

AMENDED AUGUST 2006

And one minor amendment to paragraph 106 in November 2006

ADVICE & GUIDELINES ON PROFESSIONAL CONDUCT FOR DISPENSING OPTICIANS

SECTION 3: CONTACT LENS PRACTICE

Equipment

87. In order to comply with the guidelines above, practitioners engaged in contact lens practice should possess suitable equipment for such practice and be fully conversant with its use. See the equipment list contained at the end of Section 4. It is good practice for a facility for verification and calibration of all relevant equipment to be available and used on a regular basis.

Records

88. It is essential that full and complete records are kept and maintained. See Appendix B

Information

89. Whereas it is not a criminal offence for a registered optician to fit contact lenses, the Contact Lens (Qualifications etc) Rules 1988 state that a registered optometrist or registered dispensing optician shall not fit a contact lens unless he/she holds:

- a. an approved qualification; or
- b. certification; or
- c. provisional certification

and he/she is entered in the appropriate GOC register.

90. This does not prevent a registered optometrist or registered dispensing optician who does not hold a qualification, certification or provisional certification fitting a contact lens if the fitting is carried out under the supervision of a person who does hold such a qualification, certification or provisional certification. However in those circumstances they should not describe themselves as a contact lens optician.

PATIENT	DOCUMENT	ACTION
<u>Fitting /refitting contact lenses</u>		
Prospective wearer	Prescription less than two years old	Commence fit if appropriate (see paragraph 92)
Prospective wearer	Prescription over two years old	Recommend/ make arrangements for eye examination
Contact Lens wearer	Prescription less than two years old	Commence re- fit
Contact Lens wearer	Prescription over two years old	Recommend/ make arrangements for eye examination
<u>Supplying Contact Lenses</u>		
Contact Lens wearer	Specification is in date Eye examination is not relevant (see paragraph 92)	Supply Contact Lens/es. (See paragraph 92)
Contact Lens Wearer	Specification is out of date	No supply to old specification but CLO may refit

Contact Lens Practice – the Prospective Wearer

91. The dispensing optician has a duty to ensure that he/she always works within his/her limit of clinical competency, especially when engaging in specialist areas of contact lens practice.

92. A patient cannot be fitted with contact lenses unless they have a valid prescription or a statement that they do not need to wear or use an optical appliance (e.g. for the fitting of plano cosmetic contact lenses). Section 25 (1A) of the Opticians Act states thata registered dispensing optician must not fit a contact lens for an individual unless:

- a.he/she has the particulars of a prescription given to the individual within the period of two years ending on the date the fitting begins; (where the duty to give an individual a signed written prescription under section 26(2) of the Act arises) and
- b. the fitting begins before any re-examination date specified in that prescription.

Therefore, if the patient is overdue for an eye examination i.e. they have not had their eyes examined for more than 2 years, or less if that is what is stated on their prescription, it is illegal for the dispensing optician to fit the patient with contact lenses.

93. The assessment of the prospective contact lens wearer should normally include:

- a. Ocular history, family general, ocular health and specific information that may be required relating to any allergic history or history of systemic disease, any previous contact lens wear, occupational and recreational needs and the associated environments in which lenses will be worn;
- b. A detailed assessment of the anterior eye which might be affected by contact lens wear. This should require a slit-lamp examination, associated keratometric information, the use of diagnostic stains and the assessment of tear film quality and quantity.
- c. An assessment of other factors that may be linked to successful wear, suitability of prescriptions and the ability to handle lenses safely and appropriate hygiene procedures. If the practitioner considers that the patient is unlikely to be able to handle or maintain contact lenses safely, it would be in the patient's interest for the dispensing optician to refuse to fit lenses.
- d. Prior to the fitting of lenses, advice to the patient about the risks and complications of contact lens wear, available lens types, their advantages and disadvantages and any types which might be particularly appropriate or contra-indicated, together with a suitable explanation of the reasons. Patients should be given sufficient information to make an informed choice.
- e. Where a patient is found to be unsuitable for contact lens wear, the patient should be advised accordingly and the patient's record annotated.
- f. The same degree of care should be taken when assessing a patient for plano cosmetic contact lenses as for powered contact lenses.

