



OPTOMETRY EXAMINING BOARD
Room 121A, 1400 East Washington Avenue, Madison
Contact: Thomas Ryan (608) 266-2112
June 18, 2018

The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Board.

AGENDA

9:00 A.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

A. Adoption of Agenda (1-3)

B. Approval of Minutes – May 31, 2018 (4-7)

C. Conflicts of Interest

D. Administrative Updates

- 1) Department and Staff Updates
- 2) Update Regarding the Occupational Licensure Study
- 3) Board Member – Board Member Status
 - a. Ann Meier Carli – 7/1/2014
 - b. Richard Foss – 7/1/2017
 - c. Brian Hammes – 7/1/2019 (*reappointed, not yet confirmed*)
 - d. Mark Jenkins – 7/1/2016
 - e. Robert Schulz – 7/1/2020 (*reappointed, not yet confirmed*)
 - f. Peter Sorce – 7/1/2020
 - g. John Sterling – 7/1/2021 (*appointed, not yet confirmed*)

E. Legislative and Administrative Rule Matters – Discussion and Consideration

- 1) 2017 Wisconsin Act 262: Discuss Goals for the Report on the Issue of Opioid Abuse Due November 1, 2018 **(8-10)**
- 2) ACOE List of Optometry Accreditation Schools – Review of Board Rules **(11-15)**
- 3) SPS 10, Relating to the Use of Pharmaceutical Agents by Licensed Optometrists - Discussion and Review **(16-19)**
- 4) Update on Legislation and Pending or Possible Rulemaking Projects

F. Items Added After Preparation of the Agenda:

- 1) Introductions, Announcements and Recognition
- 2) Nominations, Elections, and Appointments
- 3) Board Liaison Training and Appointment of Mentors
- 4) Administrative Updates

- 5) Education and Examination Matters
- 6) Credentialing Matters
- 7) Practice Matters
- 8) Legislation/administrative Rule Matters
- 9) Liaison, Panel, and Committee Report(s)
- 10) Informational Item(s)
- 11) Disciplinary Matters
- 12) Presentations of Petition(s) for Summary Suspension
- 13) Presentation of Proposed Stipulation(s), Final Decision(s) and Order(s)
- 14) Presentation of Proposed Decisions
- 15) Presentation of Interim Order(s)
- 16) Petitions for Re-Hearing
- 17) Petitions for Assessments
- 18) Petitions to Vacate Order(s)
- 19) Petitions for Designation of Hearing Examiner
- 20) Requests for Disciplinary Proceeding Presentations
- 21) Motions
- 22) Petitions
- 23) Appearances from requests Received or Renewed
- 24) Speaking Engagement(s), Travel, or Public Relation Request(s), and Reports

G. Future Agenda Items

H. Public Comments

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (ss. 19.85(1)(b), and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85(1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.).

I. Division of Legal Services and Compliance (DLSC) Matters

J. Deliberation on Items Added After Preparation of the Agenda

- 1) Education and Examination Matters
- 2) Credentialing Matters
- 3) Division of Legal Services and Compliance (DLSC) Matters
- 4) Monitoring Matters
- 5) Professional Assistance Procedure (PAP) Matters
- 6) Board Liaison Training
- 7) Petition(s) for Summary Suspension
- 8) Proposed Stipulations, Final Decision and Orders
- 9) Administrative Warnings
- 10) Proposed Final Decisions and Orders
- 11) Matters Relating to Costs
- 12) Case Closings
- 13) Petition(s) for Extension of time
- 14) Proposed Interim Orders
- 15) Petitions for Assessments and Evaluations
- 16) Petitions to Vacate Orders
- 17) Remedial Education Cases

- 18) Motions
- 19) Petitions for Re-Hearing
- 20) Appearances from Requests Received or Renewed

K. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

L. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate

M. Open Session Items Noticed Above Not Completed in the Initial Open Session

N. Credentialing Liaison Training

O. Delegation of Ratification of Examination Results and Ratification of Licenses and Certificates

ADJOURNMENT

NEXT SCHEDULED MEETING: OCTOBER 11, 2018

MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED
WITHOUT NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held at 1400 East Washington Avenue, Madison, Wisconsin, unless otherwise noted. In order to confirm a meeting or to request a complete copy of the board's agenda, please call the listed contact person. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of disciplinary hearings may be changed by the examiner for the convenience of the parties. Interpreters for the hearing impaired provided upon request by contacting the Affirmative Action Officer, 608-266-2112.

