
SUBSTITUTE SENATE BILL 5293

State of Washington

64th Legislature

2015 Regular Session

By Senate Health Care (originally sponsored by Senators Becker, Keiser, Rivers, Conway, Dammeier, Hobbs, Angel, Frockt, Bailey, Ericksen, Mullet, and Benton)

READ FIRST TIME 01/30/15.

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

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

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

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

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

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

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

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

8 (e) The adaptation of prosthetic eyes.

9 (2)(a) Those persons using topical drugs for diagnostic purposes
10 in the practice of optometry shall have a minimum of sixty hours of
11 didactic and clinical instruction in general and ocular pharmacology
12 as applied to optometry, as established by the board, and
13 certification from an institution of higher learning, accredited by
14 those agencies recognized by the United States office of education or
15 the council on postsecondary accreditation to qualify for
16 certification by the optometry board of Washington to use drugs for
17 diagnostic 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 hours of didactic and clinical instruction as
22 established by the board, and certification from an institution of
23 higher learning, accredited by those agencies recognized by the
24 United States office of education or the council on postsecondary
25 accreditation to qualify for certification by the optometry board of
26 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 hours of didactic and eight hours of
31 supervised clinical instruction as established by the board, and
32 certification from an institution of higher learning, accredited by
33 those agencies recognized by the United States office of education or
34 the council on postsecondary accreditation to qualify for
35 certification by the optometry board of Washington to administer,
36 dispense, or prescribe oral drugs for diagnostic or therapeutic
37 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 board, and certification from an
3 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 January
13 1, 2009, must be certified under (a) and (b) of this subsection.

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

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

22 (4) The board must establish a list of oral Schedule III through
23 V controlled substances and any oral legend drugs, with the approval
24 of and after consultation with the pharmacy quality assurance
25 commission. The board may include Schedule II hydrocodone combination
26 products consistent with subsection (6) of this section. No person
27 licensed under this chapter may use, prescribe, dispense, purchase,
28 possess, or administer these drugs except as authorized and to the
29 extent permitted by the board. No optometrist may use, prescribe,
30 dispense, or administer oral corticosteroids.

31 (a) The board, with the approval of and in consultation with the
32 pharmacy quality assurance commission, must establish, by rule,
33 specific guidelines for the prescription and administration of drugs
34 by optometrists, so that licensed optometrists and persons filling
35 their prescriptions have a clear understanding of which drugs and
36 which dosages or forms are included in the authority granted by this
37 section.

38 (b) An optometrist may not:

39 (i) Prescribe, dispense, or administer a controlled substance for
40 more than seven days in treating a particular patient for a single

1 trauma, episode, or condition or for pain associated with or related
2 to the trauma, episode, or condition; or

3 (ii) Prescribe an oral drug within ninety days following
4 ophthalmic surgery unless the optometrist consults with the treating
5 ophthalmologist.

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

9 (d) The prescription or administration of drugs as authorized in
10 this section is specifically limited to those drugs appropriate to
11 treatment of diseases or conditions of the human eye and the adnexa
12 that are within the scope of practice of optometry. The prescription
13 or administration of drugs for any other purpose is not authorized by
14 this section.

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

18 (6) Nothing in this chapter may be construed to authorize the
19 use, prescription, dispensing, purchase, possession, or
20 administration of any Schedule I or II controlled substance, except
21 Schedule II hydrocodone combination products. The provisions of this
22 subsection must be strictly construed.

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

26 (8) Nothing in this chapter may be construed to authorize
27 optometrists to perform ophthalmic surgery. Ophthalmic surgery is
28 defined as any invasive procedure in which human tissue is cut,
29 ablated, or otherwise penetrated by incision, injection, laser,
30 ultrasound, or other means, in order to: Treat human eye diseases;
31 alter or correct refractive error; or alter or enhance cosmetic
32 appearance. Nothing in this chapter limits an optometrist's ability
33 to use diagnostic instruments utilizing laser or ultrasound
34 technology. Ophthalmic surgery, as defined in this subsection, does
35 not include removal of superficial ocular foreign bodies, epilation
36 of misaligned eyelashes, placement of punctal or lacrimal plugs,
37 diagnostic dilation and irrigation of the lacrimal system,
38 orthokeratology, prescription and fitting of contact lenses with the

1 purpose of altering refractive error, or other similar procedures
2 within the scope of practice of optometry.

--- END ---