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**SUBSTITUTE HOUSE BILL 1190**

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**State of Washington**

**64th Legislature**

**2015 Regular Session**

**By** House Health Care & Wellness (originally sponsored by Representatives Harris, Riccelli, Fitzgibbon, Robinson, Goodman, Buys, and Vick)

1 AN ACT Relating to preserving the use of hydrocodone products by  
2 licensed optometrists in Washington state; amending RCW 18.53.010;  
3 and creating a new section.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** The legislature finds that the use of  
6 hydrocodone products by licensed optometrists in Washington state has  
7 benefited patients suffering from acute pain associated with injuries  
8 to the eye for over ten years. The legislature further finds that  
9 while there are legitimate concerns regarding the propensity for  
10 addiction to these and other pain medications, the conservative  
11 prescribing habits of our state's licensed optometrists and the  
12 limited duration of use of seven days are sufficient safeguards  
13 against the overuse of hydrocodone products by the patients of this  
14 group of providers. It is therefore the intent of the legislature to  
15 preserve the ability of licensed optometrists in Washington state to  
16 use hydrocodone products to treat pain, regardless of potential  
17 action by agencies of the federal government to reclassify these  
18 products as Schedule II narcotics.

19 **Sec. 2.** RCW 18.53.010 and 2013 c 19 s 2 are each amended to read  
20 as follows:

1 (1) The practice of optometry is defined as the examination of  
2 the human eye, the examination and ascertaining any defects of the  
3 human vision system and the analysis of the process of vision. The  
4 practice of optometry may include, but not necessarily be limited to,  
5 the following:

6 (a) The employment of any objective or subjective means or  
7 method, including the use of drugs, for diagnostic and therapeutic  
8 purposes by those licensed under this chapter and who meet the  
9 requirements of subsections (2) and (3) of this section, and the use  
10 of any diagnostic instruments or devices for the examination or  
11 analysis of the human vision system, the measurement of the powers or  
12 range of human vision, or the determination of the refractive powers  
13 of the human eye or its functions in general; and

14 (b) The prescription and fitting of lenses, prisms, therapeutic  
15 or refractive contact lenses and the adaption or adjustment of frames  
16 and lenses used in connection therewith; and

17 (c) The prescription and provision of visual therapy, therapeutic  
18 aids, and other optical devices; and

19 (d) The ascertainment of the perceptive, neural, muscular, or  
20 pathological condition of the visual system; and

21 (e) The adaptation of prosthetic eyes.

22 (2)(a) Those persons using topical drugs for diagnostic purposes  
23 in the practice of optometry shall have a minimum of sixty hours of  
24 didactic and clinical instruction in general and ocular pharmacology  
25 as applied to optometry, as established by the board, and  
26 certification from an institution of higher learning, accredited by  
27 those agencies recognized by the United States office of education or  
28 the council on postsecondary accreditation to qualify for  
29 certification by the optometry board of Washington to use drugs for  
30 diagnostic purposes.

31 (b) Those persons using or prescribing topical drugs for  
32 therapeutic purposes in the practice of optometry must be certified  
33 under (a) of this subsection, and must have an additional minimum of  
34 seventy-five hours of didactic and clinical instruction as  
35 established by the board, and certification from an institution of  
36 higher learning, accredited by those agencies recognized by the  
37 United States office of education or the council on postsecondary  
38 accreditation to qualify for certification by the optometry board of  
39 Washington to use drugs for therapeutic purposes.

1 (c) Those persons using or prescribing drugs administered orally  
2 for diagnostic or therapeutic purposes in the practice of optometry  
3 shall be certified under (b) of this subsection, and shall have an  
4 additional minimum of sixteen hours of didactic and eight hours of  
5 supervised clinical instruction as established by the board, and  
6 certification from an institution of higher learning, accredited by  
7 those agencies recognized by the United States office of education or  
8 the council on postsecondary accreditation to qualify for  
9 certification by the optometry board of Washington to administer,  
10 dispense, or prescribe oral drugs for diagnostic or therapeutic  
11 purposes.

12 (d) Those persons administering epinephrine by injection for  
13 treatment of anaphylactic shock in the practice of optometry must be  
14 certified under (b) of this subsection and must have an additional  
15 minimum of four hours of didactic and supervised clinical  
16 instruction, as established by the board, and certification from an  
17 institution of higher learning, accredited by those agencies  
18 recognized by the United States office of education or the council on  
19 postsecondary accreditation to qualify for certification by the  
20 optometry board to administer epinephrine by injection.

