



Scope of Practice for Ophthalmologists

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1 Definitions and Abbreviations

No.	Term	Definition
1.1	Clinical Privileging	A process in which the healthcare professional is granted clinical privileges by the healthcare provider.
1.2	Competency	The capability of an individual to apply task-related knowledge, skills and abilities required to successfully perform an assigned task in a defined work setting.
1.3	Complex Ophthalmology Procedures	Ophthalmology procedures that require advanced surgical skills, specialized equipment, and sub-specialized ophthalmology care. They often address rare, severe, or advanced stages of diseases, have higher risks of complications, and necessitate more intensive pre- and post-operative care.
1.4	Department of Health (DoH)	The regulative body of the Healthcare Sector in the Emirate of Abu Dhabi, Established based on law No. (10) of 2018.
1.5	Ophthalmologist	DoH licensed ophthalmologist who specializes in the diagnosis, treatment, and management of eye diseases and disorders, systemic disorders with ocular manifestations, and ocular manifestations of systemic disorders.
1.6	Ophthalmology	The branch of medicine that focuses on the diagnosis, treatment, and management of eye diseases and disorders, systemic disorders with ocular manifestations, and ocular manifestations of systemic disorders; involving both medical and surgical interventions to preserve and improve vision.
1.7	Healthcare Provider	Any individual or a Healthcare facility licensed by DoH and has the ultimate responsibility for delivering healthcare services and ensuring compliance within the healthcare system.
1.8	Practice Setting	In this document, a 'practice setting' refers to a healthcare facility licensed by DoH to deliver healthcare services in areas of prevention, treatment and recovery.

No.	Term	Definition
1.9	Recent Experience	Represents a status of consistently performing a specific surgical procedure within the last 2 years with consistent outcomes. It demonstrates one's ongoing proficiency in practice and is recorded in a logbook. The number of each procedure depends on factors like disease prevalence, patient volume, and procedure complexity.
1.10	Scope of Practice	The predefined range of services, treatments, responsibilities, and activities that might be undertaken within the realm of a specific profession.
1.11	Simple Ophthalmology Procedures	Procedures that generally involve routine diagnostic and therapeutic techniques, are often minimally invasive, have a low risk of complications, and do not typically require specialized equipment or advanced surgical expertise beyond general ophthalmologic training.
1.12	Surgical Logbook	Authenticated record of the surgical procedures performed by surgeons during a specific period that includes – at minimum - the procedure's name, date, and level of the surgeon's involvement (i.e. primary or assistant surgeon). ^{1,2}

2 SOP Purpose

- 2.1 Define the clinical services that may be provided by Ophthalmologists and the required competencies.
- 2.2 Outline an ophthalmologist's professional boundaries, accountabilities, and ethical and legal obligations toward patients and society.
- 2.3 Serve as a reference for the healthcare workforce, healthcare providers, healthcare payers, and governance bodies.
- 2.4 This document outlines the services and procedures that may be provided by Ophthalmologists but does not imply or require mandatory insurance coverage obligations for these services.

3 SOP Scope

- 3.1 This scope of practice applies to DoH-licensed ophthalmologists who wish to practice in the Emirate of Abu Dhabi and to all healthcare providers who provide and operate ophthalmology services or contribute to or support the care of patients receiving these services.

4 Practice Settings

4.1 Ophthalmologists can practice in various health care settings, including but not limited to:

- 4.1.1 Hospitals
- 4.1.2 Medical Centers
- 4.1.3 One Day Surgery Centers
- 4.1.4 Primary Health Care Centers
- 4.1.5 Specialized Clinics
- 4.1.6 Telehealth Provider
- 4.1.7 Mobile Healthcare Units