**OPTOMETRY EXAMINING BOARD
MEETING MINUTES
May 31, 2018**

PRESENT: Ann Meier Carli, Mark Jenkins, Robert Schulz, Peter Sorce, John Sterling, Richard Foss
(arrived at 9:25 a.m.)

STAFF: Thomas Ryan, Executive Director; Pete Anderson, Bureau Assistant; Sharon Henes,
Administrative Rules Coordinator and other DSPS Staff

CALL TO ORDER

Ann Meier Carli, Chair, called the meeting to order at 9:07 a.m. A quorum of five (5) members was confirmed.

ADOPTION OF AGENDA

MOTION: Ann Meier Carli moved, seconded by John Sterling, to adopt the agenda as published. Motion carried unanimously.

APPROVAL OF MINUTES

Amendments to the Minutes

- Page 2 of the Minutes: Remove “January – December 2017” Under 2018 Screening Panel Appointments
- Page 2 of the Minutes: Remove “for 2018” from the motion to affirm all liaison appointments

MOTION: Marc Jenkins moved, seconded by Peter Sorce, to approve the minutes of February 15, 2018 as amended. Motion carried unanimously.

**PUBLIC HEARING ON CLEARINGHOUSE RULE 18-021, OPT 8,
RELATING TO CONTINUING EDUCATION**

Review and Respond to Clearinghouse Report and Public Hearing Comments

MOTION: Mark Jenkins moved, seconded by Peter Sorce, to reject Clearinghouse comment number 5. b. because the effective date of the rule will start with the next biennium, and to accept all remaining Clearinghouse comments for Clearinghouse Rule 18-021, relating to continuing education. Motion carried unanimously.

MOTION: Mark Jenkins moved, seconded by Robert Schulz, to authorize the Chair, or highest ranking officer, or longest serving member of the board, in order of succession, to approve the Legislative Report and Draft for Clearinghouse Rule 18-021, relating to continuing education, for submission to the Governor’s Office and Legislature. Motion carried unanimously.

LEGISLATIVE AND ADMINISTRATIVE RULE MATTERS

(Richard Foss arrived at 9:25 a.m.)

2017 Wisconsin Act 262: Requires a Report on the Issue of Opioid Abuse Due November 1, 2018

MOTION: Ann Meier Carli moved, seconded by Robert Schulz, to designate John Sterling to serve as liaison to DSPS staff for drafting the Act 262 report, relating to the issue of opioid abuse, and to authorize the Chair, or highest ranking officer, or longest serving member of the board, in order of succession, to approve the report for submission to the Governor's designee and the chief clerks of the Legislature. Motion carried unanimously.

MOTION: Richard Foss moved, seconded by Robert Schulz, to designate John Sterling to serve as liaison to DSPS staff for amending Opt 8, relating to prescribing controlled substances, to require all licensees to obtain two hours of continuing education for the 2019/2021 biennium and to sunset the requirement after the end of the 2019/2021 biennium. Motion carried unanimously.

2017 Wisconsin Act 108: Requires a Report on the Board's Administrative Rules Due March 31, 2019

MOTION: Ann Meier Carli moved, seconded by Robert Schulz, to designate Richard Foss to serve as liaison to DSPS staff for drafting the Act 108 report, relating to administrative rules, and to authorize the Chair, or highest ranking officer, or longest serving member of the board, in order of succession, to approve the report for submission to the Joint Committee for Review of Administrative Rules. Motion carried unanimously.

