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## Health Care & Wellness Committee

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### SSB 5389

**Brief Description:** Concerning the practice of optometry.

**Sponsors:** Senate Committee on Health & Long Term Care (originally sponsored by Senators Cleveland, Rivers, Robinson, Van De Wege, Conway, Holy, Schoesler, Wilson, L., Lovick, Randall and Wilson, C.).

#### Brief Summary of Substitute Bill

- Modifies the scope of practice for optometry, enumerates the advanced procedures an optometrist may perform with a license endorsement, and specifies procedures that an optometrist may not perform.
- Authorizes the Board of Optometry to provide rulemaking regarding the allowable procedures and their educational requirements for the practice of optometry.
- Allows the State Health Officer to authorize optometrists to administer inoculations for systemic health reasons during public health emergencies.

**Hearing Date:** 3/24/23

**Staff:** Kim Weidenaar (786-7120).

#### **Background:**

##### Optometry Scope of Practice.

The practice of optometry is defined as the examination of the human eye, the examination and ascertaining any defects of the human vision system, and the analysis of the process of vision.

The practice of optometry includes:

- the employment of any objective or subjective means or method, including the use of

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drugs, for diagnostic and therapeutic purposes, the use of any diagnostic instruments or devices for the examination or analysis of the human vision system, the measurement of the powers or range of human vision, or the determination of the refractive powers of the human eye or its functions in general;

- the prescription and fitting of lenses, prisms, therapeutic or refractive contact lenses and the adaptation or adjustment of frames and lenses;
- the prescription and provision of visual therapy, therapeutic aids, and other optical devices;
- the ascertainment of the perceptive, neural, muscular, or pathological condition of the visual system; and
- the adaptation of prosthetic eyes.

In order to use topical drugs for diagnostic purposes, an optometrist must have at least 60 hours of didactic and clinical instruction in general and ocular pharmacology for optometry and certification from an institution of higher learning. To prescribe topical drugs, the optometrist must be certified to use topical drugs and have an additional 75 hours of didactic and clinical instruction. To use or prescribe oral drugs for diagnostic or therapeutic purposes, the optometrist must be certified to prescribe topical drugs and have an additional 16 hours of didactic and eight hours of supervised clinical instruction and be certified by an institution of higher education to administer, dispense, or prescribe drugs.

Optometrists are prohibited from prescribing, dispensing, or administering oral corticosteroids and from prescribing an oral drug within 90 days following ophthalmic surgery, unless the optometrist consults with the treating ophthalmologist. Except for the administration of Epinephrine by injection for anaphylactic shock, no injections or infusions may be administered by an optometrist.

#### Board of Optometry.

The Board of Optometry (Board) consists of three members of the examining committee for optometry and two additional optometrists and one consumer member appointed by the Governor. The optometrist members must be Washington residents, must have been in active practice as a licensed optometrist in Washington for at least four years immediately preceding appointment, and may not have any connection with any optical supply business. The Board must develop and administer or approve a licensure examination. The Board must adopt rules and regulations to promote safety, protection, and the welfare of the public; to carry out the Board's purpose; to aid the Board in the performance of its powers and duties; and to govern the practice of optometry.

#### Sunrise Review.

In 2021 the Department of Health (DOH) conducted a sunrise review to expand the scope of practice for optometrists in Washington. The proposal made changes to the scope of practice for optometrists including clarifying language regarding what is and is not included in the scope of practice for optometry; granting the Board greater authority over the practice of optometry; expanding the scope of medications and therapeutic procedures an optometrist may prescribe or perform; granting the Board authority for rule-making regarding educational standards; and

specifying in an exclusive list which procedures are not considered the practice of optometry. In the final report, the DOH found that aspects of the proposal meet the sunrise criteria, but that the proposal was too broad and did not adequately describe allowed procedures and issued a number of recommendations for ensure patient safety.

### **Summary of Bill:**

#### Scope of Practice.

The practice of optometry is expanded to specifically include the following in addition to the existing procedures and services:

- the prescription and fitting of contact lenses for altering refractive error or to treat eye disease;
- the prescription and provision of neuro-optometry rehabilitation, subnormal vision therapy, and orthoptics;
- ordering diagnostic lab or imaging tests including finger-stick testing and collecting samples for culturing;
- dispensing of medication samples to initiate treatment; and
- removal of nonpenetrating foreign bodies by any means, debridement of tissue by any means, epilation of misaligned eyelashes, placement of punctal or lacrimal plugs, including devices containing pharmaceutical agents implanted in the lacrimal system, dilation and irrigation of the lacrimal system, light therapy, and placement of biologic membranes.