5 Standard of Proficiency

5.1 General Obligations of Ophthalmologists

- 5.1.1 Adhere to the local and federal UAE laws, legislations, regulations, professional conduct and ethical principles.¹⁻²⁵
- 5.1.2 Provide patient care based on their training, skills, and experience that falls within the scope of their profession, specialty, license, and clinical privileges.^{7,8,11,19,21}
- 5.1.3 Work only in facilities licensed to provide ophthalmology services and equipped with appropriate staff and necessary resources and refrain from undertaking any procedure if the facility, equipment, staff, or ancillary services required for safe care are unavailable.^{7,20}
- 5.1.4 Align practice with evidence-based and best practice professional standards and practice guidelines set by national and international bodies.
- 5.1.5 Deliver patient-centered care with integrity, honesty, and compassion, respecting patients' privacy and autonomy.^{3,8,13,14,22}
- 5.1.6 Demonstrate cultural awareness and non-discrimination in all interactions with patients and their families.^{3,14,22}
- 5.1.7 Maintain and update knowledge base and continue to enhance skills in utilizing modern techniques and technologies to ensure optimal patient care outcomes.
- 5.1.8 Maintain life support skills and the required life support certification.
- 5.1.9 Prescribe evidence-based diagnostics and treatments to optimize care, minimize unnecessary radiation, medications, or costs.^{4,5,7,20}
- 5.1.10 Prescribe pharmaceuticals responsibly adhering to best practices and UAE laws and regulations.⁴
- 5.1.11 Explain all aspects of patient affairs clearly to patients and their families including different treatment options, risks and benefits and associated costs and document all discussions.^{3,8,14}

- 5.1.12 Manage patient expectations through transparent communication with patients regarding the procedures provided, ensuring they fully understand the associated potential risks, and expected outcomes.^{3,8,13}
- 5.1.13 Obtain informed consent (in accordance with DoH regulations) providing sufficient opportunity for addressing any concerns.
- 5.1.14 Educate patients and their families on eye diseases' risk factors, prevention, and long-term health optimization.^{3,8,13}
- 5.1.15 Implement effective pain management strategies in line with ophthalmology care, continuously evaluating and addressing patient-specific needs related to pain and anxiety and assessing associated complications.
- 5.1.16 Contribute to public health initiatives that enhance access to specialist care.^{3,8,14}
- 5.1.17 Create and maintain timely, accurate, and comprehensive electronic health records, including but not limited to diagnosis, procedures, prescriptions, medication, pre- and post-operative photographs along with the procedure, in accordance with DoH regulations and facility policies.^{14,16,17}
- 5.1.18 Utilize unified electronic health records (such as MALAFFI) to assess patient's previous encounters and results within other healthcare providers.
- 5.1.19 Safeguard all protected health information in accordance with the Abu Dhabi Healthcare Information and Cyber Security Standard (ADHICS), as well as with all applicable local and international data privacy and security laws and regulations.^{16,17}
 - 5.1.19.1 Complete cyberlearning programs mandated by DoH including Information Security awareness and other related activities that aim to safeguard health information.²³
- 5.1.20 Use digital health systems responsibly, ensuring that access to and handling of patient information is restricted to what is necessary for clinical duties and aligns with assigned access rights.^{16,17}
- 5.1.21 Utilize clinical decision support systems, including artificial intelligence (AI) tools in a manner that complements clinical judgment and decision-making while ensuring the accuracy and reliability of AI-driven insights and adhering DoH regulations and standards governing the use of AI and other emerging technologies in healthcare.²⁵
- 5.1.22 Issue comprehensive and accurate medical reports and sick-leave certificates that fulfill DoH regulations.²⁴
- 5.1.23 Fulfilling obligations toward patient safety, occupational health, and quality care that may include (but not limited to) communicable diseases, controlled-substance misuse, adverse events, antimicrobial stewardship and occupational injuries.^{4,9,20}

