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**Joint Advice from the Association of Optometrists and
The Federation of Ophthalmic and Dispensing Opticians on
Optometric Involvement in Refractive Surgery
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The Association of Optometrists and the Federation of Ophthalmic and Dispensing Opticians have issued the following advice to their members in respect of practitioners who wish to provide optometric and optical services to pre- or post-operative patients undergoing refractive surgery.

An optometrist may provide services to patients who are undergoing refractive surgery in one of two ways; as a contractor to the undertaking carrying out the refractive surgery or as an employee of that undertaking. The optometrist's work may be undertaken at the optometrist's practice or at the premises of the undertaking carrying out the refractive surgery.

Does this fall within normal optometric practice?

In short, yes. There are no procedures involved in this type of work which an optometrist has not been trained to do. Practitioners should be aware, however, that the advice given may be relied upon by the patient when deciding whether to proceed with refractive surgery; they should be certain of their competence to give such advice and carefully note the advice given on the patient's record, in full.

Minimising the risk factors

If the optometrist performs pachymetry and topography it must be clear to the patient and to the surgeon that these measurements are for screening purposes and must be repeated for the purposes of surgery.

The patient should be advised to refer all the questions of prognosis and side effects to the operating surgeon. The optometrist should not be drawn into any discussion as to the outcome of the surgery.

The optometrist should ensure competence by demonstrating that they undertake accredited continuous professional development in this area.

If the recall system for post-operative follow-up is the responsibility of the optometrist, they should ensure that in the event of non-attendance a further reminder is sent to the patient. If the patient fails to attend at all this should be brought to the attention of the consultant surgeon.

The optometrist is advised to obtain an undertaking from the clinic for which they undertake work in connection with refractive surgery, that it is adequately insured against claims made by patients.

The optometrist should also obtain an undertaking from the clinic that the ophthalmologist undertaking the surgery has adequate insurance relating to the whole pre-screening process, the pre- and post-operative assessments and treatment, and the surgical procedure itself. It is important not to be solely reliant on the clinic's insurance which may only be effective if the consultant surgeon also carries adequate professional liability and medical malpractice insurance.

Insurance

Optometrists should make sure that they have insurance which covers them personally. The optometrist's own clinical malpractice and professional liability insurance should normally cover the optometrist for any work normally undertaken by an optometrist. Pre-operative screening and post-operative assessments of the patient would fall into that category. Such insurance is unlikely to cover work which optometrists are not qualified

to undertake such as prescribing drugs (until therapeutics rights are obtained) or performing surgical procedures.

Written Contract

The optometrist must ensure that they have a written contract of employment* or a contract for services* setting out the terms of their engagement including the specific tasks and procedures they are being asked to undertake. The various insurance undertakings required above would be part of that contract. It is recommended that they ask the AOP/FODO to examine the contract before signing it.

A contract for employment or for services should contain the following conditions:-

- a. That any ophthalmologist involved in advising or undertaking surgery accepts clinical and other responsibility for that advice and surgery and all advice and procedures leading up to it whether undertaken by him or someone else acting under his supervision or instructions.
- b. That the clinic or other organisation concerned indemnifies the optometrist against all claims made by patients arising out of advice given or work performed by the optometrist.

That the clinic or organisation concerned will produce satisfactory documentary evidence of such insurance when required to do so by the optometrist

**Specimen general contracts of employment and contracts for services are set out in the AOP's Handbook. The specific terms of an engagement in connection with refractive surgery can be incorporated into the appropriate contract.*

Advising Patients

Patients may be entitled to bring claims for negligence against any professional adviser in the event of the treatment being unsuccessful or causing them personal injury. Practitioners must therefore be clear in the advice they give to patients and keep legible

and detailed records of the advice given on each patient's record card. Patients must only be advised on procedures which can be undertaken within the professional competence of an optometrist. Patients should not be advised on surgical procedures; they should be referred to an ophthalmologist for such advice.

Optometrists may give general information to patients who express an interest in refractive surgery procedures about what the treatment may entail. This may include giving general information about the procedures and offering leaflets, videos etc. to the patient, but the final decision as to suitability must lie with the surgeon, who will take informed consent. This must be made clear to the patient. At all times it must be made clear to the patient that the professional liability for the refractive surgery rests with the ophthalmologist who recommends the treatment.

Practitioners who have links with a particular refractive surgery clinic must explain this arrangement to patients if referring them to that clinic.



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