

Principle Statement of the AUPO on the Inclusion of Optometry Post Graduate Training Programs in Academic Ophthalmology Departments

There is an increasing number of optometrists obtaining post graduate training in academic ophthalmology departments. Because they are working alongside ophthalmology residents, the following principles have been adopted by AUPO to ensure that ophthalmology residents are receiving the highest attention to their training, that patients know who is caring for them, and that departments set clear practice standards based on a state's scope of practice for health practitioners such as optometrists.

Training

The primary objective of academic ophthalmology departments is training ophthalmology residents to be competent clinicians in a broad range of basic and advanced surgical and medical skills. As such, AUPO believes that academic ophthalmology departments should prioritize the training of ophthalmology residents to ensure that ophthalmology residents receive maximum attention. Consistent with [AMA Policy D-295.934, Encouragement of Interprofessional Education Among Health Care Professions Students](#), AUPO supports a transparent mechanism for ophthalmology departments to intervene when resident education is adversely impacted by undergraduate, graduate, and postgraduate clinical training of non-physicians. Further, the education of all trainees in the department should include instruction about differences in the depth and breadth of their educational backgrounds, experiences, and knowledge and the impact these differences may have on their role in patient care. AUPO encourages the development of interprofessional education that is appropriate for each group of learners.

Transparency

AUPO believes that patients deserve to know the education, training, and qualifications of their caregivers. As such, institutions should establish clear markers of professional identification that delineates the differences of the staff be it Doctor of Medicine (MD) or Doctor of Osteopathic Medicine (DO), optometrist, nurse, physician assistants, orthoptists or other clinicians. Departments need to incorporate policies that identify the role and qualifications of everyone involved in patient care. Patients need to be able to identify the different clinical professions in the facility setting. Consistent with AMA Policy [H-275.925](#),

Protection of the Titles "Doctor," "Resident" and "Residency", AUPO endorses that health care professionals accurately communicate to patients their qualifications, degree(s) attained, and training status within their training program. Consistent with AMA Policy [D-405.973, Protection of Terms Describing Physician Education and Practice](#) AUPO encourages ophthalmology departments to develop educational programs for training of non-physicians in health care, and their associated professional organizations, to develop an alternative, clarifying term to replace “resident,” “residency,” “fellow,” “fellowship” and “attending” and other related terms that the public commonly attributes to medical training.

Practice Limitation

While the legal landscape delineating who can perform certain ophthalmic procedures including surgery has changed to include non-medical healthcare practitioners in some states, AUPO strongly urges ophthalmology departments to maintain and adhere to state laws that restrict optometry practitioners in their departments from performing ophthalmic procedures or surgeries outside of their legal scope of practice. AMA [Opinion 10.5 Allied Health Professionals](#) states “delegate provision of medical services to an appropriately trained and credentialed allied health professional within the individual’s scope of practice.”

Optometrists play an important role in the department providing important services to patients. However, it is appropriate that they perform only those eye care services that are permitted under their state’s scope of practice. AUPO believes that maintaining the integrity of the ophthalmology training program’s standards and meeting the expectations of patients dictate that only ophthalmologists who have undergone or are in ophthalmology residency under supervision should perform injections and surgery using scalpels and lasers.