- 5.1.24 Maintain a surgical logbook reflecting their experience to be presented to the healthcare facility's clinical privileging committee and DoH upon license renewal.^{1,2}
- 5.1.25 In time-critical emergencies, always act in the patient's best interest by initiating lifesaving or function-preserving interventions and arranging prompt and safe referral to an adequately equipped service or facility.⁷
- 5.1.26 Consult with other healthcare professionals and providers and refer patients whose care necessities transfer to a different service or facility.
- 5.1.27 Establish and maintain effective and respectful communication with other professionals.
- 5.1.28 Provide expert consultation and actively participate in multidisciplinary team (MDT) care when collaboration across various specialties is crucial to meet patient needs and enhance treatment outcomes.
- 5.1.29 Participate in quality assurance and service improvement activities to enhance healthcare services and clinical outcomes.
- 5.1.30 Comply with the Abu Dhabi Occupational Safety and Health Code of Practice and ensure a safe work environment for staff and patients.
- 5.1.31 Contribute to medical literature through research activities, authoring, reviewing, publishing in journal articles, and presenting in scientific events.
- 5.1.32 Provide technical advice as a subject-matter expert where experience allows.
- 5.1.33 Participate effectively in healthcare education and training activities as a mentor, supervisor, faculty member, lecturer, or program director.
- 5.1.34 Take on management and leadership roles in healthcare facilities.

5.2 Scope of Patient Care

- 5.2.1 Deliver comprehensive patient care for refractive, eye and visual system diseases and injuries, including history taking, physical examinations, investigations, diagnoses, and treatment.
- 5.2.2 Triage and stratify risks for patients with visual and eye-related emergencies, and take decisions regarding admission, referral and transfer, and safe discharge.
- 5.2.3 Recognize when ocular disease is a manifestation of systemic disorders and manage and refer to the appropriate specialty when needed.
- 5.2.4 Utilize diagnostic tools and technologies to identify physical and functional abnormalities.
 - 5.2.4.1 Comprehensive eye examinations, including assessment of visual acuity, color vision, slit lamp biomicroscopy, intraocular pressure measurement, dilated fundus examination, sensorimotor evaluation, and refraction.

- 5.2.4.2 Ocular imaging techniques, including fundus photography, corneal topography, optical coherence tomography (OCT), ultrasound biomicroscopy, endothelial microscopy, A-scan and B-scan ultrasonography, fluorescein angiography, OCT-angiography, and indocyanine green angiography.
- 5.2.4.3 Perimetry, both static and kinetic.
- 5.2.4.4 Electrophysiology tests, including electroretinography, electrooculography, and visual evoked potentials.
- 5.2.4.5 Advanced imaging techniques, including ultrasound, computed tomography, magnetic resonance imaging, angiography, anterior segment OCT and wide-field imaging.
- 5.2.5 Conduct screening and preventive services for common ocular conditions, including but not limited to glaucoma, diabetic retinopathy, refractive errors, and retinopathy of prematurity, while implementing infection control measures.
- 5.2.6 Diagnose and acutely manage ophthalmology emergencies including acute vision loss, anaphylaxis and ocular allergies, chemical burns, eye infections (such as corneal ulcers and endophthalmitis), retinal detachment, acute glaucoma, and severe traumatic injuries.
- 5.2.7 Oversee and initiate management for patients requiring ophthalmology care for both elective and emergency conditions affecting the eye and visual system, followed by referral to subspecialized care when warranted, such includes:
 - 5.2.7.1 Pre-operative assessments
 - 5.2.7.2 Performing surgical and non-surgical interventions
 - 5.2.7.3 Post-operative care
 - 5.2.7.4 Discharge protocols
 - 5.2.7.5 Follow-up care plan
- 5.2.8 Diagnose and manage common ocular conditions and perform low complexity procedures typically undertaken by general ophthalmologists. and refer patients requiring sub-specialized care to the appropriate to sub-specialty. Low complexity care includes:
 - 5.2.8.1 Corneal & External Eye Disorders**
 - Diagnosis and medical management of conjunctivitis, keratitis, dry eye disease, corneal abrasions, and corneal degenerations
 - Minor procedures such as corneal or conjunctival foreign body removal, corneal scraping for culture, and pterygium excision.

