



SENATE BILL 2076

By Watson

AN ACT to amend Tennessee Code Annotated, Title 63,  
Chapter 8, relative to optometry.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Section 63-8-102, is amended by deleting subdivisions (11) and (12) and substituting:

(11) "Orthoptics" means any ocular exercise for the correction or relief of abnormal muscles or functions of the eyes;

(12) "Practice of optometry" means:

(A) The employment of an objective or subjective method for the purpose of ascertaining eye health and a defect of vision, muscular anomaly, or another abnormal condition of the eyelids, eyes, or the eye's adnexa;

(B) The prescribing of ophthalmic lenses or prisms to remedy or relieve a defect of vision or muscular anomaly and the prescribing of contact lenses, including those with prescription power and those without prescription power, which are worn for cosmetic purposes;

(C) The use of orthoptics and the adjusting, fitting, or adapting of lenses, prisms, or eyeglasses to remedy or relieve a defect of vision or a muscular anomaly;

(D) The supplying, replacement, or duplication of an ophthalmic lens or frame; and

(E) The examination, diagnosis, management, prevention, or treatment of a condition or disease of the eyelid, eye, or the eye's adnexa, which includes the following:

(i) The administration and prescribing of a pharmaceutical agent rational to the diagnosis and treatment of a condition or disease of the eyelid, eye, or the eye's adnexa by any route of administration approved for such use;

(ii) The performance of primary eye care and surgical procedures rational to the treatment of a condition or disease of the eyelid, eye, or the eye's adnexa as determined by the board based on an optometrist's education, training, and experience;

(iii) The performance or ordering of procedures, imaging, and laboratory tests rational to the diagnosis of a condition or disease of the eyelid, eye, or eye's adnexa;

(iv) The application of light amplification by stimulated emissions of radiation (LASER) assisted procedures in the diagnosis, management, and treatment of a condition or disease of the anterior segment of the eyelids, eyes, or eye's adnexa;

(v) The administration of diphenhydramine, epinephrine, or an equivalent medication to counteract anaphylaxis or anaphylactic reaction and the use of anterior chamber paracentesis in an emergency situation requiring immediate reduction of the pressure inside the eye;

(vi)

(a) The use of a local anesthetic in conjunction with the primary care or surgical treatment of an eyelid lesion or changes in the eye's adnexa as a result of non-pathological aging.

However, an optometrist shall not use a local anesthetic for such purposes unless the optometrist has met the certification

requirements as described in § 63-8-112(4) and in the rules adopted by board for the administration of a pharmaceutical agent in the performance of primary eye care and a surgical procedure; and

(b) Utilizing local anesthesia by injection in performing the following procedures:

(1) Needle drainage of an eyelid abscess, hematoma, bulla, and seroma;

(2) Excision of a single epidermal lesion without characteristics of malignancy, no larger than five millimeters (5 mm) in size and no deeper than the dermal layer of the skin;

(3) Incision and curettage of a nonrecurrent chalazion;

(4) Simple repair of an eyelid laceration no larger than two and one-half centimeters (2.5 cm) and no deeper than the orbicularis muscle and not involving the eyelid margin or lacrimal drainage structures;

(5) Removal of a foreign body in the eyelid not involving lid margin, lacrimal drainage structures, and extending no deeper than the orbicularis muscle; and

(6) Intramuscular, subcutaneous, and intradermal pharmaceuticals for the aesthetic mitigation of non-pathological aging facial tissue; and

(vii) As approved by the board, the performance of a surgical procedure for the correction and relief of an ocular abnormality, except for the following procedures:

(a) Retina laser procedures, laser-assisted in situ keratomileusis (LASIK), and photorefractive keratectomy (PRK);

(b) Non-laser surgery related to removal of the eye from a living human being;

(c) Non-laser surgery requiring full thickness incision or excision of the cornea or sclera other than paracentesis in an emergency situation requiring immediate reduction of the pressure inside the eye;

(d) Penetrating keratoplasty, also known as a corneal transplant, or lamellar keratoplasty;

