
SENATE BILL 6038

State of Washington

63rd Legislature

2014 Regular Session

By Senators Becker, Rivers, Cleveland, Mullet, Bailey, Hobbs, Pedersen, Frockt, Angel, Ericksen, Tom, Conway, and Kohl-Welles

Read first time 01/14/14. Referred to Committee on Health Care .

1 AN ACT Relating to preserving the use of hydrocodone products by
2 licensed optometrists in Washington state; amending RCW 18.53.010; and
3 creating a new section.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** The legislature finds that the use of
6 hydrocodone products by licensed optometrists in Washington state has
7 benefited patients suffering from acute pain associated with injuries
8 to the eye for over ten years. The legislature further finds that
9 while there are legitimate concerns regarding the propensity for
10 addiction to these and other pain medications, the conservative
11 prescribing habits of our state's licensed optometrists and the limited
12 duration of use of seven days are sufficient safeguards against the
13 overuse of hydrocodone products by the patients of this group of
14 providers. It is therefore the intent of the legislature to preserve
15 the ability of licensed optometrists in Washington state to use
16 hydrocodone products to treat pain, regardless of potential action by
17 agencies of the federal government to reclassify these products as
18 Schedule II narcotics.

1 **Sec. 2.** RCW 18.53.010 and 2013 c 19 s 2 are each amended to read
2 as follows:

3 (1) The practice of optometry is defined as the examination of the
4 human eye, the examination and ascertaining any defects of the human
5 vision system and the analysis of the process of vision. The practice
6 of optometry may include, but not necessarily be limited to, the
7 following:

8 (a) The employment of any objective or subjective means or method,
9 including the use of drugs, for diagnostic and therapeutic purposes by
10 those licensed under this chapter and who meet the requirements of
11 subsections (2) and (3) of this section, and the use of any diagnostic
12 instruments or devices for the examination or analysis of the human
13 vision system, the measurement of the powers or range of human vision,
14 or the determination of the refractive powers of the human eye or its
15 functions in general; and

16 (b) The prescription and fitting of lenses, prisms, therapeutic or
17 refractive contact lenses and the adaption or adjustment of frames and
18 lenses used in connection therewith; and

19 (c) The prescription and provision of visual therapy, therapeutic
20 aids, and other optical devices; and

21 (d) The ascertainment of the perceptive, neural, muscular, or
22 pathological condition of the visual system; and

23 (e) The adaptation of prosthetic eyes.

24 (2)(a) Those persons using topical drugs for diagnostic purposes in
25 the practice of optometry shall have a minimum of sixty hours of
26 didactic and clinical instruction in general and ocular pharmacology as
27 applied to optometry, as established by the board, and certification
28 from an institution of higher learning, accredited by those agencies
29 recognized by the United States office of education or the council on
30 postsecondary accreditation to qualify for certification by the
31 optometry board of Washington to use drugs for diagnostic purposes.

32 (b) Those persons using or prescribing topical drugs for
33 therapeutic purposes in the practice of optometry must be certified
34 under (a) of this subsection, and must have an additional minimum of
35 seventy-five hours of didactic and clinical instruction as established
36 by the board, and certification from an institution of higher learning,
37 accredited by those agencies recognized by the United States office of

1 education or the council on postsecondary accreditation to qualify for
2 certification by the optometry board of Washington to use drugs for
3 therapeutic purposes.

4 (c) Those persons using or prescribing drugs administered orally
5 for diagnostic or therapeutic purposes in the practice of optometry
6 shall be certified under (b) of this subsection, and shall have an
7 additional minimum of sixteen hours of didactic and eight hours of
8 supervised clinical instruction as established by the board, and
9 certification from an institution of higher learning, accredited by
10 those agencies recognized by the United States office of education or
11 the council on postsecondary accreditation to qualify for certification
12 by the optometry board of Washington to administer, dispense, or
13 prescribe oral drugs for diagnostic or therapeutic purposes.

14 (d) Those persons administering epinephrine by injection for
15 treatment of anaphylactic shock in the practice of optometry must be
16 certified under (b) of this subsection and must have an additional
17 minimum of four hours of didactic and supervised clinical instruction,
18 as established by the board, and certification from an institution of
19 higher learning, accredited by those agencies recognized by the United
20 States office of education or the council on postsecondary
21 accreditation to qualify for certification by the optometry board to
22 administer epinephrine by injection.

