

WEST VIRGINIA  
SECRETARY OF STATE

KEN HECHLER

ADMINISTRATIVE LAW DIVISION

Form #3

FILED

JUL 28 11 53 AM '97

OFFICE OF WEST VIRGINIA  
SECRETARY OF STATE

NOTICE OF AGENCY APPROVAL OF A PROPOSED RULE  
AND  
FILING WITH THE LEGISLATIVE RULE-MAKING REVIEW COMMITTEE

AGENCY: WV Board of Examiners in Optometry TITLE NUMBER: 14-2

CITE AUTHORITY Chapter 30-8-2a and Chapter 30-8-2b

AMENDMENT TO AN EXISTING RULE: YES  NO

IF YES, SERIES NUMBER OF RULE BEING AMENDED: \_\_\_\_\_

TITLE OF RULE BEING AMENDED: \_\_\_\_\_

IF NO, SERIES NUMBER OF NEW RULE BEING PROPOSED: Series 2

TITLE OF RULE BEING PROPOSED: Title 14-2 Rules for Expanded Prescriptive Authority

THE ABOVE PROPOSED LEGISLATIVE RULE HAVING GONE TO A PUBLIC HEARING OR A PUBLIC COMMENT PERIOD IS HEREBY APPROVED BY THE PROMULGATING AGENCY FOR FILING WITH THE SECRETARY OF STATE AND THE LEGISLATIVE RULE MAKING REVIEW COMMITTEE FOR THEIR REVIEW.

E. Clifton Hays, D.D.S.  
Authorized Signature *President*

\$8.00



DATE: June 25, 1997

TO: LEGISLATIVE RULE-MAKING REVIEW COMMITTEE

FROM: West Virginia Board of Examiners in Optometry

LEGISLATIVE RULE TITLE: 14-2

1. Authorizing statute(s) citation S.B. 524

2. a. Date filed in State Register with Notice of Hearing:

June 23, 1997 (Comment Period)

b. What other notice, including advertising, did you give of the hearing?

newspapers and mailings

c. Date of hearing(s) or public Comment Period: **Beginning 6/23/97 and**  
Comment period ended on July 23, 1997 at noon.

d. Attach list of persons who appeared at hearing, comments received, amendments, reasons for amendments.

Attached X No comments received                     

e. Date you filed in State Register the agency approved proposed Legislative Rule following public hearing:  
(be exact)

July 28, 1997

f. Name, address and phone number(s) of agency person(s) to contact for additional information: (Please type)

Dr. Clifton Hyre, President Phone: 304-636-9111

115 Wilton Avenue

Elkins, WV 26241-3260



## WEST VIRGINIA BOARD OF OPTOMETRY

101 Michael Street  
Clarksburg, West Virginia 26301-3937  
(304) 627-2106

### SUMMARY OF PROPOSED RULE, 14-2

Legislative rule 14-2 provides the West Virginia Board of Examiners in Optometry the necessary guidelines for education, certification, re-certification, and expanded prescriptive authority.

Educational requirements are based on the national norms for the scope of prescriptive authority included in Senate Bill 524 and Rule 14-2-.

Certification and re-certification requirements are based on national norms for the scope of practice of optometry.

The categories of drugs included in the formulary are based on the national norms for states which have expanded the scope of prescriptive authority since approximately 1987.



## WEST VIRGINIA BOARD OF OPTOMETRY

101 Michael Street  
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### Circumstances Requiring Rule 14-2

Senate Bill 524, passed April 8, 1997, effective July 8, 1997, provides that the West Virginia Board of Examiners in Optometry propose legislative rules for the implementation of the provisions of the new law.

APPENDIX B

FISCAL NOTE FOR PROPOSED RULES

Rule Title: TITLE 14 SERIES 2-RULES FOR EXPANDED PRESCRIPTIVE  
 Authority  
 Type of Rule:  Legislative  Interpretive  Procedural  
 Agency: West Virginia Board of Examiners in Optometry  
 Address: 101 Michael Street  
Clarksburg, WV 26301-3937

1. Effect of Proposed Rule

|                             | ANNUAL FISCAL YEAR |          |         |       |            |
|-----------------------------|--------------------|----------|---------|-------|------------|
|                             | INCREASE           | DECREASE | CURRENT | NEXT  | THEREAFTER |
| <u>ESTIMATED TOTAL COST</u> | \$ NA              | \$ NA    | \$ NA   | \$ NA | \$ NA      |
| PERSONAL SERVICES           | NA                 | NA       | NA      | NA    | NA         |
| CURRENT EXPENSE             | NA                 | NA       | NA      | NA    | NA         |
| REPAIRS & ALTERNATIONS      | 0                  | 0        | 0       | 0     | 0          |
| EQUIPMENT                   | 0                  | 0        | 0       | 0     | 0          |
| OTHER                       | NA                 | NA       | NA      | NA    | NA         |

2. Explanation of above estimates: NA

3. Objectives of these rules: Senate Bill 524, passed April 8, 1997, effective July 8, 1997, provides that the West Virginia Board of Examiners in Optometry propose legislative rules for the implementation of the provisions of the new law.