Opt 4, Relating to Licensure by Endorsement

MOTION: Mark Jenkins moved, seconded by Robert Schulz, to request DSPS staff draft a Scope Statement revising Opt 4, relating to licensure by endorsement, and to authorize the Chair, or highest ranking officer, or longest serving member of the board, in order of succession, to approve the Scope Statement for submission to the Department of Administration and Governor's Office and for publication. Additionally, the Board authorizes the Chair, or highest ranking officer, or longest serving member of the board, in order of succession, to approve the Scope Statement for implementation no less than 10 days after publication. Motion carried unanimously.

CLOSED SESSION

MOTION: Ann Meier Carli moved, seconded by John Sterling, to convene to Closed Session to deliberate on cases following hearing (§ 19.85(1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats. and § 440.205, Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.). Ann Meier Carli, Chair, read the language of the motion aloud for the record. The vote of each member was ascertained by voice vote. Roll Call Vote: Ann Meier Carli-yes; Richard Foss-yes; Mark Jenkins-yes; Robert Schulz-yes; Peter Sorce-yes; and John Sterling-yes. Motion carried unanimously.

The Board convened into Closed Session at 12:11 p.m.

RECONVENE TO OPEN SESSION

MOTION: Peter Sorce moved, seconded by Mark Jenkins, to reconvene in to Open Session. Motion carried unanimously.

The Board reconvened into Open Session at 12:13 p.m.

VOTE ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION

MOTION: Mark Jenkins moved, seconded by Ann Meier Carli, to affirm all motions made and votes taken in Closed Session. Motion carried unanimously.

(Be advised that any recusals or abstentions reflected in the closed session motions stand for the purposes of the affirmation vote.)

DIVISION OF LEGAL SERVICES AND COMPLIANCE MATTERS

Case Closing

17 OPT 006 – P.I.A.

MOTION: Peter Sorce moved, seconded by Ann Meier Carli, to close DLSC case number 17 OPT 006, against P.I.A., for No Violation. Motion carried unanimously.

DELEGATION OF RATIFICATION OF EXAMINATION RESULTS AND RATIFICATION OF LICENSES AND CERTIFICATES

MOTION: Ann Meier Carli moved, seconded by Richard Foss, to delegate ratification of examination results to DSPS staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

**OPEN SESSION ITEMS NOTICED ABOVE
NOT COMPLETED IN THE INITIAL OPEN SESSION**

MOTION: Mark Jenkins moved, seconded by Robert Schulz to affirm the Chair's appointment of Richard Foss to the Screening Panel and Mark Jenkins as alternate Travel Liaison. Motion carried unanimously.

ADJOURNMENT

MOTION: Robert Schulz moved, seconded by John Sterling, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 12:43 p.m.

DRAFT

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Helen Leong, Administrative Rules Coordinator		2) Date When Request Submitted: June 6, 2018 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
3) Name of Board, Committee, Council, Sections: Optometry Examining Board			
4) Meeting Date: June 18, 2018	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Legislative and Administrative Rule Matters 1) 2017 Wisconsin Act 262: Discuss goals for the report on the issue of opioid abuse due November 1, 2018 2) ACOE List of Optometry Accreditation Schools – Review of Board Rules 3) SPS 10, relating to the use of pharmaceutical agents by licensed optometrists, Discussion and Review	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: For the discussion regarding Optometry schools and colleges, please see the application form for licensure: https://dsps.wi.gov/Credentialing/Health/fm598.pdf			
11) Authorization			
Signature of person making this request <i>Helen Leong</i>		Date <i>June 6, 2018</i>	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Ann Meier Carli
Chairperson

Robert Schulz
Vice Chairperson

Mark Jenkins
Secretary

**WISCONSIN OPTOMETRY EXAMINING
BOARD**



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Wisconsin Optometry Examining Board Report on Opioid Abuse – October 2018

Scope and purpose of the report: 2017 Wisconsin Act 262 requires the Optometry Examining Board to annually submit a report related to the issue of opioid abuse to the Legislature and Governor's Office. This preliminary report must include proactive efforts taken by the Board to address the issue of opioid abuse and goals for addressing the issue of opioid abuse as it relates to the practice of optometry in Wisconsin. Future reports must also include actions taken by the Board to achieve the goals identified in previous reports, and whether those goals have been achieved.

