnel (CSOMP) represents all allied health care personnel in ophthalmology working in Canada. The goals of CSOMP are to work in association with the Canadian Medical Association in accrediting new ophthalmic programs in Canada, to provide continuing education, and to maintain a strong membership consisting of all Canadian ophthalmic medical personnel.

Canadian Society of Ophthalmic Medical Personnel
c/o COS, 1525 Carling Avenue,
Suite 610, Ottawa, ON, K1Z 8R9
<http://www.cos-sco.ca/csomp/>

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