Legislative Rule 14-2 provides the West Virginia Board of Examiners in Optometry guidelines for education, certification, re-certification, and expanded prescriptive authority.

Rule Title: Title 14 Series 2

4. Explanation of Overall Economic Impact of Proposed Rule.
- A. Economic Impact on State Government. NA
  
  - B. Economic Impact on Political Subdivisions; Specific Industries; Specific groups of Citizens.  
A reasonable fee for certification and re-certification will be applied to optometrists seeking to use the expanded prescriptive authority of this rule.
  
  - C. Economic Impact on Citizens/Public at Large.  
The expanded prescriptive authority provided by S.B. 524 will allow the public at large more cost effective access to eye health care.

Date: June 19, 1997

Signature of Agency Head or Authorized Representative

Barbara J. Palmer

Administrative Secretary

FILED

TITLE 14  
LEGISLATIVE RULES  
WEST VIRGINIA BOARD OF EXAMINERS IN OPTOMETRY

JUL 28 11 54 AM '97

SERIES 2  
RULES FOR EXPANDED PRESCRIPTIVE AUTHORITY

OFFICE OF WEST VIRGINIA  
SECRETARY OF STATE

**14-2-1. General.**

1.1. Scope. – This legislative rule establishes the requirements, procedures and standards for the certification and re-certification of individual optometrists, and expanded drug formulary, by the West Virginia Board of Examiners in Optometry, regarding prescriptive authority and expanded prescriptive authority, as defined in Chapter 30-8-2a. and 30-8-2b. of the West Virginia Code.

1.2. Authority. – W. Va. Code 30-8-2a. and 30-8-2b.

1.3. Filing Date. – BLANK

1.4. Effective Date. –BLANK

**14-2-2. Certification.**

2.1. The West Virginia Board of Optometry (the Board) shall require the following certification process of individual optometrists before they may be authorized to prescribe any of the oral drugs contained within the provisions of Chapter 30-8-2a. and Chapter 30-8-2b. of the West Virginia Code:

2.1.a. Those optometrists who have previously attained topical therapeutic certification, must satisfactorily complete, and pass an examination in, a course in clinical pharmacology as applied to optometry. This course shall have particular emphasis on the administration of oral pharmaceutical agents for the purpose of examination of the human eye, and analysis of ocular functions and treatment of visual defects or abnormal conditions of the human eye and its adnexa. In addition, the source shall include instruction on the clinical use of Schedule III,IV, and V agents. This course shall consist of a minimum of 30 hours of instruction in clinical systemic pharmacology. The course shall be taught by a school or college of optometry or medical school, accredited by a regional or professional accreditation organization which is recognized or approved by the council on postsecondary accreditation or by the United States Department of Education, or federally sponsored health education center, or other non-profit continuing education agencies in cooperation with appropriate optometry or medical school faculty. All courses of instruction must be approved by the Board.

2.1.b. Passage of an examination relating to the treatment and management of ocular disease, which is prepared, administered, and graded by the National Board of Examiners in Optometry or other nationally recognized optometric organization as approved by the board.

**14- 2-3 Re-certification.**

3.1. Each optometrist applying for annual re-certification shall furnish to the board satisfactory evidence that they have taken in the preceding year a minimum of fifteen (15) hours of educational or postgraduate programs approved by the board, of which a minimum of at least six (6) hours must be in ocular pathology and/or therapeutic pharmacological agents

**14-2-4. Insurance.**

4.1. All optometrists must carry liability insurance coverage in an amount not less than one million dollars (\$1,000,000). No optometrist shall practice under the provisions of this section unless and until they have submitted to the board evidence of liability insurance coverage in an amount not less than one million dollars (\$1,000,000).

4.2. It will be the responsibility of each individual optometrist to furnish proof of current liability insurance coverage to the Board upon application for certification and re-certification.

**14-2-5. Procedures for Certification.**

5.1. The educational and training requirements for certification by the Board shall be from a college or university accredited by a regional or professional accreditation organization which is recognized or approved by the council on postsecondary accreditation or by the United States Department of Education.

**14-2-6. Fees.**

6.1. The administrative fee for the certification of an individual optometrist for an expanded scope of practice prescriptive authority shall be a reasonable fee, determined by the Board.

6.2. The administrative fee for the re-certification of an individual optometrist for an expanded scope of practice prescriptive authority shall be a reasonable fee, determined by the Board.

**14-2-7. Drug Formulary.**

7.1. The categories of oral drugs to be considered rational to the diagnosis and treatment of the human eye and its appendages shall include:

7.1.a. Antihistamines for the purpose of treatment of visual defects or abnormal conditions of the human eye and its appendages.