Proactive efforts taken by the Board to address the issue of opioid abuse:

Limited Prescribing Authority

Optometrists have limited prescribing authority for controlled substances. Optometrists licensed prior to August 1, 2006 must obtain certificates to prescribe diagnostic pharmaceutical agents and therapeutic pharmaceutical agents. Those who are licensed after August 1, 2006 or have certificates to prescribe pharmaceutical agents may prescribe Schedule III, IV, or V controlled substances in accordance with ss. 449.18 and 961.39, Stats., and SPS 10, Admin. Code, and may also prescribe one Schedule II controlled substance:

- a. Not more than 300 milligrams of hydrocodone per 100 milliliters or per 100 grams or not more than 15 milligrams per dosage unit, with a four-fold or greater quantity of an isoquinoline alkaloid of opium.
- b. Not more than 300 milligrams of hydrocodone per 100 milliliters or per 100 grams or not more than 15 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts.

Controlled Substances Prescribing Guidelines

The Board adopted the Best Practices for Prescribing Controlled Substances Guidelines on March 16, 2017, in response to 2015 Act 269. The Guidelines were developed using the Centers for Disease Control and Prevention's Guidelines for Prescribing Opioid for Chronic Pain; Wisconsin Medical Examining Board's Opioid Prescribing Guideline; the National Transportation Safety Board recommendations; and other states' guidelines. The Best Practices

for Prescribing Controlled Substances Guidelines are available at www.dsps.wi.gov and were emailed to all licensees in June 2017.

Continuing Education Related to Prescribing Controlled Substances

On May 31, 2018, the Board unanimously moved to amend Opt 8, relating to continuing education, to require licensees to complete 2 hours of continuing education relating to prescribing controlled substances in the 2019/2021 biennium. This requirement has been added to the on-going rule project for Opt 8, which is expected to take effect on December 15, 2019.

Goals for addressing the issue of opioid abuse as it relates to the practice of optometry in Wisconsin:

Education on the issue of opioid abuse

The Board is working with PDMP staff to learn what data is available from the Prescription Drug Monitoring Program (PDMP) in order to learn how extensively the database is being used by licensees. Additionally, the Board is working with the Department of Safety and Professional Services to review the therapeutic pharmaceutical agents specified in SPS 10 to ensure the rule is up to date with minimum standards of care.

Enforcement Action

Currently, if an investigation of an optometrist's prescriptive practices occurs, it is done in response to a complaint filed against the optometrist. The Board's goal is to, in partnership with the Controlled Substances Board, begin proactively investigating optometrists whose prescriptive practices with controlled substances appear excessive relative to other medical professionals. The Controlled Substances Board will use reports generated from the Prescription Drug Monitoring Program to refer optometrists to the Board for possible investigation.

STATEMENT OF SCOPE

Optometry Examining Board

Rule No.: Opt 4

Relating to: Licensure by Endorsement

Rule Type: Permanent

1. Finding/nature of emergency (Emergency Rule only):

N/A

2. Detailed description of the objective of the proposed rule:

The Optometry Examining Board has determined that a comprehensive review of Opt 4, relating to licensure by endorsement, is required in order to examine the practice of the Board's annual review of accredited optometry schools and colleges, update the chapter to ensure compliance with 2017 Act 278, and to make other updates as necessary for consistency and clarity.

3. Description of the existing policies relevant to the rule, new policies proposed to be included in the rule, and an analysis of policy alternatives:

2017 Act 278 updated the Fair Employment Law for applicants, and this chapter needs to be updated to include cross-references to the relevant statutes in the application procedures. Additionally, the chapter establishes a procedure for the Board to annually review the list of accredited schools and colleges of optometry. The Board would like to review this procedure and remove unnecessary steps in the process. The Board will further review the chapter for consistency and clarity to ensure the rules are up to date with other rule projects and reflective of the current practice of optometry.

4. Detailed explanation of statutory authority for the rule (including the statutory citation and language):

Section 15.08 (5) (b), Stats., states that the examining board, "shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession."

