A fellow’s life

This was it! I had picked the branch of oculoplastics, 
Along came dacryology and facial aesthetics. 
And thus, my journey into the unknown began, 
The things I learnt, in such a short span!

When facing a patient with proptosis, 
My mind always raced to a diagnosis. 
But it's always a dilemma, you cannot deny! 
Should I get a CT, or wait, maybe an MRI?

And then there's the case of a hemi-facial twitch. 
The treatment is simple; but here's the glitch: 
What should I inject? Should it be Botox? 
Or perhaps Dysport? Or maybe Neuronox?

From the eyes, it seems, I had descended into the nose. 
This wasn’t a part of the ‘ophthalmology’ I chose. 
I often wondered if I could ever cope, 
With operating while holding a nasal endoscope!

I fought through the DCR, armed with a punch, 
Removing bits of bone; louder grew the crunch! 
And then, in my mind, began the debate: 
Should I use MMC? Should I intubate?

Congenital ptosis is the other tricky thing. 
The tricky part here is what do I use for a sling? 
It's the material that we always seem to bemoan 
Suture or fascia lata? Or perhaps silicone?

In comes a blind eye for an evisceration, 
And brings with it, another delicate question. 
Which implant would you pick? It's choices galore! 
Ceramic or acrylic? Or wait, maybe Medpore?

There's one thing I have come to realize, 
That this branch never ceases to surprise. 
Not just the eyes, but the entire face, 
Is now what we have come to embrace.

From blephs, fillers and the droopy eye, 
To basals, melanomas and the benign stye. 
One thing I'm sure of, despite often falling; 
That oculoplastics is truly my calling!

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