5.2.8.2 Glaucoma

- Diagnose and manage glaucoma, including primary open-angle and angle-closure types, with appropriate monitoring; and refer patients to a glaucoma disease sub-specialist, when necessary, based on disease progression, treatment complexity, and advanced disease stages.
- Initiation and adjustment of medical therapy.
- Performing simple laser procedures such as YAG peripheral iridotomy.

5.2.8.3 Uveitis

- Diagnose and manage acute anterior uveitis and episcleritis with appropriate referral of patients to sub-specialized care as necessary, particularly in cases of recurrence or inadequate response to initial treatment.
- Referral to subspecialty care for intermediate, posterior, or panuveitis as necessary.

5.2.8.4 Retina and Vitreous Disorders

- Diagnosis and monitoring of diabetic retinopathy, retinal vein occlusion, age-related macular degeneration, and other degenerative or vascular retinal diseases.
- Administration of intravitreal injections (anti-VEGF, steroids, or antibiotics).
- Pan-retinal and focal laser photocoagulation for diabetic retinopathy.

5.2.8.5 Neuro-ophthalmology

- Basic evaluation of optic disc swelling, optic neuropathy, and ocular motility disorders.
- Initial management and referral when subspecialized care is needed.

5.2.8.6 Pediatric Ophthalmology and Strabismus

- Diagnosis and management of amblyopia and refractive errors in children.
- Basic strabismus assessment and non-surgical management (spectacles, prisms, patching).
- Referral for complex strabismus surgery or congenital anomalies requiring subspecialized care.

5.2.8.7 General Surgical Care

- Chalazion incision and curettage.
- Simple eyelid laceration repair.
- Minor lid procedures for trichiasis and entropion/ectropion.
- Enucleation or evisceration in selected low complexity cases.

5.2.9 Prescribe and manage visual aids, including spectacles and contact lenses, while incorporating myopia control strategies; and address associated medical complications.

5.2.10 Provide a variety of ophthalmology surgical procedures based on evidence of focused training and experience (refer to **Section 6**).

5.2.10.1 **Table 1** - Scope of surgical care for a general ophthalmologist

Scope of Care	Core Competencies
Diagnostic and Minor Surgical Procedures	• Corneal or conjunctival foreign body removal • Corneal scraping for culture • Injection of intravitreal medications • Aspiration of aqueous fluid • Use of local anesthetics for minor ophthalmic procedures
Lid and ocular adnexal surgery	• Chalazion incision and curettage • Simple lid surgery for trichiasis, ectropion, and entropion • Repair of simple lid lacerations (superficial or lid margin) • Excision of benign eyelid lesions.- Punctal probing and irrigation • Canthotomy and cantholysis • Tarsorrhaphy
Lens Surgery	• Cataract extraction with or without intraocular lens implantation (including phacoemulsification) • YAG laser posterior capsulotomy
Ocular Surface Surgeries	• Pterygium excision with conjunctival autograft (CAG) • Corneal or scleral laceration repair (uncomplicated) • Conjunctival surgery for benign conditions (pinguecula, conjunctivochalasis). • Corneal diathermy or simple traumatic repair (excluding keratoplasty and refractive surgery)
Pediatric Ophthalmology	• Diagnosis and management of amblyopia and refractive errors in children • Basic strabismus assessment and non-surgical management • Management of common pediatric adnexal conditions and minor surgical procedures - Probing and irrigation for congenital nasolacrimal duct obstruction - Chalazion incision and drainage procedures
Retinal and Vitreous Procedures	• Intravitreal injections (anti-VEGF, antibiotics, steroids) • Retinopexy (laser or cryotherapy) for retinal tears • Pan-retinal or focal photocoagulation for diabetic retinopathy
Glaucoma Surgeries	• YAG laser peripheral iridotomy • Cyclophotocoagulation (when trained)

5.2.11 **Table 2** Lists procedures that require further training if they were not part of an ophthalmologist's residency training curriculum and documented in a surgical logbook.