21 (e) Such course or courses shall be the fiscal responsibility of  
22 the participating and attending optometrist.

23 (f)(i) All persons receiving their initial license under this  
24 chapter on or after January 1, 2007, must be certified under (a),  
25 (b), (c), and (d) of this subsection.

26 (ii) All persons licensed under this chapter on or after January  
27 1, 2009, must be certified under (a) and (b) of this subsection.

28 (iii) All persons licensed under this chapter on or after January  
29 1, 2011, must be certified under (a), (b), (c), and (d) of this  
30 subsection.

31 (3) The board shall establish a list of topical drugs for  
32 diagnostic and treatment purposes limited to the practice of  
33 optometry, and no person licensed pursuant to this chapter shall  
34 prescribe, dispense, purchase, possess, or administer drugs except as  
35 authorized and to the extent permitted by the board.

36 (4) The board must establish a list of oral Schedule III through  
37 V controlled substances and any oral legend drugs, with the approval  
38 of and after consultation with the pharmacy quality assurance  
39 commission. The board may include Schedule II hydrocodone combination  
40 products consistent with subsection (6) of this section. No person

1 licensed under this chapter may use, prescribe, dispense, purchase,  
2 possess, or administer these drugs except as authorized and to the  
3 extent permitted by the board. No optometrist may use, prescribe,  
4 dispense, or administer oral corticosteroids.

5 (a) The board, with the approval of and in consultation with the  
6 pharmacy quality assurance commission, must establish, by rule,  
7 specific guidelines for the prescription and administration of drugs  
8 by optometrists, so that licensed optometrists and persons filling  
9 their prescriptions have a clear understanding of which drugs and  
10 which dosages or forms are included in the authority granted by this  
11 section.

12 (b) An optometrist may not:

13 (i) Prescribe, dispense, or administer a controlled substance for  
14 more than seven days in treating a particular patient for a single  
15 trauma, episode, or condition or for pain associated with or related  
16 to the trauma, episode, or condition; or

17 (ii) Prescribe an oral drug within ninety days following  
18 ophthalmic surgery unless the optometrist consults with the treating  
19 ophthalmologist.

20 (c) If treatment exceeding the limitation in (b)(i) of this  
21 subsection is indicated, the patient must be referred to a physician  
22 licensed under chapter 18.71 RCW.

23 (d) The prescription or administration of drugs as authorized in  
24 this section is specifically limited to those drugs appropriate to  
25 treatment of diseases or conditions of the human eye and the adnexa  
26 that are within the scope of practice of optometry. The prescription  
27 or administration of drugs for any other purpose is not authorized by  
28 this section.

29 (5) The board shall develop a means of identification and  
30 verification of optometrists certified to use therapeutic drugs for  
31 the purpose of issuing prescriptions as authorized by this section.

32 (6) Nothing in this chapter may be construed to authorize the  
33 use, prescription, dispensing, purchase, possession, or  
34 administration of any Schedule I or II controlled substance, except  
35 hydrocodone combination products. The provisions of this subsection  
36 must be strictly construed.

37 (7) With the exception of the administration of epinephrine by  
38 injection for the treatment of anaphylactic shock, no injections or  
39 infusions may be administered by an optometrist.

1       (8) Nothing in this chapter may be construed to authorize  
2 optometrists to perform ophthalmic surgery. Ophthalmic surgery is  
3 defined as any invasive procedure in which human tissue is cut,  
4 ablated, or otherwise penetrated by incision, injection, laser,  
5 ultrasound, or other means, in order to: Treat human eye diseases;  
6 alter or correct refractive error; or alter or enhance cosmetic  
7 appearance. Nothing in this chapter limits an optometrist's ability  
8 to use diagnostic instruments utilizing laser or ultrasound  
9 technology. Ophthalmic surgery, as defined in this subsection, does  
10 not include removal of superficial ocular foreign bodies, epilation  
11 of misaligned eyelashes, placement of punctal or lacrimal plugs,  
12 diagnostic dilation and irrigation of the lacrimal system,  
13 orthokeratology, prescription and fitting of contact lenses with the  
14 purpose of altering refractive error, or other similar procedures  
15 within the scope of practice of optometry.

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