

ONE HUNDRED THIRD LEGISLATURE - SECOND SESSION - 2014
COMMITTEE STATEMENT
LB526

Hearing Date: Thursday March 21, 2013
Committee On: Health and Human Services
Introducer: Howard
One Liner: Change optometry licensure and certification to perform minor surgery and use pharmaceutical agents

Roll Call Vote - Final Committee Action:
Advanced to General File with amendment(s)

Vote Results:
Aye: 4 Senators Watermeier, Krist, Howard, Cook
Nay:
Absent:
Present Not Voting: 3 Senators Crawford, Gloor, Campbell

Proponents:
Senator Sara Howard
Chad Hudnall
Robert Vandervort
Heidi Lichtenberg
Jonna Kohle
John Crotty
Justin Brady

Representing:
District 9
Nebraska Optometric Association
Nebraska Optometric Association
Nebraska Optometric Association
Nebraska Optometric Association
Nebraska Optometric Association
Nebraska Optometric Association

Opponents:
Millicent Palmer
Charles Gregorius
John Peters
Anna Stagner
William R. Palmer
Scott DeBates

Representing:
Nebraska Academy of Eye Physicians and Surgeons
Nebraska Medical Association
Nebraska Academy of Eye Physicians and Surgeons
Self
Nebraska Medical Association
Nebraska Dermatology Society

Neutral:

Representing:

Summary of purpose and/or changes:

Added to Neb. Rev. Stat. 38-2604 under LB 526 is that, "pharmaceutical agents, for therapeutic purposes, also means pharmaceutical agents injected for treatment of anaphylaxis or pharmaceutical agents injected into the eyelid for treatment of cysts or infected or inflamed glands of the eyelids."

The bill adds to the definition of the practice of optometry in 38-2605, the performance of minor surgical procedures required for the removal of superficial eyelid, conjunctival, and corneal foreign bodies and the treatment of cyst or infected or inflamed glands of the eyelids. The injection of pharmaceutical agents for purposes allowed in Neb. Rev. Stat. 38-2604.

As 38-2615 is amended by LB 526, an optometrist licensed in this state may administer injections authorized under

38-2605 if the optometrist provides either (a) evidence of certification in another state in the use of injections and the evidence is deemed by the board as satisfactory evidence of the qualifications or (b)(i) for a licensee graduating from a school of optometry after December 31, 2012, evidence of passing the injection skills examination of the national licensing board for optometrists, or (ii) for a licensee graduating from a school of optometry on or before December 31, 2012, evidence of passing the injection skills examination of the national licensing board for optometrists or evidence of completion of a minimum of eight hours of transcript-quality education from an accredited school of optometry pursuant to section 38-2616.

The bill states that the education referred for administering injections shall include didactic and clinical education. Didactic education shall include (i) review of the pharmacology of subcutaneous and intramuscular medications for the diagnosis and treatment of diseases and disorders of the eye and ocular adnexa, (ii) review of clinical indications for the medications, (iii) review of systemic side effects of the medications, (iv) review of laboratory testing associated with the use of the medications, (v) techniques of administration of the medications, (vi) review of coordination of care with other providers when utilizing the medications, and (vii) informed consent and medical-legal issues regarding the administration of injectable medications.

Clinical education shall be proctored by a person licensed to administer the injections and affiliated with an accredited school of optometry pursuant to section 38-2616. The clinical education shall include the technique of subcutaneous and intramuscular injections, the technique of sterilization or asepsis, the federal regulations regarding blood-borne pathogen disposal, and competency-based testing.

LB 526 also provides that an optometrist licensed in this state may perform minor surgical procedures authorized under subdivision (1)(f) of section 38-2605 if the optometrist provides either (a) evidence of certification in another state in the performance of minor surgical procedures and the evidence is deemed by the board as satisfactory evidence of the qualifications or (b)(i) for a licensee graduating from a school of optometry after December 31, 2012, (A) evidence from an accredited school of optometry pursuant to section 38-2616 that is deemed by the board as satisfactory evidence of competency in the performance of minor surgical procedures or (B) by the end of the first licensure renewal period, proof of compliance with the requirements of this section, or (ii) for a licensee graduating from a school of optometry on or before December 31, 2012, evidence of completion of a minimum of sixteen hours of transcript-quality education from an accredited school of optometry pursuant to section 38-2616.

The education referred to perform minor surgical procedures under LB 526 shall include didactic and clinical education. Didactic education shall include (i) techniques for infection control, sterilization, and disposal of biohazardous waste, (ii) instruments, equipment, and supplies used to perform in-office minor surgical procedures, (iii) review of hemostasis and wound healing, (iv) review of clinical anatomy of the eyelid and ocular adnexa, (v) review of diagnosis and management of neoplasms of the eyelids and ocular adnexa, (vi) surgical techniques for treatment of lesions on the eyelids and ocular adnexa, (vii) techniques to perform chalazion injection, chalazion incision, and curettage, (viii) suturing techniques and perioperative wound management, (ix) specimen preservation and transport for laboratory analysis, (x) operative and postoperative complications of minor surgical procedures of the eyelids and ocular adnexa, (xi) informed consent and medical-legal aspects of minor surgical procedures of the eyelids and ocular adnexa, and (xii) federal regulations pertaining to optometry practices and minor surgical procedures.

Clinical education must be proctored by a person licensed to perform minor surgical procedures and affiliated with an accredited school of optometry pursuant to section 38-2616. The clinical education must include (i) technique for sterilization, (ii) technique for chalazion injection, chalazion incision, and curettage, (iii) technique for treatment of cysts or infected or inflamed glands of the eyelid, (iv) biohazardous waste disposal techniques, and (v) competency-based testing.

Explanation of amendments:

The Committee Amendment continues to allow, as specified in LB 526, optometrists to prescribe certain oral agents including steroids, anti-glaucoma medication and immunosuppressives. It, additionally, allows, as per the bill, for injections in the eyelid and tissues surrounding the eye for anaphylaxis or pharmaceutical agents for treatment of eyelid. The amendment changes 38-2604 (3) from "cysts or infected or inflamed glands of the eyelids" to "treatment of

chalazions, hordeolums, sweat gland cysts, or oil gland cysts of the eyelids".

The Committee Amendment, also, clarifies that the performance of minor surgical procedures under the bill are specified "to allow the treatment of chalazions, hordeolums, sweat gland cysts, or oil gland cysts of the eyelids by lancing, small incision and curettage". The injection of pharmaceutical agents for treatment of anaphylaxis and injection of pharmaceutical agents into the eyelid for purposes listed in 38-2604.

The Committee Amendment maintains the educational components required under LB 526 for injections and minor surgical procedures but adds requirement for certification in the use of oral steroids, oral antiglaucoma medication and oral immunosuppressive agents to include four hours of tested education from an accredited school of optometry and specifies the components of such education.

The amendment provides for the board to assess the education provided by a school of optometry listed on an application for a license to practice optometry to determine if the education provided by the school satisfies the requirement of the Optometry Practice Act.

Finally, the amendment states that a licensed optometrist who performs minor surgical procedures or administers injections shall provide a standard of care to patients comparable to that provided by a physician licensed in this state to practice medicine and surgery.

Kathy Campbell, Chairperson