Contact Lens Fitting: the new wearer

94. The Opticians Act defines fitting of a contact lens as:

- a. assessing whether a contact lens meets the needs of the individual; and where appropriate
- b. providing the individual with one or more contact lenses for use during a trial period

Guidelines

95. Following the preliminary assessment of a prospective patient, the contact lens optician has a duty to ensure that each individual patient is fitted with the most appropriate lens type and to give optimum vision for the required use.

96. The contact lens optician has a duty to provide the patient with an appropriate lens care regimen and detailed written instruction on the use and wear of the lenses as well as the proposed schedule for check-ups.

Advice

97. When fitting each individual new contact lens wearer, the contact lens optician should ensure that:

- a. The patient has had a recent eye examination, 2 years ago or less if so stated on the prescription.
- b. The type of lens and lens care regime are suitable and appropriate for the patient.
- c. Prior to the fitting, the patient receives information and has a reasonable understanding of:
 - the specific advantages and disadvantages of the lens types suitable for the patient;
 - the care systems required by the different lens types and the total estimated costs;
- d. Following the fitting, the patient is provided with full instructions on:
 - the insertion and removal of lenses, their care, storage, disinfection and cleaning;
 - the wearing schedule for the lenses
 - the initial check-up and the need for regular check-ups thereafter;
 - the importance of seeking professional advice immediately any problem or discomfort is experienced and how and where to obtain that advice both during and outside normal office hours;
 - the importance of seeking professional advice before changing to a solution which has not already been recommended as suitable by the practitioner;
- e. Appropriate elements of the instructions are given in writing to comply with the Medical Devices Directive. Since the amount and complexity of information provided to patients at the time of contact lens dispensing is significant, it is appropriate for as much of this information as possible to be included.
- f. The patient is advised of any required changes in the type of lens, lens wearing pattern or recommended hygiene regimen. Such advice should be given to the patient in writing and recorded clearly in the patient's records.
- g. The same degree of care is required when fitting a patient with plano cosmetic contact lenses as when fitting a patient with powered contact lenses. This includes adequate instruction on solutions, hygiene and handling. This is particularly important if the lenses are simply seen by the patient as 'fashion accessories', as this belief may lead to a more haphazard care regime. Patients should be advised strongly that they should not share their lenses as to do so carries a serious health risk.
- h. The patient's signature on an appropriate consent form may provide additional evidence that the practitioner's obligations in informing the patient about contact lenses has been met.

98. Advice notes for patients are a useful aid to encouraging patient compliance. An effective recall system is important to encourage patients' regular attendance for check-ups.

99. Practitioners are reminded that they have a legal obligation to give the patient the specification, sufficient for the lenses to be replicated, provided the fitting has been completed, **and this noted on the record**. This includes plano cosmetic contact lenses. The decision as to when the fitting has been completed is a decision to be made by each practitioner depending on the individual circumstances. The period should be long enough for the practitioner to be satisfied that the patient has adapted to the lenses and that there is unlikely to be any change in the patient's ocular health so that minimum aftercare needs to be carried out. It is suggested that a period of 3 months is unlikely to be exceeded for most patients. If the contact lens optician considers the patient will take an unusually long time for a satisfactory fit to be achieved, he/she should warn the patient of this, and give some indication as to when an acceptable fitting will be achieved, **and those reasons should be noted on the record card**.

100. The contact lens specification must state the period during which the specification remains valid and its expiry date. As it is a contravention of the Opticians Act (as amended) to supply contact lenses after the patient's specification has expired contact lens opticians may wish to consider advising the patient to have a contact lens check-up before the expiry date of the contact lens specification. Both dates should clearly be marked on the specification. Factors to be considered when determining the expiry date will include the type of lens, modality of wear and the clinical features of the patient. It is in the best interests of the patients that they receive regular check-ups. **Contact lens opticians/dispensing opticians should not recommend a wearing schedule to a patient contrary to the manufacturer's labelling instructions, which are based on the terms of the product licence, unless there are exceptional circumstances.** The advice given to the patient and the reasons for it should be noted on the patient's record card.

101. If a supplier of contact lenses has been provided with an unsigned and undated "*copy*" of a patient's contact lens specification (*i.e. not the original signed specification*) that supplier must request a verification of the particulars of the patient's specification. This verification must only be done with the patient's consent. The specification should be in writing (which may include facsimile or electronic communication), and a record kept of such requests for verification. **When the request for verification is made by telephone, the dispensing optician should ask the supplier for the details they have, and either confirm or deny these, rather than just providing the information requested.** If the number of verification requests gives cause for concern the supplier should be alerted. The dispensing optician should be reasonably satisfied that the supply is under the supervision or general direction of a dispensing optician or optometrist.