7.1.b. Corticosteroids for the purpose of treatment of visual defects or abnormal conditions of the human eye and its appendages.

7.1.c. Analgesics for the purpose of treatment of visual defects or abnormal conditions of the human eye and its appendages.

7.1.d. Anxiolytics for the purpose of treatment of visual defects or abnormal conditions of the human eye and its appendages.

**14-2-8. Restrictions.**

8.1. An optometrist may not establish a pharmacy in an optometric office or sell pharmaceutical agents prescribed in treatment unless there is a licensed pharmacist on staff and present when these prescriptions are filled. However, nothing in this section or in any other provision of law prohibits an optometrist who is so certified from administering or supplying pharmaceutical agents to a patient, without charge for the pharmaceutical agents, to initiate appropriate treatment.

8.2. Any optometrist practicing under the authority of this section shall be held to the same standards of care as that of other health care practitioners providing similar services

8.3 . No optometrist shall practice under the provisions of this section unless and until they have submitted to the board evidence of satisfactory completion of all education requirements of 14-2-2.1.a. and 14-2-2.1.b., and have been certified by the board as educationally qualified.

**Summary of changes (Page 3 - 14-2-8.3.):**

14-2-8.3. The original proposed rule had an error in the numbering referred to within this paragraph. The original was "... all education requirements of 14-2-2a. and 14-2-2b.,...". This was corrected to read "... all education requirements of 14-2-2.1.a. and 14-2-2.1.b.,..."

**THE WEST VIRGINIA OPTOMETRIC ASSOCIATION, INC.**

815 Quarrier Street, Morrison Bldg., Suite 215  
Charleston, West Virginia 25301  
(304) 345-4710

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Reply to:

David W. Harshberger, O.D.  
Middle Island Health Clinic  
North & Fair Streets  
Middlebourne, WV 26149  
Phone: (304)758-2121  
Fax: (304)758-4646

July 1, 1997

West Virginia Board of Optometry  
101 Michael Street  
Clarksburg, WV 26301

Re: Proposed Rule 14-2

Dear Board Members:

This letter is for the purpose of comments on the proposed legislative rule 14-2, Rules for Expanded Prescriptive Authority. The West Virginia Optometric Association membership has authorized me to draft this letter on their behalf.

Concerning section 14-2-2, Certification, it is our belief that only one examination is necessary to be passed for certification of oral prescriptive authority. This is not to imply that the minimum 30 hours of instruction in clinical systemic pharmacology, as currently proposed in 14-2-2.1.a, be eliminated. We agree with this provision. However, if an applicant can pass a test with this course, they should not be required to also pass a national test, as required under 14-2-2.1.b. Conversely, passage of this national test would eliminate passing a test taken along with an approved course of instruction.



*Affiliated with American Optometric Association*

**THE WEST VIRGINIA OPTOMETRIC ASSOCIATION, INC.**

815 Quarrier Street, Morrison Bldg., Suite 215

Charleston, West Virginia 25301

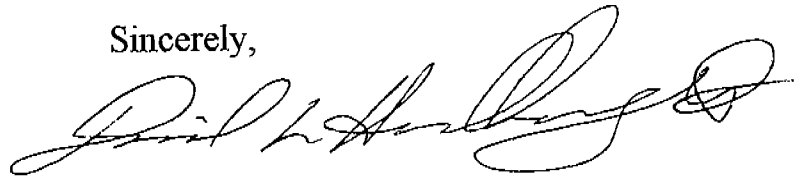
(304) 345-4710

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Reply to:

Requiring passage of both tests is repetitive, costly, and time consuming for the applicant, while passage of either test establishes competence, and adequately protects the citizens of West Virginia. On behalf of the West Virginia Optometric Association, thank you for your consideration of these proposed changes.

Sincerely,

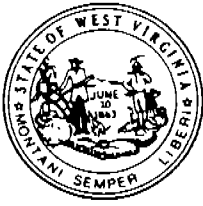


David W. Harshberger, O.D.  
President

DWH/rb



Affiliated with American Optometric Association



## WEST VIRGINIA BOARD OF EXAMINERS IN OPTOMETRY

101 Michael Street  
Clarksburg, West Virginia 26301-3937  
(304) 627-2106  
Fax: (304) 627-2106

July 23, 1997

David W. Harshberger, O.D.  
The West Virginia Optometric Association  
Middle Island Health Clinic  
North & Fair Streets  
Middlebourne, WV 26149

RE: Comments on Proposed Rules for Expanded Prescriptive Authority

Dear Dr. Harshberger:

You have questioned the purpose and reasoning behind the testing requirements included in proposed Rule 14-2. With this letter the Board will offer our explanation.

