



ILLINOIS SOCIETY OF EYE PHYSICIANS & SURGEONS

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IDFPR Rule Allowing Optometrists to Perform Eye Surgery

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Action: Proposed Rule Published December 29, 2017
First Notice ends 2/12/2018

Summary: This Rule, proposed by the Illinois Department of Financial & Professional Regulation, would add seven surgical procedures and three different types of injections to the optometry scope of practice without commensurate legislative authorization. The Optometric Practice Act specifically prohibits surgery and it does not authorize the injections proposed in the Rule.

ISEPS Position: OPPOSE
Retain existing rules as authorized in the Optometric Practice Act

Rationale: *IDFPR lacks the legislative authority to adopt this Rule.* The Optometric Practice Act specifically prohibits surgery to be performed by optometrists. In addition, the Act lists only one type of medication that can be administered by injection (an “Epi-pen” for severe allergic reaction). After extensive debate and discussion with interested parties, the General Assembly passed the renewal of the optometry practice act in 2016 without permitting optometrists to perform surgical procedures.

The Department has not provided any evidence that reducing the educational requirements for becoming an eye surgeon has any benefit to the public, that allowing non-physician optometrists to perform surgery would be safe, or that any Illinois citizens are unable to get care from a competent eye surgeon.

The Rule is overly broad, and conflicts with itself. For example, it would allow removal of a “benign” superficial lesion. However, it is not possible to confirm if a lesion is benign or is a malignant cancer without actually removing it and conducting a pathology examination.

The proposed training standard is grossly inadequate and puts the public at risk for misdiagnoses, improperly performed procedures, and lack of ability to respond to intra-operative complications. Optometrists are not medical doctors; they do not receive a medical/surgical education and do not complete residency training which is essential to develop the skills to perform any form of surgery. This Rule grants optometrists surgical privileges, but specifies only 32 hours of training to be incorporated in the normal four years of optometry school. This is compared to the training currently required by Illinois law that mandates graduation from a 4-year medical school, plus a year of medical/surgical internship and three more years of ophthalmology residency before entering practice to perform eye surgery.

Conclusion: The Illinois Society of Eye Physicians & Surgeons recommends that this Rule be rejected because the Department does not have the authority to adopt it. Further, it would subject Illinois citizens to unnecessary risk due to inadequate training standards and does nothing to improve the availability or quality of surgical eye care in the state.