



AMERICAN SOCIETY OF  
PLASTIC SURGEONS®



THE PLASTIC SURGERY  
FOUNDATION®

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February 29, 2016

The Honorable Pamela Althoff  
Illinois State Senate  
309L Capitol Building  
Springfield, IL 62706

The Honorable Anna Moeller  
Illinois State General Assembly  
249-E Stratton Office Building  
Springfield, IL 62706

**RE: S.2899/H.6166 – Concerns regarding provisions that would permit optometrists to perform surgery and administer injections**

Dear Senator Althoff and Representative Moeller:

On behalf of the Illinois Society of Plastic Surgeons, the Midwestern Association of Plastic Surgeons and the American Society of Plastic Surgeons, all of whom represent plastic surgeons in the great state of Illinois, we write to express serious concerns regarding provisions within S.2899/H.6166 that would expand the scope of practice for optometrists beyond their professional training. As written, this legislation raises considerable patient safety concerns that would compromise quality medical care for patients in Illinois.

On behalf of plastic surgeons in the state, we encourage you to maintain the high level of patient care that has been established and maintain current standards that permit only licensed Medical Doctors (MD) or Doctors of Osteopathic Medicine (DO) who meet appropriate education, training and professional standards to perform surgery in the ocular region. While the word “procedure” is often used in general terms as either “major” or “minor”, it is important to distinguish medical procedures as either surgical or non-surgical. To clearly identify the difference between surgery and non-surgery, the American Medical Association has adopted the American College of Surgeon’s definition of surgery, which above mentioned plastic surgery organizations fully support:

*Surgery is performed for the purpose of structurally altering the human body by the incision or destruction of tissues and is part of the practice of medicine. Surgery also is the diagnostic or therapeutic treatment of conditions or disease processes by any instruments causing localized alteration or transposition of live human tissue which include lasers, ultrasound, ionizing radiation, scalpels, probes, and needles. The tissue can be cut, burned, vaporized, frozen, sutured, probed, or manipulated by closed reductions for major dislocations or fractures, or otherwise altered by mechanical, thermal, light-based, electromagnetic, or chemical means. Injection of diagnostic or therapeutic substances into body cavities, internal organs, joints, sensory organs, and the central nervous system also is considered to be surgery (this does not include the administration by nursing personnel of some injections, subcutaneous, intramuscular, and intravenous, when ordered by a physician). All of these surgical procedures are invasive, including*

*those that are performed with lasers, and the risks of any surgical procedure are not eliminated by using a light knife or laser in place of a metal knife, or scalpel.*

*Patient safety and quality of care are paramount and, therefore, patients should be assured that individuals who perform these types of surgery are licensed physicians (defined as doctors of medicine or osteopathy) who meet appropriate professional standards. (Res. 212; A-07; Reaffirmed: BOT Rep. 16, A-13)*

The extensive education and training of plastic surgeons provides our specialty with the ability to perform these surgical procedures. Members of the American Society of Plastic Surgeons are certified by the American Board of Medical Specialties and certified by the American Board of Plastic Surgery. These members typically complete four years of graduate medical education, three or more years of clinical surgical training, and three or more years of plastic surgery residency training. Many of our physicians pursue additional training through a surgical fellowship after they complete the initial ten or more years of advanced medical and surgical training.

While optometrists play an integral role in treating patients throughout the state, their professional training does not offer sufficient education to allow them to perform surgical procedures of any magnitude. Unlike surgeons, optometrists do not undergo years of medical school, residency education and fellowship training in surgical specialties that would adequately prepare them to perform these procedures. This advanced training is particularly important as complications arise in highly sensitive areas, such as the eye and ocular adnexa. No matter the degree of so called “major” or “minor” procedures, optometrists are simply not properly trained to perform any surgical procedures. By permitting them to do so, patient safety will be jeopardized as patients receive treatment by unqualified professions.

In addition, injections to the ocular region also require advanced education that is beyond the professional training of optometrists. Unlike epinephrine or other drugs used to counteract an anaphylactic reaction, medications injected into the ocular region could cause serious side effects and harm to the patient if administered improperly. Many cosmetic injectables carry the risk of not only infection, but also permanent side effects, such as blindness, nerve paralysis, necrosis and the formation of permanent hard nodules. The medications injected into this area should not be taken lightly and require sufficient and continued education to ensure the highest levels of patient safety.

As currently written, the bill would also permit optometrists to perform injectable anesthesia to areas outside of the globe. Optometrists are not adequately trained to administer any form of anesthesia beyond that which is applied topically – this includes local anesthesia which is injected into a specific region. Inappropriate use of local anesthesia can have toxic effects, can cause nerve impairment and can cause permanent nerve damage. The administration of local anesthesia requires training and education beyond that which is provided to optometrists.

Optometrists are simply not properly trained to perform injectable procedures. Their professional training does not offer sufficient education to allow them to perform injectable procedures of any magnitude, which is why the legislature originally intended for these professionals to only perform injections to counteract an anaphylactic reaction. By permitting optometrists to perform these procedures, patient safety will be jeopardized.

Due to these patient safety concerns, it is critical that such procedures are performed by health care professionals who have the comprehensive training and board certification to handle those complications when they occur. We urge you to amend S.2899/H.6166 so that provisions permitting optometrists to perform surgery and administer injections are removed from the bill. If you have any questions or need further assistance, please feel free to contact Patrick Hermes, Senior Manager of Government Affairs and Advocacy at [phermes@plasticsurgery.org](mailto:phermes@plasticsurgery.org).

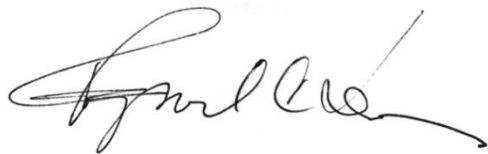
Sincerely,



Julie E. Park, MD, FACS  
Illinois Society of Plastic Surgeons  
*President*



David Song, MD, MBA  
American Society of Plastic Surgeons  
*President*



Raphael Lee, MD, ScD, FACS  
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