

Optometry Board of Australia

GUIDELINES: PRESCRIPTION OF OPTICAL APPLIANCES

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1. Introduction

The Health Practitioner Regulation National Law, as in force in each state and territory (the National Law), restricts who may prescribe optical appliances. Section 122 of the National Law reads:

Section 122 Restriction on prescription of optical appliances

- (1) A person must not prescribe an optical appliance unless
 - (a) the person is an optometrist or medical practitioner; or
 - (b) the appliance is spectacles and the person is an orthoptist who -
 - (i) prescribes the spectacles in the course of carrying out duties at a public health facility; or
 - (ii) prescribes the spectacles under the supervision of an optometrist or medical practitioner; or
 - (iii) prescribes the spectacles, on the written referral of an optometrist or medical practitioner, to a person who has had, within the 12 months before the referral, an ocular health examination conducted by an optometrist or medical practitioner; or
 - (c) the person is a person, or a member of a class of persons, prescribed under a regulation as being authorised to prescribe an optical appliance of that type or to prescribe optical appliances generally.

Under section s122 (2) of the National Law, 'optical appliance' means:

- a. any appliance designed to correct, remedy or relieve any refractive abnormality or defect of sight; this includes, for example, spectacle lenses, or
- b. contact lenses, whether or not designed to correct, remedy or relieve any refractive abnormality or defect of sight.

The National Law does not regulate the supply of optical appliances and ministers for health have agreed that

this is a matter that states and territories may choose to regulate separately.

The term 'optical appliance' also includes prescription sunglasses, spectacles with prism, and low-vision devices such as magnifiers, binocular telescopes, monocular telescopes and electronic magnification devices and plano cosmetic and novelty contact lenses.

2. Who needs to use these guidelines?

These guidelines apply to all registered optometrists.

3. Preparation of a prescription

Preceding ocular examination

Before issuing a prescription, optometrists should normally perform an examination of the patient addressing ocular health, the need for any referral or review, and determination of whether it is appropriate to issue a prescription.

Content of a prescription

A prescription for an optical appliance is an order to a third party (e.g. optical dispenser) to provide the ophthalmic goods specifically described. A prescription for an optical appliance must include necessary details of lens powers/prism/design for the supplier to complete the dispensing process. Prescriptions for both spectacles and contact lenses may be hand written or printed, and must contain:

- the name of the patient for whom the appliance is prescribed
- whether the prescription is for spectacles or contact lenses
- the name of the prescribing optometrist and their practice address, and
- the date of issue and expiry of the prescription¹.

¹ When nominating an expiry date for a prescription, you should choose a date beyond which you are not willing to state that in your professional opinion the prescription is appropriate to the patient. You must not choose an expiration period that is unreasonably short and cause undue inconvenience for the patient. For example, for spectacle prescriptions, the most common expiry date is two years after the examination at which the prescription was determined. In some cases, shorter or longer expiry dates may be appropriate.

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4. Spectacle prescriptions

A spectacle prescription must include lens powers and prism (e.g. sphere, cylinder, axis and addition as necessary).

Where necessary spectacle prescriptions should specify:

- the intended use of the appliance
- lens form
- lens material(s)
- lens treatment(s) (tints, coating, hardening), and
- parameters and requirements such as impact resistance.

Optical centration of the lenses cannot be determined until the spectacle frame and lens form is chosen and the correct facial fitting is combined with the prescription. Inter-pupillary distance (PD) is an inadequate substitute for optical centration and use of PD could lead to unsuitable spectacles.

Parameters related to spectacle lens centration are dependent on the spectacle frame selected, hence inter-pupillary distance and bifocal segment height or measures for multifocal lens placement are not required to be included in the prescription. Optometrists may not routinely include the PD in a prescription for spectacles. However, the PD should be provided to the patient if it was measured.

5. Contact lens prescriptions

A contact lens prescription must specify:

- power of the lenses
- base curve(s) of the lenses
- lens diameters
- lens materials, and
- the manufacturer and other information to identify the lens such as the product name.