#### *Advanced Procedures.*

With a license endorsement from the Board of Optometry (Board), the practice of optometry may include:

- common complication of the lids, lashes, and lacrimal systems;
- chalazion management, including injection and excision;
- injections, including intramuscular injections of epinephrine and subconjunctival and subcutaneous injections of medications;
- management of lid lesions, including intralesional injection of medications;
- preoperative and postoperative care related to these procedures;
- use of topical and injectable anesthetics;
- suturing of the eyelid; and
- eyelid surgery, excluding any cosmetic surgery or surgery requiring the use of general anesthesia.

To receive a license endorsement, a licensed optometrist must:

- successfully complete postgraduate courses as designated by the Board. Any course offered by an accredited institution of higher education and approved by the Board to qualify for an endorsement must contain supervised hands-on experience with live patients or be supplemented by a residency, internship, or other supervised program that offers hands-on experience; and
- successfully complete a national exam for advanced procedures, including the lasers and

surgical procedures exam, injections skill exam, or other equivalent exam as designated by the Board.

Upon completion of these requirements, proof of training must be submitted to the Board for approval. No optometrist may perform the advanced procedures until the optometrist has received confirmation of the endorsement in writing.

*Prescription and Use of Pharmaceutical Agents.*

Any optometrist authorized by the Board may purchase diagnostic pharmaceutical agents and is authorized to prescribe therapeutic pharmaceutical agents in the practice of optometry.

Optometrists authorized by the Optometry Board to purchase pharmaceutical agents must obtain them from licensed wholesalers or pharmacists, using prescriptions or chart orders placed in the same or similar manner as any physician or other practitioner. Diagnostic and therapeutic pharmaceutical agents are any prescription or nonprescription drug delivered via any route of administration used or prescribed for the diagnosis, treatment, or mitigation of abnormal conditions and pathology of the human eye and its adnexa. Diagnostic and therapeutic pharmaceutical agents do not include Schedule I and Schedule II drugs, except for hydrocodone combination products. The prohibitions on prescribing, dispensing, or administering oral corticosteroids or prescribing an oral drug within 90 days of ophthalmic surgery are removed.

In a public health emergency, the State Health Officer may authorize optometrists to administer inoculations for systemic health reasons.

*Prohibited Procedures.*

The practice of Optometry does not include:

- performing retinal laser procedures, laser-assisted in situ keratomileus, photorefractive keratectomy, laser epithelial keratomileusis, or any forms of refractive surgery, other than light adjustable lens procedures;
- penetrating keratoplasty, corneal transplant, or lamellar keratoplasty;
- administering general anesthesia;
- performing surgery with general anesthesia;
- providing laser or nonlaser injections into the vitreous chamber of the eye to treat any macular or retinal disease;
- performing surgery related to removal of the eye;
- performing surgery requiring a full thickness incision or excision of the cornea or sclera other than paracentesis in an emergency situation requiring immediate reduction of the pressure inside of the eye;
- performing surgery requiring incision of the iris and ciliary body, including iris diathermy or cryotherapy;
- performing surgery requiring incision of the vitreous or retina;
- performing surgical extraction of the crystalline lens;
- performing surgical intraocular implants;
- performing incisional or excisional surgery of the extraocular muscles;
- performing surgery of the eyelid for malignancies or for incisional cosmetic or mechanical

- repair of blepharochalasis, ptosis, or tarsorrhaphy;
- performing surgery of the bony orbit, including orbital implants;
- performing incisional or excisional surgery of the lacrimal system other than lacrimal probing or related procedures;
- performing surgery requiring full thickness conjunctivoplasty with graft or flap;
- performing any surgical procedure that does not provide for the correction and relief of ocular abnormalities;
- providing an incision into the eyeball;
- providing retrobulbar or intraorbital injection; or
- performing pterygium surgery.

Board of Optometry.

A full record of the Optometry Board's proceedings must be kept in the Office of the Board and must be open to inspection at all reasonable times. The administrative regulations the Board must adopt must include the classification and licensure of optometrists by examination or credentials, retirement of a license, and reinstatement of a license. The Board shall have the authority to provide rule-making regarding the allowable procedures and their educational requirements for optometry. The Board must keep a registrar containing the name, address, license number, email, and phone number of every licensed optometrist to the best of the Board's ability.

**Appropriation:** None.

**Fiscal Note:** Available.

**Effective Date:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.