

Dear Representative,

It has come to my and my colleagues' attention that you may be receiving misleading information as you go through the process of decision making on S.64.

Allow me to reiterate that you are not alone in your frustrations amongst legislators all over the country. The Optometry lobby has been aggressive at seeking to expand the scope of practice of optometrists to include surgery, especially in the past five years. And we know that they are already looking to expand beyond what is in S.64.

Here are some important points of clarification:

1. There are 25 US Optometry schools who are members of the Association of Schools and Colleges of Optometry (this includes a school in Puerto Rico)
2. Out of 50 states there are **ONLY TWELVE** (Alaska, Arkansas, Colorado, Kentucky, Indiana, Louisiana, Mississippi, Montana, Oklahoma, S Dakota, Wyoming) that allow optometrists to perform all of the scalpel and laser surgeries in S.64
 - a. There are 6 states (Georgia, Idaho, New Mexico, Oregon, Tennessee and Washington) that allow optometrists to perform scalpel surgeries only (no laser)
 - b. There is 1 state (Virginia) that allows optometrists to perform laser surgeries only (no scalpel)
3. Out of 25 Optometry schools there are **ONLY THREE** (Kentucky, Indiana, and Oklahoma) which can teach all of the scalpel and laser surgeries in S.64 on real live human beings. Optometry students in the 22 other schools would have to go to one of those three to obtain live human training for all of the S.64 surgeries

We are hearing that Committee members are being told that there are over 20 states which allow the surgeries in S.64. This is misleading because in reality there are only 12 that incorporate all of them. The other 7, as listed above, are limited to either scalpel or laser surgeries. The inconsistency of what is allowed from one state to the next reflects the challenges that legislators face when trying to make decisions on eye surgery and on which ones are more “dangerous” than others.

We are hearing that Committee members are being told that the surgeries being requested in S.64 are “only around” the eye and not “on” or “in” the eye. As has been mentioned in testimony, surgery around the eye carries the risk of blindness due to possible perforation of the eyeball. An injection of medicine or anesthetic to the skin around the eye can cause a stroke of the eye leading to blindness. The injections listed in S.64 “including into the subconjunctival space” are unequivocally injections that would be allowed on the white part of the EYEBALL. The laser surgeries listed in S.64 are unequivocally surgeries **INSIDE** the EYEBALL.

If you are being swayed by arguments that passing increased scope legislation will attract optometrists to our State, please recall what I said in testimony. Laser equipment costs \$40,000-\$60,000. Maintaining scalpel equipment requires a sterilizer. All lesions removed from eyelids must be sent for a pathology review, no matter what they look like. It is wrong to use scope expansion as a carrot to recruit optometrists who we know are

not appropriately trained to perform the surgeries in S.64. We sacrifice our safe surgery standards and compromise our ethics by doing so.

If you are not 100% sure that allowing optometrists to perform surgery is the right thing to do, then you should not vote in favor of S64. Yes, it is confusing. Yes, it is frustrating. But there are good reasons why only a handful of states allow all of the surgeries in S.64. As they mentioned numerous times in their testimony, optometrists are primary eye care providers. They should not be performing eye surgery.

I am more than happy to answer any questions you have on this difficult issue. Please feel free to contact me via e-mail or phone (610)585-2605.

Respectfully,
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President
Vermont Ophthalmologic Society