Scope of Care	Surgical Procedures
Lid and Ocular Adnexal Surgery	• Ptosis repair (levator resection, frontalis sling) • Blepharospasm management and surgery (including botulinum toxin chemodenervation, orbicularis myectomy) • Complex eyelid reconstruction after trauma or tumor excision • Functional or cosmetic blepharoplasty • Advanced lacrimal surgery, including dacryocystorhinostomy (external or endoscopic) • Other minor lid procedures
Ocular Surface Surgeries	• Amniotic membrane transplantation for ocular surface diseases • Corneal grafting procedures (penetrating keratoplasty, lamellar keratoplasty, endothelial keratoplasty) • Refractive corneal surgery (LASIK, PRK, SMILE, phakic IOLs) • Surgery for ocular surface tumors and neoplasia • Complex conjunctival or scleral grafting • Corneal cross-linking
Retinal and Vitreous Procedures	• Pars plana vitrectomy for retinal detachment, vitreous hemorrhage, or macular surgery • Posterior vitreous membranectomy • Scleral buckle surgery • Complex diabetic tractional retinal detachment repair • Intraocular tumor surgery
Glaucoma Procedures	• Trabeculectomy with antimetabolites • Glaucoma drainage device implantation • Complex filtering procedures (including sclerostomy with antimetabolites) • YAG laser trabeculoplasty
Pediatric Surgeries	• Complex strabismus surgery (torsional, vertical, or reoperations) • Pediatric strabismus requiring multiple muscle surgeries • Surgery for nystagmus or restrictive strabismus • Pediatric glaucoma surgery (goniotomy, trabeculotomy) • Pediatric cataract surgery with or without intraocular lens implantation
Neuro-ophthalmology and Orbital Surgery	• Orbital decompression surgery • Surgery for thyroid eye disease • Complex orbital tumor excision • Neurosurgical combined procedures involving optic nerve or orbital apex

6 Specific Learning and Privileging Requirement

- 6.1 Ophthalmologists must acquire clinical privileges for all surgical procedures they intend to practice. The application must be supported by evidence of training, recent experience and a logbook.
 - 6.1.1 An Ophthalmologist providing general ophthalmology care to pediatric patients must acquire age-specific procedure privileges from the healthcare facility's privileging body
 - 6.1.2 An Ophthalmologist providing specialized pediatric ophthalmology care to pediatric patients must be licensed as a Pediatric Ophthalmologist in accordance with the unified Professional Qualification Requirements (PQR).
- 6.2 Ophthalmologists who seek to provide sub-specialized care that falls under an Ophthalmology sub-specialty that is listed in PQR must be licensed in that respective sub-specialty in accordance with the PQR requirements.
- 6.3 Ophthalmologists who seek to provide sub-specialized care that does not fall under an Ophthalmology sub-specialty listed in PQR (such as Ocular Genetics and other similar fields) must be privileged by the healthcare facilities privileging body after providing evidence of certified advanced training and evidence recent experience through a logbook in accordance with the DoH Clinical Privileging standard.
- 6.4 Ophthalmologists who wish to perform non-surgical cosmetic procedures must comply with the DoH standard for healthcare professionals performing non-surgical cosmetic procedures.¹²
- 6.5 Ophthalmologists must acquire the necessary knowledge and skills to safely operate diagnostic and therapeutic devices and equipment including safety handling and troubleshooting.
- 6.6 Ophthalmologists must complete Laser safety training for utilization of laser devices.

7 Exempted from Scope

- 7.1 None.

