
SUBSTITUTE SENATE BILL 5389

State of Washington

68th Legislature

2023 Regular Session

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

READ FIRST TIME 02/17/23.

1 AN ACT Relating to the practice of optometry, including expanding
2 the optometric scope of practice to include specified procedures not
3 including the use of lasers, requiring a licensing endorsement to
4 perform these procedures that is based upon mandated educational
5 criteria and hands-on training, and amending the board of optometry's
6 operating procedures; and amending RCW 18.53.010, 18.54.050, and
7 18.54.070.

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

9 **Sec. 1.** RCW 18.53.010 and 2015 c 113 s 1 are each amended to
10 read as follows:

11 (1) The practice of optometry is defined as the examination of
12 the human eye, the examination and ascertaining any defects of the
13 human vision system, and the analysis of the process of vision. The
14 practice of optometry may include, but not necessarily be limited to,
15 the following:

16 (a) The employment of any objective or subjective means or
17 method, including the use of drugs, for diagnostic and therapeutic
18 purposes by those licensed under this chapter and who meet the
19 requirements of subsections ~~((2))~~ (4) and ~~((3))~~ (6) of this
20 section, and the use of any diagnostic instruments or devices for the
21 examination or analysis of the human vision system, the measurement

1 of the powers or range of human vision, or the determination of the
2 refractive powers of the human eye or its functions in general;
3 (~~and~~)

4 (b) The prescription and fitting of lenses, prisms, therapeutic
5 or refractive contact lenses and the adaption or adjustment of frames
6 and lenses used in connection therewith; (~~and~~)

7 (c) The prescription and fitting of contact lenses for the
8 purpose of altering refractive error or to treat eye disease;

9 (d) The prescription and provision of visual therapy, neuro-
10 optometry rehabilitation, therapeutic aids, subnormal vision therapy,
11 orthoptics, and other optical devices; (~~and~~

12 ~~(d)~~) (e) The ascertainment of the perceptive, neural, muscular,
13 or pathological condition of the visual system; (~~and~~

14 ~~(e)~~) (f) The adaptation of prosthetic eyes;

15 (g) Ordering necessary diagnostic lab or imaging tests including,
16 but not limited to, finger-stick testing and collecting samples for
17 culturing;

18 (h) Dispensing of medication samples to initiate treatment is
19 permitted; and

20 (i) Removal of nonpenetrating foreign bodies by any means,
21 debridement of tissue by any means, epilation of misaligned
22 eyelashes, placement of punctal or lacrimal plugs, including devices
23 containing pharmaceutical agents implanted in the lacrimal system,
24 dilation and irrigation of the lacrimal system, light therapy, and
25 placement of biologic membranes.

26 (2) (a) The practice of optometry may include the following
27 advanced procedures:

28 (i) Common complication of the lids, lashes, and lacrimal
29 systems;

30 (ii) Chalazion management, including injection and excision;

31 (iii) Injections, including intramuscular injections of
32 epinephrine and subconjunctival and subcutaneous injections of
33 medications;

34 (iv) Management of lid lesions, including intralesional injection
35 of medications;

36 (v) Preoperative and postoperative care related to these
37 procedures;

38 (vi) Use of topical and injectable anesthetics;

39 (vii) Suturing of the eyelid; and

1 (viii) Eyelid surgery, excluding any cosmetic surgery or surgery
2 requiring the use of general anesthesia.

3 (b) An optometrist shall not perform any advanced procedures
4 listed in this subsection until he or she receives a license
5 endorsement issued by the optometry board. The board may not issue an
6 endorsement unless the licensed optometrist meets the educational,
7 training, and competence criteria set forth in this section.

8 (3) The practice of optometry does not include:

9 (a) Performing retinal laser procedures, laser-assisted in situ
10 keratomileus, photorefractive keratectomy, laser epithelial
11 keratomileusis, or any forms of refractive surgery, other than light
12 adjustable lens procedures;

13 (b) Penetrating keratoplasty, corneal transplant, or lamellar
14 keratoplasty;

15 (c) Administering general anesthesia;

16 (d) Performing surgery with general anesthesia;

17 (e) Providing laser or nonlaser injections into the vitreous
18 chamber of the eye to treat any macular or retinal disease;

19 (f) Performing surgery related to the removal of the eye from a
20 living human being;

21 (g) Performing surgery requiring a full thickness incision or
22 excision of the cornea or sclera other than paracentesis in an
23 emergency situation requiring immediate reduction of the pressure
24 inside of the eye;

25 (h) Performing surgery requiring incision of the iris and ciliary
26 body, including iris diathermy or cryotherapy;

27 (i) Performing surgery requiring incision of the vitreous or
28 retina;

29 (j) Performing surgical extraction of the crystalline lens;

30 (k) Performing surgical intraocular implants;

31 (l) Performing incisional or excisional surgery of the
32 extraocular muscles;

33 (m) Performing surgery of the eyelid for malignancies or for
34 incisional cosmetic or mechanical repair of blepharochalasis, ptosis,
35 or tarsorrhaphy;

36 (n) Performing surgery of the bony orbit, including orbital
37 implants;

38 (o) Performing incisional or excisional surgery of the lacrimal
39 system other than lacrimal probing or related procedures;

1 (p) Performing surgery requiring full thickness conjunctivoplasty
2 with graft or flap;

3 (q) Performing any surgical procedure that does not provide for
4 the correction and relief of ocular abnormalities;

5 (r) Providing an incision into the eyeball;

6 (s) Providing retrobulbar or intraorbital injection; or

7 (t) Performing pterygium surgery.

