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Document No. 5158

**DEPARTMENT OF LABOR, LICENSING AND REGULATION**

**BOARD OF EXAMINERS IN OPTOMETRY**

CHAPTER 95

Statutory Authority: 1976 Code Sections 40‑1‑70, 40-37-40(A)(7), and 40-37-320

95-4. Continuing Education.

95-7. Optometrists’ Offices. General Requirements, Patient Records Handling, and Sanitary Standards. (New)

95-8. Ethics. (New)

**Synopsis:**

The South Carolina Board of Examiners in Optometry proposes to amend Chapter 95 of the Code of Regulations to add regulations for optometrists’ offices, which include mobile units, as authorized by S.C. Code Section 40-37-320, and to adopt a code of professional ethics appropriate to the profession of optometry.

A Notice of Drafting was published in the *State Register* on June 24, 2022.

**Instructions:**

Print the regulation as shown below. All other items remain unchanged.

**Text:**

95-4. Continuing Education.

A. Each licensee seeking renewal of a license must certify completion of forty (40) hours of continuing education (CE) for the biennial licensure period. Continuing education instruction must be on subjects relative to optometry.

B. Each licensee shall report CE hours to the electronic tracking system designated by the Department for CE compliance and monitoring.

C. CPR certification courses are approved for four hours; CPR re-certification courses are approved for two hours.

D. An unlimited number of CE hours can be from courses sponsored by optometric or medical organizations or optometry or medical schools as approved by the Board.

E. No more than fifteen (15) of the forty (40) CE hours required for a biennial licensure period can be from online course unless otherwise approved by the Board. No more than ten (10) of the fifteen (15) online hours may be courses that are pre-recorded.

95-7. Optometrists’ Offices. General Requirements, Patient Records Handling, and Sanitary Standards.

A. General Requirements.

1. All office facilities, which include mobile units, shall be maintained adequately and appropriately for the practice of optometry. The minimum standard for all facilities shall include:

a. Adequate heating and cooling;

b. Sufficient ventilation in all areas;

c. Sufficient lighting in all areas;

d. Sanitary storage that is adequate for the size of the facility; and

e. Proper identification of all personnel and displaying of license(s) in accordance with S.C. Code Section 40-37-325.

2. All equipment and instruments must be kept in working order. All office facilities, including mobile units, shall be equipped with, but not limited to, the following diagnostic equipment:

a. Phoroptor

b. Visual acuity testing distance and near charts and/or projector

c. Retinascope

d. Keratometer and/or autokeratometer

e. Ophthalmoscope: direct and binocular indirect with condensing lenses

f. Tonometer

g. Biomicroscope (Slit Lamp)

h. Lensometer

i. Color vision testing

j. Stereopsis Testing

k. Diagnostic pharmaceutical agents within expiration dates

l. Foreign body removal kit

m. Blood pressure measuring device

n. Goniscopy lens.

3. A licensed optometrist is responsible for maintaining an official business address of record and telephone number on file with the Board office for each registered branch office or mobile unit.

4. Branch office registrations shall be renewed in conjunction with the optometrist’s license renewal.

5. An office facility, including a mobile unit, must comply with all applicable federal, state and local laws, regulations, and ordinances, and the office facility, including a mobile unit, shall possess all applicable county, state, and city licenses or permits to operate at the location(s) where services are being provided.

6. Pharmaceutical agents must be stored in a secure, sanitary place.

B. Patient Records Handling.

1. In addition to the requirements set forth in Regulation 95-6, all patient records must include the office facility’s, including mobile unit’s, name, contact information, including the official business address of record and the telephone number on file with the Board office, as well as the name(s) of the optometrist(s) rendering services.

2. If the patient is a minor, the patient’s parent or legal guardian must be provided with a consent form prior to the examination. No services may be performed on a minor without consent from the minor’s parent or legal guardian. The consent form must be saved in the patient’s records and shall expire one (1) year from the date of initial consent.

