



2022

## American Orthoptic Council®

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 American Association for Pediatric  
 Ophthalmology and Strabismus  
 American Ophthalmological Society

## SCOPE OF PRACTICE for Certified Orthoptists®

### Educational Experience, Certification and Scope of Practice

#### Introduction

Orthoptists are proven and integral members of the U.S. healthcare system. The boundaries of each orthoptists' scope of practice are determined by these parameters: education and experience; policies of employers and facilities, and the needs of the patients.

The U.S. Department of Labor, Employment and Training Administration (ETA) lists Orthoptists (profession 29-1199.05) under the category of Health Diagnosing and Treating Practitioners. This is the same category shared by Nurse Practitioners and Nurse Anesthetists. The ETA divides jobs into zones according to the extent of preparation needed to enter the field; the knowledge, skills, and experience necessary; the tasks, work activities, work context, and tools and technology used in the execution of duties. There are five such "Job Zones". Orthoptics is categorized in Zone Five: Extensive Preparation Needed.

Orthoptists are employed in a multi-specialty field that is composed of many professionals including but not limited to Ophthalmologists, Allied Health technicians, nurses, surgical assistants, and other eye care team professionals. In an adjunctive capacity, an orthoptist works exclusively with an ophthalmologist as a physician extender and community liaison to allow the ophthalmologist to expand his or her services while maintaining quality care. Orthoptists are qualified to assist in the diagnostic evaluation, treatment/ management, and care of patients with deficiencies and abnormalities that affect eye alignment, vision development and the visual system.

The scope of practice allows orthoptists to perform tasks in accordance with laws and regulations that permit the physician to delegate.

## **Education and Experience**

An Orthoptic Fellowship Program curriculum is modeled on the medical school curriculum. The typical Orthoptic Program extends over 24 continuous months. There is an advanced program offered for candidates that have an undergraduate degree as well as COMT or COT certification to complete the program in less than the full two years. Training begins with classroom instruction in basic medical sciences. This is followed by clinical rotations. Students complete at least **2,000 hours** of supervised clinical practice with orthoptic instructors. A minimum of **1600** patient exposures must be achieved. All CO® Fellowship Programs offer certificate degrees to graduates.

The American Orthoptic Council® (AOC®) develops requirements for the education, training, and recertification of orthoptists.

The American Orthoptic Council® consists of representatives of the American Academy of Ophthalmology, the American Association for Pediatric Ophthalmology and Strabismus, the American Association of Certified Orthoptists, the American Ophthalmological Society, the Canadian Orthoptic Council and The Canadian Orthoptic Society.

The Committee of CAAHEP on Accreditation of Orthoptic Fellowship Programs (CoA-OFPP) accredits teaching programs able to meet the Standards and Guidelines based on those requirements.

### **National Board Certification and Continuing Education**

To be eligible to take the national board exams, the orthoptist must be sponsored by the program director of an CoA-OFPP accredited orthoptic school. Orthoptists holding current certification or licensure in a foreign country may apply to the AOC® for certification. Because orthoptic education and practice varies outside of North America, foreign-trained orthoptists may be encouraged or required to spend a time in a CoA-OFPP accredited orthoptic program before making an application to take the certification exams.

To practice, Orthoptists must graduate from an accredited Orthoptic Fellowship program and pass the Written and Practical certifying examination developed by the American Orthoptic Council®.

To maintain their national certification, orthoptists must sign a Code of Ethics and complete 45 hours of continuing medical education (CME) every three years and 30 hours in the first two years of practice.

The certificate issued by the Council signifies that the Certified Orthoptist® has successfully completed the program and examination process, has met the standards for certification, and is ethically and otherwise in good standing. Like other health professionals, after graduation orthoptists continue learning in the clinical work environment and through CME. It is not a license to engage in the practice of orthoptics and does not replace or necessarily fulfill any requirements of state or local agencies pertaining to the practice of a healthcare profession.

The Orthoptist scope of practice grows and shifts over time with advanced or specialized knowledge, with changes or advances in the medical profession overall and with evidence-based practices to optimize patient outcomes.

**Core Competency domains:**

- Patient care
- Medical knowledge
- Professionalism, interpersonal and communication skills
- Technical, diagnostic, and scientific skills
- Community and health services

Orthoptists must also attempt to prevent disease and management of patients with chronic diseases. Thus, the scope of practice covers the individual, the family, and the community. Public education activities focus on the promotion of visual and eye health and wellness.

**Scope of Practice**

The practice of orthoptics is multi-faceted. Clinical orthoptics may be practiced in a variety of physical locations including hospitals, clinics, private offices, and academic medical institutions. Individual positions may be designed to meet the needs of both employer and employee. Orthoptists treat many non-surgical disorders of ocular motility and binocular vision including, but not limited to, amblyopia, strabismus, and nystagmus.

Patients may be referred for sensorimotor evaluation from within the practice for assessment of amblyopia, pre- and post-operative strabismus, and complaints relating to binocular function. Orthoptists also perform other tasks that would otherwise be performed by the ophthalmologist, such as, returning patient phone calls, completing forms, preparing referral letters, or educating patients, students, or office staff. Orthoptists may also participate in clinical research or education of medical students, residents, and orthoptic students.

The responsibilities of Certified Orthoptists® include assisting in the diagnostic evaluation, management, treatment, education, and care of patients with medical and surgical conditions affecting the complex visual system. Orthoptists perform, but are not limited to, visual acuity testing on patients of all ages, sensory motor examinations, and refractions. These activities are supported by education, research, and administration.

**Practice Patterns**

Certified orthoptists® work in a variety of ways in the United States. They may be deemed an employee or function as an independent contractor. In some cases, the orthoptist sees patients at the same site as the supervising ophthalmologist, or at a satellite clinic. These patients may be referred for sensorimotor evaluations, management of amblyopia, strabismus, and other non-surgical disorders of ocular motility and binocular vision from the ophthalmologist's practice.

The orthoptist is an employee of the hospital or clinic, and fees for orthoptic services are collected by that employer. Other examples of practice patterns include:

- (1) The orthoptist generates fees for the office where she/he is working, and each office pays her/him a salary. One physician at each site functions as the supervising ophthalmologist for that site.
- (2) Several ophthalmologists in the same multi-specialty practice refer patients to the orthoptist for sensorimotor evaluation and treatment as a physician extender.

- (3) The orthoptist works side by side with the ophthalmologist as technical support for his/her clinics, performing the preliminary examination of each patient (which may or may not include cycloplegic retinoscopy) prior to the examination by the physician.
- (4) The orthoptist may also accompany the surgeon to the operating room and function as the surgical aide or first assistant.
- (5) The orthoptist may see follow-up patients on her/his own schedule. Professional fees currently paid are that of the Sensory Motor Exam code: 92060, Orthoptic Training: 92065, refraction: 92015, low level professional fee: 99202 and/or a facility fee: Q3014 (depending on the clinic location).

*This document has been approved by the Executive Committee; 5.27.22*