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Owner: *Nina Chenault: MGR PATIENT CARE*
Policy Area: *Nursing*
References: *Policy, SRS, Scope of Practice*
Applicability: *Rees - Sharp*

Scope of Practice: Ophthalmic Assistant, 30157

I. PURPOSE:

The Purpose of this document is to clarify tasks and responsibilities an Ophthalmic Assistant can legally perform within their Scope of Practice and within department guidelines.

II. DEFINITIONS:

- A. **OPTOMETRIST- Vision Care Specialist (O.D.)**
An independent practitioner that is trained in the prescription of eyeglasses and contact lenses as well as in the detection of eye disease.
- B. **OPHTHALMOLOGIST- Medical Specialist (M.D.)**
A medical doctor specializing in the prevention, diagnosis, and medical as well as surgical treatment of vision problems and eye diseases.
- C. **OPHTHALMOLOGY- Medical Specialty**
Is the medical and surgical specialty that is concerned with the eye and surrounding structures, their proper function, eye disorders, and all aspects of vision.
- D. **EHR – Electronic Health Record.**

III. TEXT:

A. **Scope of Practice:**

1. The Ophthalmic Assistant is responsible for knowing their legal scope of practice as defined by California Business and Professions Code # 2544, American Academy of Ophthalmology and as delineated in this policy.
2. The Ophthalmic Assistant is responsible for maintaining clinical competence with regards to skills and activities expected of an Ophthalmic Assistant.
3. The Ophthalmic Assistant should not perform an activity if they question the legal scope of practice for that activity. Questions should be directed to the Optometrist, Ophthalmologist, Ophthalmic Assistant's supervisor and/or lead for clarification.

B. **Allowed Functions (or duties) include:**

1. Data collection:
 - a. Obtain authorization orders

- b. Communicate with patients to obtain their medical history
 - c. Document patient history in Electronic Health Records (EHR) or paper records
 - d. Measure Visual Acuity (distance and near)
 - e. Ishihara AOHR color vision testing and Farnsworth – Munsell's D-15 Test (15-hue Test), HRR Color vision test.
 - f. Stereo Binocular Test
 - g. Measurement of contact lens base curves with Radioscope
 - h. Obtain Blood Pressure and pulse reading as ordered
2. Verify correct patient: Obtain two (2) patient identifiers before medications and procedures are administered and performed.
3. Prepare patient for eye examination.
4. Listen to patient, collect pertinent information, and report findings to the optometrist or ophthalmologist.
5. Perform eye irrigations, as per provider order and according to Scope of Practice.
6. Administer approved eye medications safely and accurately as per SRS guidelines and Optometrist or Ophthalmologist written orders. Approved eye medications include:
 - a. cycloplegics
 - b. mydriatics
 - c. Topical anesthetics that are not controlled substances
7. Confirm medication is verified by licensed person. Document all medications administered and the patient's response to the medication..
8. Perform tests and procedures in assigned department. May include:
 - a. simple non-invasive testing of visual acuity, pupils and ocular motility
 - b. automated visual field testing
 - c. ophthalmic photography and digital imaging without Fluorescein
 - d. lensometry – manual and auto
 - e. non subjective auto refraction.
 - f. pachymetry and keratometry testing
9. Provide supportive educational material to what was already given by the Optometrist and/or Ophthalmologist.
10. Utilize universal standards and demonstrate knowledge of infection control policies and procedures.
11. Participate in clinical projects as directed by optometrist and ophthalmologist, supervisor, lead or manager to the level of the Scope of Practice.
12. Knowledge of the correct care and maintenance of the following equipment:
 - a. Autoclave
 - b. Keratometer
 - c. Lensometer

- d. Ophthalmic photography and digital imaging
 - e. Phoropter
 - f. Pachymeter
 - g. Slit lamp
 - h. Tonometer
 - i. Visual Field analyzer
13. Contact lens insertion and removal, and patient education regarding care of the contact lens.
 14. Activate emergency procedure per protocol
 15. Documentation in EHR

C. Functions which are NOT allowed include:

1. Administration of ophthalmic antibiotics.
2. May not phone into Pharmacy new prescriptions or changed prescriptions. Medication Administration Policy and Procedure # 43204.99 (See [Medication Administration and Documentation of Medication Administration at SRS](#))
3. May not follow standing orders or standardized procedures.
4. May not perform patient education other than reading written materials already discussed previously by the optometrist or ophthalmologist.
5. "No other person other than a physician, surgeon or optometrist may measure the powers or range of human vision to determine the accommodative and refractive status of the human eye or the scope of its functions in general, or prescribe ophthalmic devices." CA Business code 2540

A **prescription ophthalmic device** includes each of the following:

- a. any spectacle or contact lens ordered by a physician, surgeon or optometrist, that alters or changes the visual posers of the human eye,
- b. any contact lens described in paragraph 1 of subdivision (n) of Section 520 of the Food, Drug and Cosmetic Act (21 USC Sec 360j),
- c. Any Plano contact lens that is marketed or offered for sale in this state

IV. REFERENCES:

1. Stein, H. A., Slatt, B. J., Stein, R. M., (1994), *Ophthalmic Medical Assisting, An Independent Study Course*, 3rd Ed., International Standard Book
2. Stein, H.A., Slatt, B.J., Stein, R.M., (1994), *Ophthalmic Medical Assistant, a guide for Ophthalmic Medical Personnel*, 6th Ed., International Standard Book
3. CA Business Codes # 2540, 2541, 2544
4. Food, Drug and Cosmetic Act, paragraph 1, subdivision (n), Section 520 (21 USC Sec 360j)

ORIGINATOR:

SRS Nursing Policy and Procedure Committee

LEGAL REFERENCES:

Medical Board of California Sharp Rees-Stealy International Joint Commission on Allied Health Personnel in Ophthalmology (IJCAHPO)

V. CROSS REFERENCES:

- 1. P&P Medication Administration and Documentation of Medication Administration (at SRS), 43204.99

VI. ATTACHMENTS:

None

VII. APPROVALS:

- A. Patient Care Managers: 10/16, 05/20
- B. SRS Service Line Director: 06/20
- C. SRS Nursing Policy & Procedure Committee: 06/20
- D. SRS Policy & Procedure Committee: 07/20

VIII. REPLACES:

None

IX. HISTORY:

Historic Approvals:

- A. SRS Director of Nursing - 08/16; 05/17
- B. System Policy & Procedure Steering Committee – 02/17

System #30157; originally dtd 02/17
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Attachments

No Attachments

Approval Signatures

Step Description	Approver	Date
Site Admin	Karen Whitten: POLICY & PROCEDURE COORD	7/16/2020



Step Description	Approver	Date
Regulatory	Stormie Westendorf: REGULATORY COMP COORD	7/15/2020
Quality	Trina Souza: DIR AMBULATORY CARE SVCS-SRS	6/25/2020
Editor	Michelle Canter: SUPV PATIENT CARE	6/25/2020
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Applicability

Sharp HealthCare, Sharp Rees Stealy

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