3. For all office facilities, including mobile units, medical records and patient information must be stored on the premises in a confidential, secured location not accessible to the public. Medical records and patient information must be stored either physically or with an electronic health record system.

C. Sanitary Standards

1. All office facilities, which include mobile units, shall provide and maintain sanitary facilities and conditions in accordance with the following:

a. Premises shall be kept neat and clean, free of accumulated rubbish and substances of similar nature which create a public health nuisance.

b. All instruments or equipment used for examination and treatment purposes shall be cleaned and disinfected between patients. Cleaning and disinfection, as needed, of equipment used and/or maintained in each area, appropriate to the area and the equipment’s purpose or use, shall be accomplished. A method of monitoring disinfectant performance shall be employed.

c. Instruments and testing equipment must be maintained in a clean and hygienic manner. This includes cleaning all clinical equipment that comes into contact with patients with alcohol wipes or other standard methods recommended by the CDC.

d. Premises shall be kept free of all insects and vermin.

e. Medical waste containers must be secure and properly maintained.

95-8. Ethics.

A. Patients.

1. The licensed optometrist has a duty to:

a. Keep the patient’s eye, vision and general health paramount at all times;

b. Respect the patient’s rights and dignity regarding their healthcare decisions;

c. Inform the patient of the proposed treatments, any reasonable alternatives, or referrals to another optometrist or health professional when appropriate, in a manner that allows the patient to become involved in treatment decisions;

d. Ensure confidentiality and privacy of patient’s protected health and other personal information;

e. Communicate truthfully and shall not represent the care being rendered to their patients in a false or misleading manner;

f. Be familiar with the signs of abuse and neglect and to report suspected cases if necessary; and

g. Refrain from harming the patient.

2. While an optometrist, in serving the public, may exercise reasonable discretion in selecting patients for their practices, optometrists shall not refuse to accept patients into their practice or deny service to patients because of the patient’s race, creed, color, gender, sexual orientation or gender identity or national origin.

3. Once an optometrist has undertaken a course of treatment, the optometrist should not discontinue that treatment without giving the patient adequate notice and the opportunity to obtain the services of another optometrist or health professional. Care should be taken that the patient’s optical health is not jeopardized in the process.

B. Education.

1. The privilege of optometrists to be accorded professional status rests primarily in the knowledge, skill and experience with which they serve their patients and society. All optometrists, therefore, have the obligation of keeping their knowledge and skill current.

2. Optometrists shall be obliged to seek consultation whenever the welfare of the patients will be safeguarded or advanced by utilizing those who have special skills, knowledge, and experience. When patients visit or are referred to specialists, or consulting optometrists or health professionals for consultation:

a. The consulting optometrist or health professional, upon completion of their care, shall return the patient, unless the patient expressly reveals a different preference to the referring optometrist, or, if none, to the optometrist of record for future care.

b. The consulting optometrist or health professional shall be obliged when there is no referring optometrist and upon a completion of their treatment to inform patients when there is a need for further optical care.

C. Ability to Practice.

1. It is unethical for an optometrist to practice while abusing controlled substances, alcohol or other chemical agents which impair the ability to practice. All optometrists have an ethical obligation to urge chemically impaired colleagues to seek treatment.

2. Optometrists are the leaders of the healthcare team. As such, their behavior in the workplace is instrumental in establishing and maintaining a practice environment that supports the mutual respect, good communication, and high levels of collaboration among team members required to optimize the quality of patient care provided.

**Fiscal Impact Statement:**

There will be no cost incurred by the State or any of its political subdivisions for these regulations.

**Statement of Rationale:**

The updated regulations will provide clear guidance to licensees regarding how to maintain adequate, appropriate and sanitary office facilities in the practice of optometry. The regulations will also provide guidance on the proper handling of patient records. The Board is providing guidance to ensure consistency across all office facilities in the interest of patient care and safety. The updated regulations will also provide guidance on ethics for licensees and will increase the number of online CE hours licensees can obtain.