In preparing the necessary and appropriate conditions for implementing the new law as provided by Senate bill 524, The Board reviewed the current laws of many other states across the country. At last count, more than 38 states now grant expanded prescriptive authority for optometrists to prescribe oral pharmaceuticals. We paid particular attention to our southeastern regional states which have similar or greater scope of practice as West Virginia.

In an effort to be consistent with what other states have already proven to be successful, the proposed education and training course be extensive, detailed and thorough. This is not to be a continuing education course where attendance for a specific number of hours is recorded. Because this course could be given at different universities across the country, the exact uniform nature of the courses may not be identical. The Board's experience with testing and licensing leads us to believe that completion and passage of the educational training course is a necessity.

The majority of states now require passage of a nationally standardized examination covering the treatment and management of ocular disease before granting expanded prescriptive authority to individual optometrists. Passage of a nationally standardized test also eliminates some of the concern regarding differences in education courses of West Virginia and the profession of optometry that nationally standardized testing be used to certify optometrists for expanded prescriptive authority.

Sincerely,

B. J. Nibert, O.D.  
Board Member  
Chairman, Title 14-2 Committee

BJN/bp

CRAIG C. HYRE, O.D.

Main Street and Files Creek Road  
P.O. Box 420  
Beverly, WV 26253  
Telephone: (304) 636-7126

July 7, 1997

West Virginia Board of Optometry  
101 Michael Street  
Clarksburg, W.Va. 26301-3937

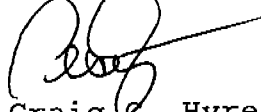
Dear Doctor:

I am writing to urge the support and passage of the enhancement of the Expanded Scope of Optometric Practice Law (formerly SB 524). As you know, this proposal has been submitted to Rules and Regulations via the Interim Committee on Legislative Rulemaking Review.

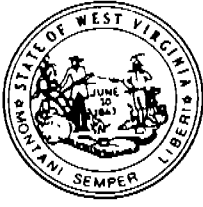
This enhancement is a natural extension of the law which was signed in January 1997 by Governor Underwood. Clearly it demonstrates our ability to self regulate, as all other medical professions do. The certification and recertification process will allow only those who are instructed, experienced, licensed and insured to perform the given procedures.

Please advise the legislators on the above named committee that the public interest is strongly in favor of the passage of this rule.

Sincerely,



Craig C. Hyre, OD  
Fellow, American Academy of Optometry



## WEST VIRGINIA BOARD OF EXAMINERS IN OPTOMETRY

101 Michael Street  
Clarksburg, West Virginia 26301-3937  
(304) 627-2106  
Fax: (304) 627-2106

July 23, 1997

Dr. Craig Hyre  
Optometrist  
Main Street and Files Creed Road  
P. O. Box 420  
Beverly, WV 26253

RE: Comments on Proposed Rules for Expanded Prescriptive Authority

Dear Dr. Hyre:

Thank you for your comments on the proposed rules for implementing the law provided for in Senate Bill 524. Your letter will be included in the filing to the Legislative Rule Making Review Committee.

Sincerely,

A handwritten signature in cursive script that reads "B. J. Nibert, O.D.".

B. J. Nibert, O.D.  
Board Member  
Chairman, Title 14-2 Committee

BJN/bp



DR. JOSEPH AUDIA  
Optometrist

59 Water Street  
P.O. Box 151  
Salem, West Virginia 26426-0151  
Telephone: (304) 782-1005

July 8, 1997

West Virginia Board of Optometry  
101 Michael Street  
Clarksburg, WV 26301-3937

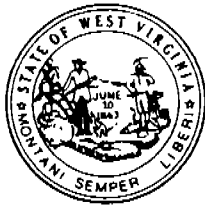
Dear Board Members :

Thank you for your work on the proposed legislative rules covering Chapter 30-8-2a and 30-8-2b. My comments are as follows :

- Does the ban on the sale of pharmaceutical agents cover OTC items used for treatment ( such as contact lens care solutions, eyelid scrubs, artificial tear drops and ointments ) ? It would seem a restraint of trade if an eyecare facility could not provide these OTC products that could be sold in the open market by a grocery or convenience store.
- Should you propose quantity limits on analgesics prescriptions ?
- Why should an applicant have to pass two examinations ? It makes sense to require a course of study and to pass a test. However, your proposal would require a course with a test and a separate national board ( TMOD ) test. It seems inappropriate to be tested on the same material twice. You should accept either but not require both.
- How do these rules apply to the testing of an applicant for new license? Is our board going to test the applicant. Clarifying the previous question could answer this concern.

Sincerely,

Joseph Audia, O.D.