102. A contact lens wearer should be advised of the need for regular eye examinations with an optometrist/medical practitioner at no more than 2 year intervals.

Continuing contact lens wear/refitting existing contact lens wearers

103. When examining a wearer of contact lenses, the (dispensing) contact lens optician has a duty to ensure that the general ocular status of the patient is regularly assessed.

104. When assessing a wearer of contact lenses, the examination should normally include:

- a. A detailed assessment of the patient's wearing patterns and wearing times;
- b. Identification of any symptoms experienced while wearing lenses or any signs noted during wear or after lens removal;
- c. A record of the current care system being employed;
- d. A measure of the refractive status and acuities with the lens in situ including astigmatic elements as appropriate;
- e. An assessment of lens fit and the condition of the lenses themselves;
- f. On removal of the lenses, a detailed examination of the eye and adnexa as required to detect any contact lens related adverse effects. This will include the use of appropriate diagnostic agents;
- g. Assessment of other ocular attributes such as keratometry as required to identify changes from baseline;
- h. Determination of best spectacle visual acuities following lens removal, if appropriate;
- i. An assessment of the patient's compliance with the care regimen and general contact lens related hygiene, irrespective of lens type;
- j. Reinforcement of the need for regular follow-up care and specifically a contact lens assessment before expiry of the time-dated specification, to enable the further supply of contact lenses. It is appropriate to reinforce to existing wearers the various aspects of contact lens wear that may have become less obvious over time. Good practice would suggest that it is in patients' best interests for follow up care to be at least every twelve months;
- k. The tests and assessments relevant to the new prospective wearer may be applicable to an existing wearer where changes in lens type are being considered.

105. Contact lens opticians should be aware that some patients may prefer to buy their lenses from elsewhere. If this is the case the contact lens optician may be asked to re-issue or revalidate the patient's contact lens specification, which may be near expiry. The contact lens optician who re-issues the contact lens specification is responsible for its content and as such should ensure that all parameters detailed on it are correct. This is in the patient's best interests. If the patient or contact lens practitioner has any doubts about the specification of the current lenses the patient is wearing the only way the contact lens optician can be sure that the specification they will issue will be correct may be to refit the patient afresh. It is good practice to warn patients of this possibility.

106. Contact lens opticians may use the patient's existing lenses as a basis for a new specification. In order to do this the contact lens optician will need to know the specification of the lenses the patient is already wearing (by measurement or packaging) and similar considerations occur as detailed in paragraph 104k and paragraph 105 above.

107. The contact lens specification must state the period during which the specification remains valid and its expiry date. As it is a contravention of the Opticians Act (as amended) to supply contact lenses after the patient's specification has expired contact lens opticians may wish to consider advising the patient to have a contact lens check-up before the expiry date of the contact lens specification. Both dates should clearly be marked on the specification. Factors to be considered when determining the expiry date will include the type of lens, modality of wear and the clinical features of the patient. It is in the best interests of the patients that they receive regular check-ups. **Contact lens opticians/dispensing opticians should not recommend a wearing schedule to a patient contrary to the manufacturer's labelling instructions, which are based on the terms of the product licence, unless there are exceptional circumstances.** The advice given to the patient and the reasons for it should be noted on the patient's record card.

108. If a supplier of contact lenses has been provided with an unsigned and undated "copy" of a patient's contact lens specification (*i.e. not the original signed specification*) that supplier must request a verification of the particulars of the patient's specification. This verification must only be done with the patient's consent. The specification should be in writing (which may include facsimile or electronic communication), and a record kept of such requests for verification. **When the request for verification is made by telephone, the dispensing optician should ask the supplier for the details they have, and either confirm or deny these, rather than just providing the information requested.** If the number of verification requests gives cause for concern the supplier should be alerted. The dispensing optician should be reasonably satisfied that the supply is under the supervision or general direction of a dispensing optician or optometrist.

109. In addition to the contact lens checks noted above, the contact lens optician should remember that there is an ongoing responsibility for the total optometric care of the patient and should be aware that the patient will require a routine full eye examination. Where this is not combined with the contact lens check, this should be made clear to the patient and advice given on when to undergo a full examination.