8 (4)(a) Those persons using topical and oral drugs for diagnostic
9 and therapeutic purposes in the practice of optometry shall have a
10 minimum of ((~~sixty~~)) 60 hours of didactic and clinical instruction in
11 general and ocular pharmacology as applied to optometry, as
12 established by the optometry board, and certification from an
13 institution of higher learning, accredited by those agencies
14 recognized by the United States office of education or the council on
15 postsecondary accreditation to qualify for certification by the
16 optometry board of Washington to use drugs for diagnostic and
17 therapeutic purposes.

18 (b) Those persons using or prescribing topical drugs for
19 therapeutic purposes in the practice of optometry must be certified
20 under (a) of this subsection, and must have an additional minimum of
21 ((~~seventy-five~~)) 75 hours of didactic and clinical instruction as
22 established by the optometry board, and certification from an
23 institution of higher learning, accredited by those agencies
24 recognized by the United States office of education or the council on
25 postsecondary accreditation to qualify for certification by the
26 optometry board of Washington to use drugs for therapeutic purposes.

27 (c) Those persons using or prescribing drugs administered orally
28 for diagnostic or therapeutic purposes in the practice of optometry
29 shall be certified under (b) of this subsection, and shall have an
30 additional minimum of ((~~sixteen~~)) 16 hours of didactic and eight
31 hours of supervised clinical instruction as established by the
32 optometry board, and certification from an institution of higher
33 learning, accredited by those agencies recognized by the United
34 States office of education or the council on postsecondary
35 accreditation to qualify for certification by the optometry board of
36 Washington to administer, dispense, or prescribe oral drugs for
37 diagnostic or therapeutic purposes.

38 (d) Those persons administering epinephrine by injection for
39 treatment of anaphylactic shock in the practice of optometry must be
40 certified under (b) of this subsection and must have an additional

1 minimum of four hours of didactic and supervised clinical
2 instruction, as established by the optometry board, and certification
3 from an institution of higher learning, accredited by those agencies
4 recognized by the United States office of education or the council on
5 postsecondary accreditation to qualify for certification by the
6 optometry board to administer epinephrine by injection.

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

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

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

15 ~~(iii) All persons licensed under this chapter on or after January
16 1, 2011, must be certified under (a), (b), (c), and (d) of this
17 subsection.~~

18 ~~(3))~~ (5) (a) To receive a license endorsement to perform the
19 advanced procedures listed in this section, a licensed optometrist
20 must:

21 (i) Successfully complete postgraduate courses as designated by
22 the optometry board that provide adequate training on those
23 procedures. Any course that is offered by an institution of higher
24 education accredited by those agencies recognized by the United
25 States office of education or the council on postsecondary
26 accreditation and approved by the optometry board to qualify for an
27 endorsement to perform advanced procedures must contain supervised
28 hands-on experience with live patients, or be supplemented by a
29 residency, internship, or other supervised program that offers hands-
30 on experience with live patients; and

31 (ii) Successfully complete a national examination for advanced
32 procedures, including the lasers and surgical procedures examination,
33 injections skill examination, or other equivalent examination as
34 designated by the optometry board.

35 (b) Upon completion of the above listed requirements, proof of
36 training shall be submitted to the optometry board for approval. No
37 optometrist may perform the advanced procedures listed in subsection
38 (2) of this section until they have received confirmation of the
39 endorsement in writing.

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

6 (~~(4)~~) (7) The optometry board must establish a list of oral
7 Schedule III through V controlled substances and any oral legend
8 drugs, with the approval of and after consultation with the pharmacy
9 quality assurance commission. The optometry board may include
10 Schedule II hydrocodone combination products consistent with
11 subsection (~~(6)~~) (9) of this section. No person licensed under this
12 chapter may use, prescribe, dispense, purchase, possess, or
13 administer these drugs except as authorized and to the extent
14 permitted by the optometry board. (~~(No optometrist may use,~~
15 ~~prescribe, dispense, or administer oral corticosteroids.)~~)

16 (a) The optometry board, with the approval of and in consultation
17 with the pharmacy quality assurance commission, must establish, by
18 rule, specific guidelines for the prescription and administration of
19 drugs by optometrists, so that licensed optometrists and persons
20 filling their prescriptions have a clear understanding of which drugs
21 and which dosages or forms are included in the authority granted by
22 this section.