6. Supply of prescriptions

Rights of patients to their prescription

Optometrists must provide patients with a copy of their prescription on request, at no additional fee, at the conclusion of the consultation once paid for by the patient or billed to an insurer.

When a patient requests a copy of the prescription a period of time after it was determined, you must respond to the request in a reasonable amount of time. You may charge patients fees proportionate to the costs involved in supplying the copy of the prescription.

Supply of contact lens prescriptions

Patients have a right to a copy of their contact lens prescription on completion of the prescribing process.

You must not issue a prescription for contact lenses until you are satisfied that:

- the prescription is correct
- the patient can wear contact lenses, and
- the prescribed lenses will provide the patient with proper vision, comfort and freedom from injury, provided the prescription is filled correctly and the patient follows the recommended lens care and wearing instructions.

A preliminary prescription, valid for a limited time, may be issued to allow the patient to purchase an initial pair of trial lenses. A final prescription must be issued on request as soon as you are satisfied that the lenses fit and perform correctly.

Supply of expired prescriptions

Patients have a right to a copy of their prescription even when it is expired. A prescription supplied to a patient after the expiry date should be clearly marked 'expired'.

7. Optometrists' responsibilities

Cosmetic and non-therapeutic appliances

Patients should not have unnecessary optical appliances recommended to them. However, if a patient requests an appliance that the optometrist considers is not necessary, (e.g. tinted plano contact lenses to change apparent eye colour) the optometrist may comply with the request and generate a prescription after fully discussing the risks and benefits with the patient.

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Patient consent

Where alternative solutions to a patient's vision problems exist, the optometrist must ensure the patient understands what is being prescribed, the cost implications, and any requirements related to care and maintenance of the product before finalising the prescription. Optometrists should also refer to the <u>Code</u> of Conduct for Optometrists,² ('Informed consent').

You must maintain up-to-date knowledge of ophthalmic products and dispensing so you can provide best practice advice to patients and give clear instructions about their prescription and about issues that may arise on dispensing such as:

- cost of the item and alternatives
- advantages and disadvantages of alternative lens types
- period of adjustment to a prescription
- policy on replacement of faulty or damaged lenses, warranties and guarantees for dispensed optical appliances
- responsibilities of an optometrist if the patient chooses to have their prescription dispensed elsewhere
- care and maintenance of the optical appliance
- appropriate wearing schedule of contact lenses and timing of after-care visits
- the purpose(s) for prescribing the optical appliance(s), and
- the length of time that the prescription would normally be expected to remain valid.

Confidentiality

Optometrists have a legal obligation to protect the privacy of patients. You should seek consent from patients before disclosing information, as required under privacy legislation. Optometrists should refer to the *Optometry Code of Conduct*³ (confidentiality and privacy) and not release a patient's prescription to a third party without the permission of the patient, or their guardian. When you are asked to provide a prescription of a patient to a third party, you must be sure that the patient, or guardian, has authorised the release of the prescription.

Wherever possible prescriptions supplied to third parties should be provided in written form, either by mail or electronically.

Advertising

Optometrists should refer to the Board's *Guidelines for advertising regulated health services*⁴ for guidance in the use of advertising for optical appliances. You should be aware, as part of your responsibilities as an optometrist, of you obligations under the National Law and other relevant legislation that relate to advertising as a registered health practitioner.

8. Authority

Guidelines are developed under section 39 of the National Law and are subject to wide-ranging consultation. Under section 41 of the National Law, guidelines are admissible in proceedings under the National Law as evidence of what constitutes professional conduct or practice for optometry.

9. Review

These guidelines will be reviewed by the Board from time to time. This will generally be at least every five years. These guidelines replace the previous quidelines on the prescription of ocular appliances.

The authorisation of the patient may be obtained in person, in writing or electronically. A prescription may be included on a patient's receipt if required for the purposes of claiming a rebate.

² Optometry Board of Australia. Code of conduct.

 $^{\,\,}$ Optometry Board of Australia. Code of conduct.

⁴ Guidelines for advertising regulated health services