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Senate Bill 139 (Substitute S-1 as reported)
Sponsor: Senator Joanne G. Emmons
Committee: Health Policy and Senior Citizens

CONTENT

The bill would amend Part 174 of the Public Health Code, which governs the practice of optometry, to allow an optometrist to use a topically administered antiglaucoma drug; and to require an optometrist to consult with an ophthalmologist when glaucoma was suspected in a patient's diagnosis, or with a physician when an optometrist diagnosed that a patient had acute glaucoma.

Currently, under Part 174, an optometrist may administer and prescribe therapeutic pharmaceutical agents in the course of his or her practice, if he or she has fulfilled certain requirements specified in Part 174 and been certified by the Board of Optometry as qualified to administer and prescribe therapeutic pharmaceutical agents. "Therapeutic pharmaceutical agent" means a topically administered prescription drug or other topically administered drug used to treat a defect or abnormal condition, or the effects of a defect or abnormal condition, of the anterior segment of the human eye. The bill provides that a therapeutic pharmaceutical agent also would include a topically administered antiglaucoma drug.

Further, under current law, if an optometrist determines that a patient shows signs or symptoms that may be evidence of a disease that the optometrist is not authorized to treat, the optometrist must promptly advise the patient to seek evaluation by an appropriate physician, and not attempt to treat the condition. The bill specifies that when a diagnosis of glaucoma was suspected, the optometrist would have to consult an ophthalmologist for a co-management consultation in order to agree mutually on the diagnosis and initial treatment plan. If the results of treatment did not meet or exceed the treatment target goals within a time frame currently accepted as medical standard of care in the treatment and management of glaucoma, the optometrist would have to consult further with an ophthalmologist regarding further diagnosis and possible treatment.

If an optometrist diagnosed that a patient had acute glaucoma, the optometrist would have to consult a physician for further diagnosis and possible treatment as soon as possible.

MCL 333.17401 & 333.17432

Legislative Analyst: G. Towne

FISCAL IMPACT

The bill would have no fiscal impact on State or local government.

Date Completed: 10-3-97 Fiscal Analyst: M. Tyszkiewicz

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.