

Dear Healthcare Committee Members:

The ophthalmologists of Devers Eye Institute would like to communicate our deep concern regarding the Oregon Optometric Physician's Association's introduction of HB2541. This bill holds the potential to lead to significant harm and vision loss in Oregon patients. Under HB2541, optometrists, who have not completed medical school or surgical residency training, and who are not regulated by the Oregon Medical Board, would be allowed to perform surgery on and around the eye. It would also allow optometrists to manage complex, severe, and uncontrolled glaucoma, which is a cause of permanent blindness, without the guidance of an ophthalmologist. This legislation stands to compromise the safety and quality of eye care for Oregonians by stripping away the appropriately high standards of medical and surgical training that are currently required to perform surgery on or around the eye and to manage patients with complex glaucoma. These changes would unnecessarily jeopardize the health of Oregonians. They would also damage the reputation Oregon currently holds as a place of outstanding ophthalmic care. We are known across the country for our excellent residency training program and exemplary patient care. Allowing this bill to pass would tarnish our state's reputation as a medical powerhouse.

As ophthalmologists, we work closely with optometrists every day, and we value and appreciate their contribution to eye care. However, despite the shared responsibility for the well-being of the eye and vision, it is important to recognize that there is a profound difference in the depth and breadth of training and level of expertise that gird the professions of ophthalmology and optometry. Ophthalmologists are medical doctors and surgeons who specialize in comprehensive medical and surgical care of the eye. Each ophthalmologist has completed four years of medical school, followed by a one-year hospital-based medical/surgical internship, followed by an additional three years of a hospital-based medical/surgical residency in ophthalmology. Upon graduation from a residency training program, many ophthalmologists undergo an additional one- to two-

year surgical fellowship. In all, ophthalmologists commit more than 17,000 hours to education and training prior to independently treating ocular disease and performing surgery. In contrast, optometrists are not medical doctors and their training is limited to only 2,300 hours of clinical experience, the bulk of which is directed at primary eyecare, prescribing glasses and contact lens fitting. To date, there exists no curriculum that could adequately train optometry students to perform ocular surgery, nor should there be. Eight to 10 years of training cannot be matched with a few weekend courses. Ocular surgery is delicate and complex, and the slightest error can cause permanent irreparable damage and potentially blindness. The risk of such errors increases by orders of magnitude in the hands of an inadequately trained practitioner.

The bill's provisions for optometrist management of complex glaucoma cases without oversight of an ophthalmologist is troubling as well. Glaucoma is a silent and progressive disease that causes mild changes in early stages but irreversible vision loss in later stages. Management of advanced glaucoma requires critical judgment and often surgical intervention. Undertreatment and delayed recognition of glaucoma can and does lead to permanent visual disability. Glaucoma is relatively common, so sharing patient care with optometrists is appropriate and helpful in mild and early cases; however, advanced glaucoma should continue to be managed in concert with a medical doctor. Unfortunately, confusion regarding the difference between ophthalmologists and optometrists makes it difficult for patients to advocate for their own appropriate care, so the current legal protections provided are crucial for ensuring patient safety.

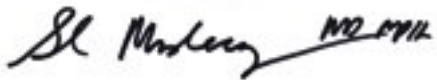
The flawed argument put forth by the proponents of this bill suggests that it would improve access to eye care by addressing a nonexistent shortage. With two world-class academic eye institutions, numerous multi-subspecialty ophthalmology practices, and a healthy share of ophthalmologists in solo private practice, 92% of Oregon residents are within a 30-minute drive of an eye surgeon. With this cohort, Oregon's ophthalmologists can see any Oregonian with an eye

issue in a timely fashion, and can address all ocular emergencies the same day they occur.

In the crucial interest of patient safety and quality of and to maintain the integrity of medical training and practice in the state of Oregon, we urge you to vote NO on HB2541. We are available to discuss any questions that you might have on this important matter.

Sincerely

The Ophthalmologists of Devers Eye Institute

A handwritten signature in black ink that reads "St. Mansberger" with "NO 07/12" written in smaller letters to the right.

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