## WEST VIRGINIA BOARD OF EXAMINERS IN OPTOMETRY

101 Michael Street  
Clarksburg, West Virginia 26301-3937  
(304) 627-2106  
Fax: (304) 627-2106

July 23, 1997

Dr. Joseph Audia  
Optometrist  
59 Water Street  
P.O. Box 151  
Salem, WV 26526-0151

RE: Comments on Proposed Rules for Expanded Prescriptive Authority

Dear Dr. Audia:

This letter contains the Boards responses to your comments regarding proposed Rule 14-2:

1. The restriction on optometrists selling pharmaceuticals is intended to be for these drugs which need a written prescription to obtain. Over-the-counter drugs do not fall with this category.
2. Based on what is becoming standard of practice for Optometric expanded prescriptive authority, The Board has chosen to allow the medical decision making to remain with the properly certified practitioner. To arbitrary limit any medication may put the patients best interest at risk.
3. Please refer to the enclosed copy of response to WVOA regarding education, testing, and certification.
4. Currently all accredited Optometric educational schools and colleges approved by the Board provide education and training which satisfy the requirements as sent forth in proposed Rule 14-2. Nationally standardized tests are required in some, but not all, schools and colleges as a requirement for obtaining a Doctor of optometry degree. For those students not attending a school where the nationally standardized testing is required, it would be their responsibility to pursue. Typically these tests are given at 15-20 locations two or three times during a given year.

Sincerely,

B. J. Nibert, O.D.  
Board Member  
Chairman, Title 14-2 Committee

Enclosure  
BJN/bp

*Dr. J. I. Rodgin*  
OPTOMETRIST  
401 BLAND STREET  
BLUEFIELD, W. VA. 24701

July 14, 1997

May I suggest that any additional required educational lectures be given in lieu of the regular educational program at our mid-year meeting in Charleston.

I do not feel it is necessary to augment this with any additional program since we are already qualified for the oral administration of drugs.

Sincerely,

*Jay*



## WEST VIRGINIA BOARD OF EXAMINERS IN OPTOMETRY

101 Michael Street  
Clarksburg, West Virginia 26301-3937  
(304) 627-2106  
Fax: (304) 627-2106

July 23, 1997

Dr. J. T. Rodgin  
Optometrist  
401 Bland Street  
Bluefield, WV 24701

Re: Your note of July 14, 1997

Dear Dr. Rodgin:

It is the responsibility of the Board to propose rules and regulations for the proper education, certification, and re-certification of optometrists as related to expanded prescriptive authority. The educational requirements proposed by the Board for certification according to Rule 14-2 are separate and distinct from continuing education hours. The mid-year meeting you refer to is sponsored by the West Virginia Optometric Association. The West Virginia Board of Optometry is not involved in the educational programs of the West Virginia Optometric Association.

To clarify your statement regarding qualification for the oral administration of drugs. Since 1976 qualified optometrists in West Virginia have been authorized to use all classes and categories of pharmaceutical agents which can be topically applied to the eye. Prior to the passage of Senate Bill 524, the scope of optometric practice did not authorize the oral administration of drugs.

Enclosed is a copy of the response to the WVOA regarding educational and testing requirements.

Sincerely,

A handwritten signature in cursive script that reads "B. J. Nibert, O.D.".

B. J. Nibert, O.D.  
Board Member  
Chairman, Title 14-2 Committee

Enclosure  
BJN/bp



# West Virginia STATE MEDICAL ASSOCIATION

4307 MacCORKLE AVENUE, SE, CHARLESTON, WEST VIRGINIA  
Address Reply To: P. O. Box 4106, Charleston, West Virginia 25364

Phone (304) 925-0342

Fax (304) 925-0345

E-mail address: wwsma@aol.com

RONALD E. CORDELL, M.D.

President  
Charleston

THOMAS H. CHANG, M.D.

President Elect  
Clarksburg

DAVID W. AVERY, M.D.

Vice President  
Parkersburg

SHERMAN E. HATFIELD, M.D.

Treasurer  
Charleston

GEORGE RIDER

Executive Director  
Charleston

July 10, 1997

Sent via certified mail: P 490 326 077

West Virginia Board of Optometry  
101 Michael Street  
Clarksburg, WV 26301-3937

**RE: Title 14, Series 2, Rules for Expanded Prescriptive Authority**

To whom it may concern:

Thank you for the opportunity to comment on the above-captioned rules.

We have grave reservations regarding 14-2-7 Drug Formulary in that it does not, in its form, seem to be a true formulary and as such would cause a great deal of confusion.

According to Senate Bill 524, "The board shall provide a formulary classifying those categories of oral drugs rational to the diagnosis and treatment of conditions or diseases of the human eye and its appendages, which may be prescribed by optometrists form Schedules III, IV and V of the Uniform Controlled Substance Act, article two, chapter sixty-a of this code..."

The rule is confusing in that it does not rank drugs in the formulary pursuant to accepted schedules, thus offering a far-too-broad opportunity for confusion on the part of the practitioner and abuse on the part of the practitioner who is not competent.

