

PUBLIC HEALTH CODE (EXCERPT)
Act 368 of 1978

333.17432 Duties of optometrist upon determining symptoms evidencing disease; conditions requiring consultation with physician for further diagnosis and treatment; diagnosis and treatment of glaucoma.

Sec. 17432. (1) Whether or not diagnostic pharmaceutical agents or therapeutic pharmaceutical agents have been used, if an optometrist determines from interviewing or examining a patient, using judgment and that degree of skill, care, knowledge, and attention ordinarily possessed and exercised by optometrists in good standing under like circumstances, that there are present in that patient signs or symptoms that may be evidence of disease that the optometrist is not authorized to treat under this part, then the optometrist shall do both of the following:

(a) Promptly advise that patient to seek evaluation by an appropriate physician for diagnosis and possible treatment.

(b) Not attempt to treat the condition by the use of diagnostic pharmaceutical agents, therapeutic pharmaceutical agents, or any other means.

(2) Subject to subsections (3) and (4), if an optometrist treats a patient for a condition or disease that the optometrist is authorized to treat under this part, and if that condition or disease may be related to a nonlocalized or systemic condition or disease or does not demonstrate adequate clinical progress as a result of the treatment, the optometrist shall consult an appropriate physician for further diagnosis and possible treatment and to determine if the condition or disease is related to a nonlocalized or systemic condition or disease.

(3) When a diagnosis of glaucoma is made and treatment has begun, the treating optometrist shall consult an appropriate physician for further diagnosis and possible treatment if the condition does not demonstrate adequate clinical progress as a result of the treatment.

(4) If an optometrist diagnoses that a patient has acute glaucoma, the optometrist shall, as soon as possible, consult a physician for further diagnosis and possible treatment.

History: Add. 1984, Act 42, Eff. Apr. 12, 1984;—Am. 1994, Act 384, Eff. Mar 30, 1995;—Am. 1997, Act 151, Imd. Eff. Dec. 2, 1997;—Am. 2002, Act 599, Imd. Eff. Dec. 16, 2002.

Popular name: Act 368