8 Relevant Reference Documents

No.	Reference Date	Reference Name	Relation Explanation / Coding / Publication Links
1	2025	MOHAP, DoH, DHA and SHA (2025). Unified Healthcare Professional Qualification Requirements, 2025 version	https://www.doh.gov.ae/en/pqr
2	2025	Ministry of Health and Prevention - UAE. 2025. Ministerial Decree No. 51 of the year 2025 regarding modifications of some provisions of the Unified Healthcare professional qualification requirements. mohap.gov.ae	https://mohap.gov.ae/en/references/legislations?category=95987
3	2021	United Arab Emirates. (2021) Ministerial Resolution No. (14) of 2021 on the Patient's Rights & Responsibilities Charter.	Arabic version https://www.doh.gov.ae/ar/about-law-and-legislations English version https://mohap.gov.ae/en/about-us/legal-references
4	2019	United Arab Emirates. (2019) Federal Law No. 8 of 2019 on Medical Products, Pharmacy Profession and Pharmaceutical Establishments	Arabic version https://www.doh.gov.ae/ar/about-law-and-legislations English version https://mohap.gov.ae/en/about-us/legal-references
5	2019	United Arab Emirates. (2019) Article 24 of Federal Law No. (5) of 2019 on Regulating the Practice of Human Medicine and its Executive Regulations	Arabic version https://www.doh.gov.ae/ar/about-law-and-legislations English version https://mohap.gov.ae/en/about-us/legal-references
6	2019	United Arab Emirates. (2019) Federal Law No. (2) of 2019 Concerning the Use of Information and Communication Technology (ICT) in Health Fields	Arabic version https://www.doh.gov.ae/ar/about-law-and-legislations English version https://mohap.gov.ae/en/about-us/legal-references

No.	Reference Date	Reference Name	Relation Explanation / Coding / Publication Links
7	2016	United Arab Emirates. (2016) Federal Decree-Law No. (4) of 2016 on Medical Liability	Arabic version https://www.doh.gov.ae/ar/about-law-and-legislations English version https://mohap.gov.ae/en/about-us/legal-references
8	2017	Ministerial Resolution No. (1448) of 2017 on Adoption of Code of Ethics and Professional Conduct for Health Professionals	Arabic version https://mohap.gov.ae/app_content/legislations/php-law-ar-64/mobile/index.html English version https://mohap.gov.ae/app_content/legislations/php-law-en-64/mobile/index.html
9	2014	United Arab Emirates. (2014) Federal Law on the Prevention of Communicable Disease No. (14) of 2014 and its Executive Regulations	Arabic version https://www.doh.gov.ae/ar/about-law-and-legislations English version https://mohap.gov.ae/en/about-us/legal-references
10	2023	Administrative decision no. (19) of 2023 relating to occupational Safety and health & labour accommodations	https://u.ae/-/media/Documents-2nd-half-2023/Administrative-Decision-No-19-of-2023-Relating-to-Occupational-Safety-and-Health--Labour-Accommodation.pdf
11	2023	Department of Health – Abu Dhabi, 2023. Standard for Clinical Privileging of Healthcare Workforce and Clinical Services. DOH/HCWS/SD/CLNPRVLG-CS/2, Version 2.	https://www.doh.gov.ae/en/resources/standards
12	2024	DoH. (2024) Standard for Healthcare Professionals Performing Non-Surgical Cosmetic Procedures	https://www.doh.gov.ae/en/resources/standards