To make the rules clearer for all involved, we would suggest you withdraw the rule and refile it again, appropriately drafted. In the event you choose not to follow this course, we offer the following specific comments related to the so-called drug formulary detailed in the rule and the drugs it allows.

With regards to 14-2-7.1.b which states:

Corticosteroids for the purpose of treatment of visual defects or abnormal conditions of the human eye and its appendages...

We would request that 7.1.b be deleted because corticosteroids are *very dangerous medications* and *should not* be used by individuals who have not had years of *supervised clinical exposure* to patients taking these medications and have witnessed first had the severe side effects of these medications.

With regards to 7.1.c which states:

Analgesics for the purpose of treatment of visual defects or abnormal conditions of the human eye and its appendages...

West Virginia Board of Optometry  
Page 2  
July 10, 1997

We would request that 7.1.c be amended as follows to bring it into compliance with the provisions of SB 524:

Analgesics, limited to oral non-steroidal anti-inflammatory drugs, for the purpose of treatment of visual defects or abnormal conditions of the human eye and its appendages...

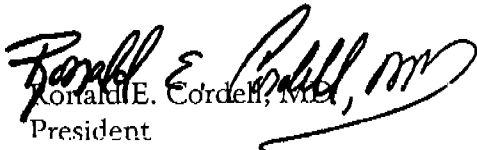
Analgesics is a very broad group of drugs. If optometrists are asking for Schedule II drugs such Tylenol #3, a narcotic, then the rule should specifically address the management and supervision of these drugs and how optometrists qualify to use them.

With regards to 14-2-7.1.d which states:

Anxiolytics for the purpose of treatment of visual defects or abnormal conditions of the human eye and its appendages...

We would request 14-2-7.1.d be deleted because anxiolytics, "downers," if you will, are not "for the purpose of treatment of visual defects or abnormal conditions of the eye and its appendages." The only time these might be prescribed is during surgery to reduce anxiety. In this instance, they would be administered intravenously.

Sincerely,

  
Ronald E. Cordell, M.D.  
President

cc: Dr. Stephen Powell  
Dr. G. William Lavery  
Debra Graham, Counsel, Legislative Rule-Making Review Committee  
Delegate Mark Hunt, House Chair, Legislative Rule-Making Review Committee  
Senator Mike Ross, Senate Chair, Legislative Rule-Making Review Committee  
Chronological File  
100.11

REGULATO.007



## WEST VIRGINIA BOARD OF EXAMINERS IN OPTOMETRY

101 Michael Street  
Clarksburg, West Virginia 26301-3937  
(304) 627-2106  
Fax: (304) 627-2106

July 24, 1997

Ronald E. Cordell, M.D.  
West Virginia State Medical Association  
P.O. Box 4106  
Charleston, WV 25364

Dear Dr. Cordell:

It is the desire of the West Virginia Board of Optometry (Board) that the information herein will assist in your understanding of how the proposed Rule 14-2 will be applied. The Board has addressed each area of your concern to clarify the confusion you have expressed.

Chapter 30-8-2b gives the authority to the West Virginia Board of Optometry to "...provide a formulary classifying those categories of drugs..." The wording of the law and its intent is to have the formulary consist of 'categories' of drugs, not to be listed as individual medications. There should not be any confusion as to the categories of drugs included in the expanded prescriptive authority. As written in the proposed rule, the only categories included are: 7.1.a-Antihistamines, 7.1.b.-Corticosteroids, 7.1.c.-Analgesics, 7.1.d.-Anxiolytics.

The educational requirements, course of instruction, and nationally-certified examinations established in the rule eliminate all confusion by adhering to the strict educational and testing requirements before any optometrist can prescribe any oral medications. In addition, these rigorous and demanding educational requirements will carefully and accurately differentiate the competent practitioner from those who are not competent. In other words, just as with the Board of Medicine, it is the responsibility of the Board of Optometry to provide standards for certifying and licensing new doctors of optometry and for the renewal of current licenses. It is not the intent of the Board of Medicine to license physicians who are not competent. Likewise, it is not the intent of the Board of Optometry to license doctors of optometry who are not competent.

The West Virginia Board of Optometry recognizes that all medications have possible "very dangerous" side-effects, adverse reactions, and potential drug interactions including corticosteroids (i.e., glucocorticoids). However, there should be no confusion "...a single dose of glucocorticoids, even a large one, is virtually without harmful effects, and a short course of therapy (up to 1 week), in the absence of specific contraindications, is unlikely to be harmful." (1)

Ronald E. Cordell, M.D.

