

February 19th, 2021

House Committee on Health Care  
900 Court St. NE, H-282  
Salem, OR 97301

Dear Representatives:

My husband and I are both board certified ophthalmologists, and we are extremely concerned about HB2541. Thank you for your attention to this very important public health safety matter: this bill poses serious threats to the safety of all patients in Oregon. We strongly encourage you to oppose HB2541.

We are proud to call optometrists our friends and colleagues, but they are not medical doctors and surgeons. They do not attend medical school, nor do they complete a multi-year surgical residency in ophthalmology, which is held to the high standards of the Accreditation Council for Graduate Medical Education. I am an Associate Residency Program Director at the Oregon Health & Science University School of Medicine, Casey Eye Institute, which is recognized as a top ophthalmology residency program nationally. I have trained dozens of ophthalmology resident physicians, and I know firsthand the tremendous medical and surgical skill and applied clinical knowledge in complex ocular pathology all of our residents ***must acquire and demonstrate before graduation***. Just one of the seminal textbooks our residents must read and are tested on annually contains 5,300 pages of content. Our intensive surgical curriculum mandates each of our residents spend hundreds of hours on a surgical simulator, demonstrating graduated proficiency, before they ever operate on a human. Once they do operate on live patients, they do so under strict supervision of an attending ophthalmologist, as eye surgery is incredibly delicate and precise: if one is even off a fraction of a millimeter in ophthalmic surgery and laser, permanent visual impairment can result. Our residents perform hundreds to thousands of surgeries in this manner, preparing carefully prior to the surgery and honing their intricate skills with each surgery they perform with an expert MD at their side. Optometrists do not receive any form of training close to this and thus do not learn how to do safe and effective eye surgery – nor do they have the knowledge and skills required to catch an intraoperative complication before it happens or manage it if it does.

As a program director, I know firsthand the rigorous requirements our program has to adhere to in order to fulfill nationally-mandated and scientifically-proven ophthalmology training curricula. Optometry does not have this equivalent. This is not an elitist argument – this is a patient safety issue. This is also about humility and medical ethics. For you (and for all of my patients, friends, and family), I know that I would want the most highly trained and skilled professional (i.e. ophthalmologist MD) managing your complex eye disease and performing your eye surgery. Additionally, and perhaps more important, as ophthalmologists we are also carefully trained on knowing exactly when to perform surgery. Knowing not to perform an invasive surgical procedure is just as important as performing it, central to our Hippocratic Oath, “First, Do No Harm.”

Lastly, as an ophthalmologist who specializes in retinal diseases, I have also seen firsthand missed or incorrect diagnoses made by optometrists, leading to delays in patient treatment or even wrong treatment. Examples include retinal tears and ocular malignancies. Another example is a patient who had an eyelid lesion resembling a stye who was treated with steroid ointment by an optometrist. A side effect of steroid ointment on or in the eye is elevated intraocular pressure that can lead to irreversible optic nerve damage and blindness called glaucoma. This patient presented to me with a dangerously high eye pressure, eye pain, and vision loss. With guidance from an ophthalmologist, who has advanced medical and surgical ophthalmic training, this scenario and needless patient suffering could have been prevented. The old adage, “you don’t know what you don’t know” is absolutely true here and can be dangerous.

Thank you for your attention to this important bill, and I hope you join me in strongly opposing it for the safety of our patients and loved ones.

Sincerely,

Ambar Faridi, MD  
Jeffrey Healey, MD