Section 227.11 (2) (b), Stats., sets forth the parameters of an agency's rule-making authority, stating an agency, "may prescribe forms and procedures in connection with any statute enforced or administered by it, if the agency considers it necessary to effectuate the purpose of the statute, but this paragraph does not authorize the imposition of a substantive requirement in connection with a form or procedure."

Sections 449.04 (1) (b) and 449.055 (5), Stats., require that the applicant, "has graduated from an accredited college of optometry approved and recognized by the examining board."

5. Estimate of amount of time that state employees will spend developing the rule and of other resources necessary to develop the rule:

The Department estimates approximately 80 hours will be needed to perform the review and develop any rule changes. The Department will assign existing staff to perform the review and develop the rule changes. No additional resources will be required.

6. List with description of all entities that may be affected by the proposed rule:

Applicants for licensure by endorsement.

7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule:

None.

8. Anticipated economic impact of implementing the rule (note if the rule is likely to have a significant economic impact on small businesses):

The rule changes contemplated in this project are not expected to have any negative economic impacts on any of the affected entities.

Contact Person: Helen Leong, Administrative Rules Coordinator
Division of Policy Development, Department of Safety and Professional Services
(608) 266 – 0797 DSPSAdminRules@wisconsin.gov

Department Head or Authorized Signature

Date Submitted

Surrounding 4-state Research on TPA:

Illinois:

Illinois administrative rules on Optometry are available [here](#). The list of approved TPA is by categories, see below:

Joint Committee on Administrative Rules **ADMINISTRATIVE CODE**

TITLE 68: PROFESSIONS AND OCCUPATIONS CHAPTER VII: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION SUBCHAPTER b: PROFESSIONS AND OCCUPATIONS PART 1320 OPTOMETRIC PRACTICE ACT OF 1987 SECTION 1320.330 APPROVED THERAPEUTIC OCULAR PHARMACEUTICAL AGENTS PURSUANT TO SECTION 15.1 OF THE ACT

Section 1320.330 Approved Therapeutic Ocular Pharmaceutical Agents Pursuant to Section 15.1 of the Act

- a) The following categories of therapeutic ocular pharmaceutical agents are approved for use by licensed optometrists:
 - 1) Anti-Infective Agents
 - 2) Anti-Allergy Agents
 - 3) Anti-Glaucoma Agents (except oral carbonic anhydrase inhibitors, which may be prescribed only in a quantity sufficient to provide treatment for up to 72 hours)
 - 4) Anti-Inflammatory Agents (except oral steroids)
 - 5) Topical Anesthetic Agents
 - 6) Over the Counter Agents
 - 7) Analgesic Agents
 - 8) Mydriatic Reversing Agents
 - 9) Anti-Dry Eye Agents
 - 10) Agents for the treatment of hypotrichosis
- b) Licensed optometrists shall be permitted to use topical anesthetics, mydriatics, cycloplegics and miotics.
- c) Oral pharmaceutical agents may be prescribed for a child under 5 years of age only in consultation with a physician licensed to practice medicine in all its branches.

(Source: Amended at 36 Ill. Reg. 10006, effective June 29, 2012)

Under [Illinois law](#), licensed optometrists, in order to prescribe controlled substance oral analgesic therapeutic ocular pharmaceutical agents as set forth in Section 1320.330(a)(7), shall apply for a [Controlled Substance License](#). The licensee is limited to prescribing Schedule III, IV and V agents in a quantity sufficient to provide treatment for up to 72 hours. No prescriptions for a Schedule II controlled

substance are permitted, with the exception of Dihydrocodeinone (Hydrocodone) with one or more active, non-narcotic ingredients only in a quantity sufficient to provide treatment for up to 72 hours.

