

Chapter Opt 1

AUTHORITY AND DEFINITIONS

Opt 1.01 Authority.
Opt 1.02 Definitions.

Opt 1.03 Delegation and supervision.

History: Chapter Opt 1 as it existed on January 31, 1971 was repealed, and a new chapter Opt 1 was created, Register, January, 1971, No. 181, effective 2–1–71.

Opt 1.01 Authority. The rules in chs. Opt 1 to 8 are adopted under authority in ss. 15.08 (5) (b), 227.11 (2), 449.01 and 449.07, Stats., to define the scope of practice of optometry in Wisconsin.

History: Cr. Register, August, 1985, No. 356, eff. 9–1–85; correction made under s. 13.93 (2m) (b) 7., Stats., Register, March, 1989, No. 399; am. Register, September, 1997, No. 501, eff. 10–1–97; CR 06–116: am. Register May 2007 No. 617, eff. 6–1–07.

Opt 1.02 Definitions. As used in chs. Opt 1 to 8:

(1) “Board” means the optometry examining board.

(1m) “Department” means the department of safety and professional services.

(2) “Fitting contact lenses” means any of the following procedures:

(a) Determining whether a patient may safely and comfortably wear contact lenses.

(b) Measuring and evaluating the curvature of the cornea through any means including photographic, mechanical or reflected light methods.

(c) Using a spectacle prescription or a prescription determined through the use of a vertometer or its equivalent on a pair of spectacles, as a basis for designing, manufacturing or duplicating a contact lens.

(d) Prescribing a schedule of wearing contact lenses.

(e) Placing a contact lens upon the eye of a patient for diagnostic purposes.

(f) Evaluating the physical fit of the contact lens.

(g) Using a phoropter, hand-held lens or any automated instrument for the purposes of determining the prescription or change in prescription of a contact lens.

(h) Any procedure listed in s. Opt 1.02 (4).

(4) “Minimum examination for the fitting of contact lenses” means the performance of all of the following procedures:

(a) Performing a minimum eye examination.

(b) Determining lens specifications.

(c) Evaluating the physical fit of diagnostic and prescribed lenses by means of a slit lamp.

(d) Prescribing a time schedule for a patient’s wearing the contact lenses.

(e) Performing progress evaluations and recording in the patient record the recommended date of the patient’s next visit.

(5) “Minimum eye examination” means the performance of all of the following procedures:

(a) Recording a complete case history of the patient.

(b) Measuring far and near visual acuity.

(c) Conducting an ophthalmoscopic and external examination.

(d) Measuring corneal curvature.

(e) Performing retinoscopy.

(f) Evaluating convergence and accommodation.

(g) Obtaining far and near subjective findings.

(h) Evaluating muscle balance.

(i) Measuring intraocular pressure.

(j) Recording prescription and far and near visual acuity obtained.

(6) “Supervision” means availability to coordinate, direct, and inspect the practice of an unlicensed person on a regular basis, as determined by the supervising optometrist.

History: Cr. Register, January, 1971, No. 181, eff. 2–1–71; am. Register, August, 1973, No. 212, eff. 9–1–73; r. and recr. Register, August, 1985, No. 356, eff. 9–1–85; emerg. r. (3), eff. 10–18–85; r. (3), Register, April, 1986, No. 364, eff. 5–1–86; correction in (1) (h) made under s. 13.93 (2m) (b) 7., Stats., Register, March, 1989, No. 399; renum. (1), (2) and (4) to be (2), (3) and (6) and am. (2) (h) and (6) (c), (1), (4) and (5) renum. from Opt 5.02 (1), (3) and (4), Register, June, 1990, No. 414, eff. 7–1–90; am. (intro.), (2) (a) to (g), (4) (intro.) to (d), (5) (intro.) to (i) and (6) (a) to (e), r. (1), cr. (1) and (1m), Register, September, 1997, No. 501, eff. 10–1–97; CR 06–116: am. (intro.), r. (3), r. and recr. (6), Register May 2007 No. 617, eff. 6–1–07; correction in (1m) made under s. 13.92 (4) (b) 6., Stats., Register February 2012 No. 674.

Opt 1.03 Delegation and supervision. Except as provided under s. Opt 5.03 (19) and (20), an optometrist may direct an unlicensed person working under the optometrist’s supervision to perform any act that is within the optometrist’s scope of practice. The optometrist continues to be responsible for interpretation of test findings, as well as the diagnosis and management of any condition related to the care of the patient.

History: Cr. Register, March, 1975, No. 231, eff. 4–1–75; r. and recr. Register, August, 1985, No. 356, eff. 9–1–85; CR 06–116: r. and recr. Register May 2007 No. 617, eff. 6–1–07; correction made under s. 13.92 (4) (b) 7., Stats., Register December 2016 No. 732.