No.	Reference Date	Reference Name	Relation Explanation / Coding / Publication Links
13	2024	DoH, MOHAP, and SHA. (2024) Healthcare Workforce Bioethics Guidelines. DOH/GD/HCWBIOETHICSGD/V1/2024	https://www.doh.gov.ae/en/resources/guidelines
14	2024	DoH. 2024. Patient Consent Standard. DOH/ST/PC/HFS/V1/2024	https://www.doh.gov.ae/en/resources/standards
15	2024	DoH. 2024. Healthcare Workforce Governance Template Policy.	https://www.doh.gov.ae/en/resources/policies
16	2024	DoH. 2024. Abu Dhabi Healthcare Information and Cyber Security Standard. DOH/SD/ICSO/ADHICS/V2/2024	https://www.doh.gov.ae/en/resources/standards
17	2020	DoH. 2020. Standard on Human Subjects Research. DOH/ QD/SD/HSR/0.9	https://www.doh.gov.ae/en/resources/policies
18	2020	DoH. 2020. Policy on Digital Health. DOH/STR/POL/0.9/2020	https://www.doh.gov.ae/en/resources/policies
19	2019	DoH. 2019. Oral Health Policy for the Emirate of Abu Dhabi	https://www.doh.gov.ae/en/resources/policies
20	2017	DoH. 2017. Policy for Quality and Patient Safety. Policy/Quality and Patient	https://www.doh.gov.ae/en/resources/policies
21	2017	DoH. 2017. Healthcare Professional Manual.	https://www.doh.gov.ae/en/resources/policies
22	2008	DoH. 2008. Patient Rights and Responsibilities. PPR/HCP/P0030/08	https://www.doh.gov.ae/en/resources/policies
23	2022	DoH. 2022. Circular USO/29/2022 Abu Dhabi Healthcare Sector Cyberlearning Program.	https://www.doh.gov.ae/en/resources/Circulars
24	2025	DoH. 2025. Standard for the Issuance and Attestation of Sick Leave Certificates. DoH/HWCS/SD/IASLP/V3.	https://www.doh.gov.ae/en/resources/standards

No.	Reference Date	Reference Name	Relation Explanation / Coding / Publication Links
25	2025	DoH. 2025. Responsible Artificial Intelligence AI Standard. DoH/ST/DDGO/RAI/V1/2025	https://www.doh.gov.ae/en/resources/standards
26	2024	DoH. 2024. Inherited Retinal Disorders Genetic Testing and Management Guideline.	https://www.doh.gov.ae/en/resources/guidelines
27	2023	Royal College of Physicians and Surgeons of Canada, 2023. Competition of Ophthalmology. Version 1	www.royalcollege.ca
28	2023	Royal College Of Physicians And Surgeons Of Canada, 2023. Pathway To Competence In Ophthalmology (2023)	www.royalcollege.ca
29	2014	Saudi Commission For Health Specialties. 2014. Saudi Board Ophthalmology Curriculum	www.scfhs.org.sa
30	n.d.	Epworth HealthCare. (n.d.) Ophthalmology – Scope of Practice. (Available on www.epworth.org.au , accessed August 2025)	https://www.epworth.org.au/-/media/project/epworth/epworthweb/documents/for-specialists/scope-of-clinical-practice/new-folder/ophthalmology---sop-epworth-healthcare.pdf
31	n.d.	Kellogg Eye Center – Michigan Medicine (n.d.) Ophthalmology Scope of Practice (available on www.medicine.umich.edu , accessed August 2025)	https://medicine.umich.edu/dept/ophthalmology
32	2025	ACGME 2025. ACGME Program Requirements for Graduate Medical Education in Ophthalmology	https://www.acgme.org/globalassets/pfassets/programrequirements/2026-prs/240_ophthalmology_2026_tcc

No.	Reference Date	Reference Name	Relation Explanation / Coding / Publication Links
33	n.d.	Columbia University Irving Medical Center. (n.d.) Columbia Digital Reference of Ophthalmology (online, www.vagelos.columbia.edu , accessed September 2025)	https://www.vagelos.columbia.edu/departments-centers/ophthalmology/education/digital-reference-ophthalmology
34	n.d.	American College of Surgeons. N.d. Ophthalmology. (online, available at www.facs.org , accessed September 2025)	https://www.facs.org/for-medical-professionals/education/programs/so-you-want-to-be-a-surgeon/section-iii-surgical-specialties/ophthalmology/
35	2025	DoH. 2025. Scope of Practice for Allied Health in Ophthalmology. DOH/HWS/SPAHO/V2/2024	https://www.doh.gov.ae/en/resources/scope-of-practice