The Illinois Optometric Licensing and Disciplinary Board may recommend additional pharmaceutical agents approved by the FDA to the Department of Financial and Professional Regulation, and the Department shall promulgate rules to allow for the prescribing or administering pharmaceutical agents. [See 225 ILCS 80/15.1.](#)

Iowa:

Under Iowa law, the [Board of Optometry](#) is part of the Department of Public Health. An optometrist licensed by the Board of Optometry may employ all diagnostic and therapeutic pharmaceutical agents for the purpose of diagnosis and treatment of conditions of the human eye and adnexa, excluding the use of injections other than to counteract an anaphylactic reaction, and may without charge supply any of the above pharmaceuticals to commence a course of therapy. [Iowa Code § 154.1, 3. and 4.](#) (see below)

3. *a.* An optometrist licensed under this chapter may employ all diagnostic and therapeutic pharmaceutical agents for the purpose of diagnosis and treatment of conditions of the human eye and adnexa pursuant to this subsection, excluding the use of injections other than to counteract an anaphylactic reaction, and notwithstanding section 147.107, may without charge supply any of the above pharmaceuticals to commence a course of therapy. A licensed optometrist may perform minor surgical procedures and use medications for the diagnosis and treatment of diseases, disorders, and conditions of the eye and adnexa. A license to practice optometry under this chapter does not authorize the performance of surgical procedures which require the use of injectable or general anesthesia, moderate sedation, penetration of the globe, or the use of ophthalmic lasers for the purpose of ophthalmic surgery within or upon the globe. The removal of pterygia and Salzmann's nodules, incisional corneal refractive surgery, and strabismus surgery are prohibited.
- b.* A licensed optometrist may employ and, notwithstanding section 147.107, supply pharmaceutical-delivering contact lenses for the purpose of treatment of conditions of the human eye and adnexa. For purposes of this paragraph, "pharmaceutical-delivering contact lenses" means contact lenses that contain one or more therapeutic pharmaceutical agents authorized for employment by this section for the purpose of treatment of conditions of the human eye and adnexa and that deliver such agents into the wearer's eye.
- c.* A licensed optometrist may prescribe oral steroids for a period not to exceed fourteen days without consultation with a physician.
- d.* A licensed optometrist may be authorized, where reasonable and appropriate, by rule of the board, to employ new diagnostic and therapeutic pharmaceutical agents approved by the United States food and drug administration on or after July 1, 2002, for the diagnosis and treatment of the human eye and adnexa.
- e.* The board is not required to adopt rules relating to topical pharmaceutical agents, oral antimicrobial agents, oral antihistamines, oral antiglaucoma agents, and oral

- analgesic agents. A licensed optometrist may remove superficial foreign bodies from the human eye and adnexa.
- f. The therapeutic efforts of a licensed optometrist are intended for the purpose of examination, diagnosis, and treatment of visual defects, abnormal conditions, and diseases of the human eye and adnexa, for proper optometric practice or referral for consultation or treatment to persons licensed under chapter 148.
 - g. A licensed optometrist is an optometrist who is licensed to practice optometry in this state and who is certified by the board to use the agents and procedures authorized pursuant to this subsection.
4. Beginning July 1, 2012, all licensed optometrists shall meet requirements established by the board by rule to employ diagnostic and therapeutic pharmaceutical agents for the practice of optometry. All licensees practicing optometry in this state shall have demonstrated qualifications and obtained certification to use diagnostic and therapeutic pharmaceutical agents as a condition of license renewal.

There is no list of TPA that Optometrists are specifically authorized to use in Iowa.

Michigan:

In Michigan, the [Board of Optometry](#) requires optometrists to be certified to administer topical ocular diagnostic pharmaceutical agents and to prescribe therapeutic pharmaceutical agents. [R 338.315 and R 338.317](#). A [controlled substances license](#) is required to prescribe controlled substances. A management and emergency plan is also required. [See Article 7 of Public Act 368 of 1978, as amended.](#)

There is no list of TPA that Optometrists are specifically authorized to use in Michigan.