110. The duties owed to patients fitted with plano cosmetic contact lenses are the same as those to patients fitted with powered lenses.

Supplying Contact Lenses

Guideline

111. The dispensing optician must ensure that whenever a contact lens supplied by him/her is lost, broken or being replaced every care is taken to

ensure that the duplicate lens or lenses meet the specification. This applies to both plano and powered contact lenses.

112. It is in the interests of all parties to ensure that the supply of contact lenses is conducted in accordance with the requirements of the Opticians Act, and in accordance with the guidance of professional bodies.

113. Before supplying them the dispensing optician must satisfy him/herself that the lenses are as per the patient's contact lens specification.

114. On supplying the lenses, the supplier should provide sufficient written information to enable the patient to be able to handle lenses appropriately and comply with an appropriate lens care regime. The supplier should make every effort to ensure that the patient complies with the lens care regime and understands the importance of aftercare.

115. The patient should be supplied with no more than the anticipated number of lenses needed until the expiry of the patient's contact lens specification at any one time. This is to safeguard the patient's ocular health and to assist with the supervision and the overall compliance with the patient's care regime. It is recommended that the practitioner annotates the patient's contact lens specification with the date, and the number of lenses that were supplied to this specification.

116. It is recognised that in certain circumstances the lenses may be supplied direct to the patient. The direct supply of contact lenses to patients must be controlled and supervised or directed by a registered practitioner.

Supervision and direction

117. Contact lenses can only be supplied under the supervision or direction of a registered optometrist, registered dispensing optician or registered medical practitioner.

118. Where the sale or supply is under the supervision of a registered dispensing optician, the dispensing optician retains full responsibility for **the sale. The provisions of this sale fall under S.27(1)(b) of the Opticians Act.**

119. Where the sale or supply is under the general direction of a registered dispensing optician the dispensing optician may not be in a position to ensure that no untoward consequences occur. Whilst the dispensing optician need not be on the premises while the sale takes place it is recommended that any protocol for such supply is in writing and there is an audit trail that can be followed. The protocol should include: the requirement for suppliers to be adequately trained and to have a working knowledge of the types of contact lenses available and the different care regimes. Suppliers should be trained to advise the patient appropriately as to what to do if the patient suffers an adverse event from the use of the lenses or care solutions.

120. Protocols for supply of lenses should also include:

- a. Checking that the lenses are for the correct person

- b. Checking that the specification is current and that the supply of lenses will not be for a longer period of time than the expiry of the specification
- c. Checking that the lenses that are supplied to the patient are those specified in the patient's contact lens specification
- d. Ensuring the patient knows which lens is for which eye
- e. Ensuring sellers are trained in the procedures to be followed
- f. Ensuring the patient is given written information on care solutions and knows how to handle the lenses
- g. Ensuring as far as is reasonable that the patient is not registered as visually impaired or severely visually impaired
- h. Reinforcing the need for regular contact lens check-ups, reminding the patient when their next scheduled contact lens consultation is due, and also reminding them of the expiry date of the specification
- i. Ensuring adequate records are kept
- j. Confirming that the audit trail is sufficient to ensure that any errors that occur are drawn to the attention of the generally directing dispensing optician

Note: ABDO recommends that dispensing opticians should be cautious when 'generally directing' contact lens supply, and should ensure that they are able to confirm that protocols are followed.

Duty to provide aftercare

121. The Opticians Act includes a new duty which states that the seller must make 'arrangements' ... 'for the individual for whom the optical appliance or 'zero powered contact lens' is supplied to receive aftercare in so far as, and for so long as, may be reasonable in his particular case.' The generally directing/supervising dispensing optician will therefore need to make sure that these 'arrangements' are in place.

122. Individual 'aftercare' arrangements would reasonably be understood to include where to go for routine aftercare in a manner convenient to the patient and should set out arrangements for:

- where the patient can go in an emergency
- what signs or symptoms they should look out for
- the importance of having regular contact lens check-ups
- how to remove the contact lenses in an emergency
- having a local contact or helpline for advice
- monitoring that aftercare arrangements are effective and work for the patient. This would include monitoring that the local contact or helpline works in practice and that the emergency provisions are appropriate.