Page 2

July 24, 1997

The Board realizes that the education and training of optometrists is consistent with the use of the categories of medications listed in the formulary, including corticosteroids. Also, the Board has requested an additional series of strict educational and testing requirements for all optometrists before granting extended prescriptive authority. Without question, oral corticosteroids are rational and necessary to the treatment of conditions or diseases of the human eye and its appendages. Properly qualified optometrists in West Virginia have been licensed to prescribe corticosteroids for over 21 years. The use of these medications by optometrists for the past 21 years has not precipitated a **single** case of improper use or abuse. The basics of pharmacology for understanding their mechanism of action, physiological response, potential drug interactions, and side-effects have been part of the scope of optometric practice and have been thoroughly taught in all schools and colleges of optometry for decades. While this is not to say that the topical application of corticosteroids has the same risk as their oral administration, it does reflect the attainment of the proper didactic and clinical training of optometrists in the safe, rational use and proper clinical judgment to practice within the expanded prescriptive authority and scope of practice of the law.

Chapter 30-8-2a. specifically provides optometrists with the prescriptive authority for some oral medications to include oral non-steroidal anti-inflammatory drugs. Chapter 30-8-2b. directs the Board to provide a formulary classifying other categories of drugs rational to the diagnosis and treatment of conditions or diseases of the human eye and its appendages. Therefore, **only** those analgesic medications which are needed to treat conditions or diseases of the human eye and its appendages are permitted in Chapter 30-8-2b by **only** those optometrists who have met educational and testing requirements necessary to be granted expanded prescriptive authority will be permitted. Understanding the management and supervision of these drugs is part of the required education and training.

It is not the intent of the Board for anxiolytics to be used for **any** purpose other than the diagnosis or treatment of visual defects or abnormal conditions of the eye and its appendages such as may be necessary short-term to reduce anxiety that may be associated with certain non-invasive procedures permitted by optometrists. *It is not the intent of the Board that anxiolytics be prescribed by optometrists for any route of administration other than orally (i.e., not intravenously).*

The West Virginia Board of Optometry is extremely concerned that the West Virginia State Medical Association has found such confusion concerning the proposed Rule 14-2. The Board is particularly concerned that the state Medical Associations letter of July 10, 1997,

Ronald E. Cordell, M.D.  
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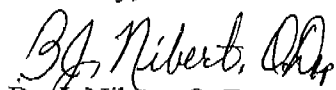
suggests that "...optometrists are asking for Schedule II drugs such as (sic) Tylenol #3..." in spite of the fact that Chapter 30-8-2b specifically allows optometrists to only prescribe Schedule III, IV, and V medications. In addition, the Medical Association letter has added significant confusion to this rule-making process by **incorrectly suggesting that Tylenol #3 is a Schedule II medication. Tylenol #3 is a Schedule III medication** as evidenced by the enclosed references from Goodman and Gilman<sup>(2)</sup>, the PDR<sup>(3)</sup>, and Clinical Pharmacology<sup>(4)</sup>.

It also is of significant concern to the Board that potentially inflammatory terms have been chosen to describe medications essential to the practice of optometry. These phrases include "narcotic," and "downers." As I am sure you realize, the layman term "narcotic" refers to illegal drugs such as hallucinogens and "downers" refers to illicit street drugs used to slow normal reactivity. The Board chooses to be more precise, and pharmacologically correct, in describing those agents that reduce pain as analgesics and those to reduce anxiety as anxiolytics, as was provided in the formulary.

The Board hopes that by correcting the errors contained in your letter and clarifying the details within Rule 14-2, your comments have been addressed. It has been the goal of the Board to propose rules for Senate Bill 524 consistent with the agreement signed by the West Virginia Optometric Association and the West Virginia Academy of Ophthalmology.

The West Virginia Board of Optometry appreciates having had the opportunity to clarify any confusion that may have existed concerning Rule 14-2.

Sincerely,

  
B. J. Nibert, O. D  
Board Member  
Chairman, Title 14-2 Committee

BJN/bp

Ronald E. Cordell, M.D.

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- 1). Hardman, J.G. and Limbird, L.E. *Goodman and Gilman's The Pharmacological Basis of Therapeutics*. Ed. 9, New York, 1996, McGraw-Hill, p1476-1477.
- 2). Hardman, J.G. and Limbird, L.E. *Goodman and Gilman's The Pharmacological Basis of Therapeutics*. Ed. 9, New York, 1996, McGraw-Hill, p1703
- 3). *Physician's Desk Reference (PDR)*, Ed. 48, 1994., p. 1365.
- 4). *Clinical Pharmacology: an electronic drug reference*. Gold Standard Multimedia, Gainesville, FL, Version 1.9, 1997.

Dr. Ronald D. George,  
Optometrist



WV Board of Optometry  
101 Michael Street  
Clarksburg, WV 26301-3937

Dear Sirs,

I would like to address some comments and concerns about the WV Board of Optometry's proposed regulations 14-2-2 for implementation of SB 524, Expanded Scope of Optometric Practice.

First, I am against two (2) separate examinations for approval to practice under this new proposed Senate Bill 524. This proposed expanded rule is a WV proposal and should be governed by WV Optometrists.

Second, must all previously therapeutic and diagnostic certified optometrists take this course and test?