Minnesota:

Optometrists may prescribe or administer FDA approved drugs to aid in the diagnosis, cure, mitigation, prevention, treatment, or management of disease, deficiency, deformity, or abnormality of the human eye and adnexa included in the curricula of accredited schools or colleges of optometry, and as limited by Minnesota statute and adopted rules by the Board of Optometry. [§ 148.56 \(a\), Minn. Stats.](#) Optometrists may not prescribe or administer Schedule II and III oral FDA approved drugs and oral steroids; oral antivirals to be prescribed for more than ten days; or oral carbonic anhydrase inhibitors to be prescribed or administered for more than seven days. [§ 148.56 \(b\), Minn. Stats.](#)

While there is no list of TPA that Optometrists are specifically authorized to use, however there are [prohibitions](#) on Optometrists.

Minnesota's [administrative rules](#) relating to the practice of optometry are under their Chapter 6500.

Proposed text of SPS 10 update:

TEXT OF RULE

SECTION 1. Chapter SPS 10 is repealed and recreated to read:

CHAPTER SPS 10 USE OF PHARMACEUTICAL AGENTS BY LICENSED OPTOMETRISTS

SPS 10.01 Authority. The rules in ch. SPS 10 are adopted under the authority in ss. 449.17 (1), 449.18 (6) (cm), and 961.39, Stats., to define the pharmaceutical agents for use by licensed optometrists in Wisconsin.

Note: To determine whether a licensed optometrist is eligible to use pharmaceutical agents under this chapter, refer to ch. Opt 6, relating to diagnostic and therapeutic pharmaceutical agents and removal of superficial foreign bodies from any eye or from an appendage to the eye.

SPS 10.02 Diagnostic pharmaceutical agents. (1) A licensed optometrist, authorized in accordance with ch. Opt 6, may use topical ocular diagnostic pharmaceutical agents to determine the visual efficiency of the human visual system, including refractive and functional abilities, or to diagnose the presence of ocular disease or ocular manifestations of system disease and other departures from normal.

(2) Diagnostic pharmaceutical agents include:

(a) Mydriatics.

1. Phenylephrine 2.5%.
2. Hydroxyamphetamine 1%.

(b) Cycloplegics.

1. Tropicamide 1%.
2. Cyclopentolate 1%.

(c) Topical anesthetics.

1. Benoxinate 0.4%.
2. Proparacaine 0.5%.
3. Tetracaine 0.5%.
4. Benoxinate 0.4% - Fluorescein 0.25% Combination.

(d) Dyes.

1. Fluorescein 0.25% - Benoxinate 0.4% Combination.
2. Rose Bengal.

(e) Miotics.

1. Dapiprazole HCl.
2. Pilocarpine .125%.

(f) Any drug that is used for an ophthalmic diagnostic purpose and that is the subject of a new drug application approved by the food and drug administration under section 505 (c) (1) of the federal food, drug and cosmetic act, 21 USC 355, as amended.

(g) Any drug that is used for an ophthalmic diagnostic purpose and that is generally exempt from the new drug application approval requirement contained in section 505 of the federal food, drug and cosmetic act, 21 USC 355, as amended.

SPS 10.03 Therapeutic pharmaceutical agents. (1) A licensed optometrist, authorized in accordance with Opt 6, may prescribe or administer a drug, as specified in sub. (2), for ocular therapeutic purposes.

(2) For the purposes of this chapter, therapeutic pharmaceutical agents are limited to:

(a) Oral analgesics.

1. Acetaminophen.
2. Aspirin.
3. Salicylates.
4. Schedule III, IV and V narcotic analgesics.

(b) Controlled substances in schedule II with limitations, as specified in s. 961.39 (2m), Stats.

(c) Topical decongestant agents and decongestant combinations.

1. Epinephrine HCl.
2. Hydroxyamphetamine HBr.
3. Naphazoline HCl.
4. Oxymetazoline HCl.
5. Phenylephrine HCl.
6. Tetrahydrozoline HCl.
7. Combinations of the above agents with antihistamines or zinc sulfate.

(d) Antiallergy agents.

1. Topical and oral antihistamine agents in the following drug categories.
 - a. Alkylamines.
 - b. Ethanolamines
 - c. Ethylenediamines.
 - d. Phenothiazines.
 - e. Piperazines.
 - f. Piperidines.
 - g. Terfenadines.
2. Cromolyn sodium, a mast cell stabilizing agent.