23 (b) An optometrist may not (~~(~~
24 ~~(i) Prescribe~~) prescribe, dispense, or administer a controlled
25 substance for more than seven days in treating a particular patient
26 for a single trauma, episode, or condition or for pain associated
27 with or related to the trauma, episode, or condition (~~(~~
28 ~~(ii) Prescribe an oral drug within ninety days following~~
29 ~~ophthalmic surgery unless the optometrist consults with the treating~~
30 ~~ophthalmologist)~~).

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

34 (d) The prescription or administration of drugs as authorized in
35 this section is specifically limited to those drugs appropriate to
36 treatment of diseases or conditions of the human eye and the adnexa
37 that are within the scope of practice of optometry. The prescription
38 or administration of drugs for any other purpose is not authorized by
39 this section.

1 ~~((5))~~ (8) The optometry board shall develop a means of
2 identification and verification of optometrists certified to ~~((use~~
3 ~~therapeutic drugs for the purpose of issuing prescriptions as~~
4 ~~authorized by this section))~~ perform advanced procedures.

5 ~~((6))~~ (9) Nothing in this chapter may be construed to authorize
6 the use, prescription, dispensing, purchase, possession, or
7 administration of any Schedule I or II controlled substance, except
8 Schedule II hydrocodone combination products. The provisions of this
9 subsection must be strictly construed.

10 ~~((7) With the exception of the administration of epinephrine by~~
11 ~~injection for the treatment of anaphylactic shock, no injections or~~
12 ~~infusions may be administered by an optometrist.~~

13 ~~(8))~~ (10) Nothing in this chapter may be construed to authorize
14 optometrists to perform ophthalmic surgery. Ophthalmic surgery is
15 defined as any invasive procedure in which human tissue is cut,
16 ablated, or otherwise penetrated by incision, injection, laser,
17 ultrasound, or other means, in order to: Treat human eye diseases;
18 alter or correct refractive error; or alter or enhance cosmetic
19 appearance. Nothing in this chapter limits an optometrist's ability
20 to use diagnostic instruments utilizing laser or ultrasound
21 technology. Ophthalmic surgery, as defined in this subsection, does
22 not include the advanced procedures listed in subsection (2)(a) of
23 this section, removal of superficial ocular foreign bodies, epilation
24 of misaligned eyelashes, placement of punctal or lacrimal plugs,
25 diagnostic dilation and irrigation of the lacrimal system,
26 orthokeratology, prescription and fitting of contact lenses with the
27 purpose of altering refractive error, or other similar procedures
28 within the scope of practice of optometry.

29 (11) In a public health emergency, the state health officer may
30 authorize licensed optometrists to administer inoculations for
31 systemic health reasons.

32 (12)(a) Any optometrist authorized by the optometry board shall
33 be permitted to purchase diagnostic pharmaceutical agents for use in
34 the practice of optometry. Any optometrist authorized by the
35 optometry board shall be permitted to prescribe therapeutic
36 pharmaceutical agents in the practice of optometry. Optometrists
37 authorized by the optometry board to purchase pharmaceutical agents
38 shall obtain them from licensed wholesalers or pharmacists, using
39 prescriptions or chart orders placed in the same or similar manner as
40 any physician or other practitioner so authorized. Purchases shall be

1 limited to those pharmaceutical agents specified in this section,
2 based upon the authority conferred upon the optometrist by the
3 optometry board consistent with the educational qualifications of the
4 optometrist as established in this section.

5 (b) Diagnostic and therapeutic pharmaceutical agents are any
6 prescription or nonprescription drug delivered via any route of
7 administration used or prescribed for the diagnosis, treatment, or
8 mitigation of abnormal conditions and pathology of the human eye and
9 its adnexa. Diagnostic and therapeutic pharmaceutical agents do not
10 include Schedule I and Schedule II drugs, except for hydrocodone
11 combination products.

12 **Sec. 2.** RCW 18.54.050 and 2011 c 336 s 491 are each amended to
13 read as follows:

14 The board must meet at least once yearly or more frequently upon
15 call of the chair or the secretary of health at such times and places
16 as the chair or the secretary of health may designate by giving three
17 days' notice or as otherwise required by RCW 42.30.075. A full record
18 of the board's proceedings shall be kept in the office of the board
19 and shall be open to inspection at all reasonable times.

20 **Sec. 3.** RCW 18.54.070 and 1995 c 198 s 7 are each amended to
21 read as follows:

22 The board has the following powers and duties:

23 (1) To develop and administer, or approve, or both, a licensure
24 examination. The board may approve an examination prepared or
25 administered by a private testing agency or association of licensing
26 authorities.

27 (2) The board shall adopt rules and regulations to promote
28 safety, protection, and the welfare of the public, to carry out the
29 purposes of this chapter, to aid the board in the performance of its
30 powers and duties, and to govern the practice of optometry. The
31 administrative regulations shall include the classification and
32 licensure of optometrists by examination or credentials, retirement
33 of a license, and reinstatement of a license.

34 (3) The board shall have the authority to provide rule-making
35 regarding the allowable procedures and their educational requirements
36 within the confines of this chapter and chapter 18.53 RCW.

1 (4) The board shall keep a register containing the name, address,
2 license number, email, and phone number of every person licensed to
3 practice optometry in this state to the best of their ability.

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