Third, what is the optometrists course of action or penalty if the optometrists decided not to seek this additional schooling, testing, and certification? Will there then be three classes of optometrists for WV? Why must previously certified optometrists take this course?

Also, regarding 6.1 and 6.2, will this be one time fees or two (2) fees annually?

Regarding 7.1 A,B,C and D, why is the Board limiting the proposed law; i.e. What would happen if a new class of drugs were approved by the FDA? Why not just say all oral drugs useful for eye treatment. Period.?

Why is this proposed addition to the optometrists law being made a separate entity to the present law? Why not just incorporate it into the present law after the optometrists certification?

Sincerely,

Ronald D. George, OD

RDG/trh

85 West Main Street  
Buckhannon, West Virginia 26201  
(304) 472-1235



## WEST VIRGINIA BOARD OF EXAMINERS IN OPTOMETRY

101 Michael Street  
Clarksburg, West Virginia 26301-3937  
(304) 627-2106  
Fax: (304) 627-2106

July 23, 1997

Dr. Ronald D. George  
Optometrist  
85 West Main Street  
Buckhannon, WV 26201

RE: Comments on Proposed Rules for Expanded Prescriptive Authority

Dear Dr. George:

We are in receipt of your letter regarding Proposed Rules for Expanded Prescriptive Authority. We will try to explain and answer your questions.

First, in response to your questions regarding two examinations, please refer to the enclosed copy of a letter to the WVOA.

Second, all currently licensed optometrists must continue to renew their license with the same requirements as are now in place. No optometrist *must* take any additional tests or examinations.

Third, there is no penalty or course of action necessary for any optometrist who chooses not to seek this additional educational education and testing. According to the proposed rule, in order for an optometrist to be certified to use the oral drugs included in the new law and the rule, they must satisfy the educational and the testing requirements as stated within the rule. If an optometrist chooses not to pursue this expanded scope, they may continue to practice *without* the authority to prescribe oral medications.

There will be three classes of optometrists in West Virginia. At present only a few doctors are in practice who have not completed the necessary requirements for the expansion into topical diagnostic and therapeutic drugs use. Those optometrists who choose to pursue the expanded prescriptive authority of oral medications will become the third class.

Previously certified optometrists are certified for the use of topical drugs. The expansion into oral pharmaceuticals will require certification by more education, training and education.

There will be a one time fee for the first time a doctor applies for certification for expanded prescriptive authority. There will be a single fee due annually for the renewal of certification of expanded prescriptive authority.

The rule the Board is proposing is by authority of Senate Bill 524. This bill was a result of a compromise between the West Virginia Optometric Association and the West Virginia Academy of Ophthalmology. The language of the law and of the proposed rule is intended to be in the spirit of this compromise. Through consultation with many sources, the Board has chosen to include the categories as written in the propose rule.

Dr. Ronald George  
Page 2  
July 24, 1997

The new law (Senate Bill 524) is included in the current law governing optometry (West Virginia Code 30-8 et seq.). If you are referring to the proposed rule when you say "the proposed addition", it is by authority of the law that the rule is to be proposed. The law can only be amended through the legislative process. Rules are made or amended by way of the Legislative Rule Making Committee.

We hope that this helps in your understanding of the proposed Rule.

Sincerely,



B. J. Nibert, O.D.  
Board Member  
Chairman, Title 14-2 Committee

Enclosure  
BJN/bp

# VISION CARE ASSOCIATES, INC.

D. L. CONRATH, O.D.  
SHARON L. HAGE, O.D.  
R. C. ROBINSON, O.D.

FOURTH & AVERY STS., P.O. BOX 34  
PARKERSBURG, WEST VIRGINIA 26101

EYE HEALTH CARE  
CONTACT LENSES  
QUALITY EYEWEAR

PHONE: (304) 422-1841

June 12, 1997

Secretary of State

State of West Virginia

Charleston, West Virginia

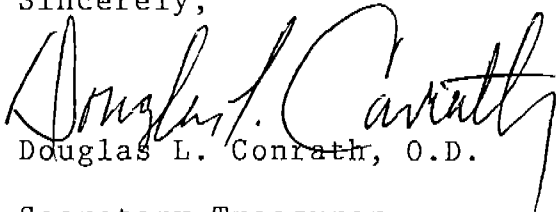
Dear Sirs:

Senate Bill 524, passed April 8, 1997, provides that the West Virginia Board of Examiners in Optometry propose legislative rules for the implementation of the provision of the new law.

Therefore, new rules are necessary to set guidelines for education, certification, re-certification and expanded prescriptive authority.

As the acting agency head, in the absence of the president of the West Virginia Board of Examiners in Optometry, I approve of the filing of this rule.

Sincerely,



Douglas L. Conrath, O.D.

Secretary-Treasurer

West Virginia Board of Optometry

— We Care For Your Eyes —