(e) Artificial tear solutions, ophthalmic irrigants and ocular lubricants.

(f) Hypertonic sodium chloride, a topical hyperosmotic agent.

(g) Yellow mercuric oxide, a miscellaneous preparation and product.

(h) Topical anesthetics.

1. Benoxinate HCl.
2. Benoxinate HCl and sodium fluorescein.
3. Proparacaine HCl.
4. Tetracaine HCl.

(i) Antibiotics.

1. Topical antibiotics.
 - a. Aminoglycosides.
 - b. Bacitracin.
 - c. Cephalosporins.
 - d. Ciprofloxacin HCl.
 - e. Erythromycin.
 - f. Gramicidin.
 - g. Norfloxacin
 - h. Penicillins.

- i. Polymyxin B.
 - j. Sulfonamides.
 - k. Tetracyclines.
 - L. Trimethoprim.
 - m. Zinc sulfate.
- 2. Oral antibiotics.
 - a. Erythromycin.
 - b. Tetracycline.
- 3. Topical antiviral agents.
 - a. Acyclovir.
 - b. Idoxuridine.
 - c. Trifluridine.
 - d. Vidarabine.
- 4. Acyclovir, an oral antiviral agent.
- (j) Anti-inflammatory agents.
 - 1. Oral non-steroidal anti-inflammatory agents.
 - a. Fenoprofen.
 - b. Ibuprofen.
 - c. Ketoprofen.
 - d. Naproxen.
 - 2. Topical corticosteroid agents.
 - a. Dexamethasone.
 - b. Fluoromethalone.
 - c. Medrysone.
 - d. Prednisolone.
 - e. Prednisolone and atropine combinations.
 - f. Topical corticosteroid and antibiotic combinations.
 - g. Topical corticosteroid and mydriatic combinations.
 - 3. Topical non-steroidal agent, diclofenac sodium.
- (k) Topical anticholinergic agents.
 - 1. Atropine.
 - 2. Atropine sulfate.
 - 3. Cyclopentolate.
 - 4. Homatropine.
 - 5. Homatropine hydrogen bromide.
 - 6. Scopolamine.
 - 7. Tropicamide.
- (L) Antiglaucomatous agents.
 - 1. Sympathomimetics.
 - a. Dipivefrin.
 - b. Epinephrine.
 - 2. Miotics, direct acting.
 - a. Acetylcholine.
 - b. Carbachol.
 - c. Pilocarpine.
 - 3. Miotics, cholinesterase inhibitors.

- a. Demecarium bromide.
 - b. Echothiophate.
 - c. Isoflurophate.
 - d. Physostigmine.
- 4. Topical beta-adrenergic blocking agents.
 - a. Betaxolol.
 - b. Carteolol HCl.
 - c. Levobunolol.
 - d. Metipranolol HCl.
 - e. Timolol.
- 5. Oral carbonic anhydrase inhibitors.
 - a. Acetazolamide.
 - b. Dichlorphenamide.
 - c. Methazolamide.
- (m) Any drug that is used for an ophthalmic therapeutic purpose and that is the subject of a new drug application approved by the food and drug administration under section 505 (c) (1) of the federal food, drug and cosmetic act, 21 USC 355, as amended.
- (n) Any drug that is used for an ophthalmic therapeutic purpose and that is generally exempt from the new drug application approval requirement contained in section 505 of the federal food, drug and cosmetic act, 21 USC 355, as amended.
- (o) Any drug that is used for an ophthalmic therapeutic purpose and that is certified by the food and drug administration pursuant to section 507 (a) of the federal food, drug and cosmetic act, 21 USC 357, or is exempt from certification under section 507 (c) of the act, as amended.
- (3) A licensed optometrist authorized to use therapeutic pharmaceutical agents may dispense a contact lens that delivers therapeutic pharmaceutical agents that are permitted under sub. (2).

SECTION 2. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register, pursuant to s. 227.22 (2) (intro.), Stats.

 (END OF TEXT OF RULE)