23 (e) Such course or courses shall be the fiscal responsibility of
24 the participating and attending optometrist.

25 (f)(i) All persons receiving their initial license under this
26 chapter on or after January 1, 2007, must be certified under (a), (b),
27 (c), and (d) of this subsection.

28 (ii) All persons licensed under this chapter on or after January 1,
29 2009, must be certified under (a) and (b) of this subsection.

30 (iii) All persons licensed under this chapter on or after January
31 1, 2011, must be certified under (a), (b), (c), and (d) of this
32 subsection.

33 (3) The board shall establish a list of topical drugs for
34 diagnostic and treatment purposes limited to the practice of optometry,
35 and no person licensed pursuant to this chapter shall prescribe,
36 dispense, purchase, possess, or administer drugs except as authorized
37 and to the extent permitted by the board.

1 (4) The board must establish a list of oral Schedule III through V
2 controlled substances and any oral legend drugs, with the approval of
3 and after consultation with the pharmacy quality assurance commission.
4 No person licensed under this chapter may use, prescribe, dispense,
5 purchase, possess, or administer these drugs except as authorized and
6 to the extent permitted by the board. No optometrist may use,
7 prescribe, dispense, or administer oral corticosteroids.

8 (a) The board, with the approval of and in consultation with the
9 pharmacy quality assurance commission, must establish, by rule,
10 specific guidelines for the prescription and administration of drugs by
11 optometrists, so that licensed optometrists and persons filling their
12 prescriptions have a clear understanding of which drugs and which
13 dosages or forms are included in the authority granted by this section.

14 (b) An optometrist may not:

15 (i) Prescribe, dispense, or administer a controlled substance for
16 more than seven days in treating a particular patient for a single
17 trauma, episode, or condition or for pain associated with or related to
18 the trauma, episode, or condition; or

19 (ii) Prescribe an oral drug within ninety days following ophthalmic
20 surgery unless the optometrist consults with the treating
21 ophthalmologist.

22 (c) If treatment exceeding the limitation in (b)(i) of this
23 subsection is indicated, the patient must be referred to a physician
24 licensed under chapter 18.71 RCW.

25 (d) The prescription or administration of drugs as authorized in
26 this section is specifically limited to those drugs appropriate to
27 treatment of diseases or conditions of the human eye and the adnexa
28 that are within the scope of practice of optometry. The prescription
29 or administration of drugs for any other purpose is not authorized by
30 this section.

31 (5) The board shall develop a means of identification and
32 verification of optometrists certified to use therapeutic drugs for the
33 purpose of issuing prescriptions as authorized by this section.

34 (6) Nothing in this chapter may be construed to authorize the use,
35 prescription, dispensing, purchase, possession, or administration of
36 any Schedule I or II controlled substance, except hydrocodone
37 combination products. The provisions of this subsection must be
38 strictly construed.

1 (7) With the exception of the administration of epinephrine by
2 injection for the treatment of anaphylactic shock, no injections or
3 infusions may be administered by an optometrist.

4 (8) Nothing in this chapter may be construed to authorize
5 optometrists to perform ophthalmic surgery. Ophthalmic surgery is
6 defined as any invasive procedure in which human tissue is cut,
7 ablated, or otherwise penetrated by incision, injection, laser,
8 ultrasound, or other means, in order to: Treat human eye diseases;
9 alter or correct refractive error; or alter or enhance cosmetic
10 appearance. Nothing in this chapter limits an optometrist's ability to
11 use diagnostic instruments utilizing laser or ultrasound technology.
12 Ophthalmic surgery, as defined in this subsection, does not include
13 removal of superficial ocular foreign bodies, epilation of misaligned
14 eyelashes, placement of punctal or lacrimal plugs, diagnostic dilation
15 and irrigation of the lacrimal system, orthokeratology, prescription
16 and fitting of contact lenses with the purpose of altering refractive
17 error, or other similar procedures within the scope of practice of
18 optometry.

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