(e) Non-laser surgery requiring incision of the iris and ciliary body;

(f) Non-laser surgery requiring incision of the vitreous;

(g) Non-laser surgery requiring incision of the retina;

(h) Non-laser surgical extraction of the crystalline lens;

(i) Incisional or excisional non-laser surgery of the extraocular muscles;

(j) Non-laser surgery of the eyelid for an eyelid malignancy, for incisional cosmetic, or mechanical repair of blepharochalasis, ptosis, and tarsorrhaphy;

(k) Non-laser surgery of the bony orbit;

(l) Incisional or excisional non-laser surgery of the lacrimal system other than punctal dilation, lacrimal probing, lacrimal irrigation, placement of punctal plugs, or other approved therapeutic devices;

(m) Non-laser surgery requiring full thickness conjunctivoplasty with graft or flap;

(n) A laser procedure into the vitreous chamber of the eye to treat vitreous, retinal, or macular disease;

(o) The administration of general anesthesia; and

(p) Cataract surgery;

SECTION 2. Tennessee Code Annotated, Title 63, Chapter 8, Part 1, is amended by adding the following as a new section:

An optometrist who uses a local anesthetic, as described in § 63-8-102(12)(E)(vi), shall provide to the board proof of the following:

(1) The optometrist has a current cardiopulmonary resuscitation (CPR) certification by an organization approved by the board; and

(2) The optometrist has an automated external defibrillator (AED) present at all times in the optometrist's office in which the optometrist is administering the local anesthetic.

SECTION 3. Tennessee Code Annotated, Title 63, Chapter 8, Part 1, is amended by adding the following as a new section:

An optometrist must be held to the same standard of care as that of other physicians providing similar services.

SECTION 4. This act takes effect upon becoming a law, the public welfare requiring it.

Amendment No. 1 to SB2076

Crowe  
Signature of Sponsor

**AMEND Senate Bill No. 2076\***

**House Bill No. 1952**

by deleting all language after the enacting clause and substituting:

SECTION 1. Tennessee Code Annotated, Section 63-8-102, is amended by deleting subdivisions (11) and (12) and substituting:

(11) "Orthoptics" means any ocular exercise for the correction or relief of abnormal muscles or functions of the eyes;

(12) "Practice of optometry":

(A) Means:

(i) The employment of an objective or subjective method for the purpose of ascertaining eye health and a defect of vision, muscular anomaly, or another abnormal condition of the eyelids, eyes, or the eye's adnexa;

(ii) The prescribing of ophthalmic lenses or prisms to remedy or relieve a defect of vision or muscular anomaly and the prescribing of contact lenses, including those with prescription power and those without prescription power, which are worn for cosmetic purposes;

(iii) The use of orthoptics and the adjusting, fitting, or adapting of lenses, prisms, or eyeglasses to remedy or relieve a defect of vision or a muscular anomaly;

(iv) The supplying, replacement, or duplication of an ophthalmic lens or frame; and

(v) The examination, diagnosis, management, prevention, or treatment of a condition or disease of the eyelid, eye, or the eye's adnexa, which includes the following:

(a) The administration and prescribing of a pharmaceutical agent rational to the diagnosis and treatment of a condition or disease of the eyelid, eye, or the eye's adnexa by any route of administration approved for such use;

(b) The performance of primary eye care and surgical procedures rational to the treatment of a condition or disease of the eyelid, eye, or the eye's adnexa as determined by the board based on an optometrist's education, training, and experience;

(c) The performance or ordering of procedures, imaging, and laboratory tests rational to the diagnosis of a condition or disease of the eyelid, eye, or eye's adnexa;

(d) The application of light amplification by stimulated emissions of radiation (LASER) assisted procedures in the diagnosis, management, and surgical treatment of a condition or disease of the anterior segment of the eyelids, eyes, or eye's adnexa;

(e) The administration of diphenhydramine, epinephrine, or an equivalent medication to counteract anaphylaxis or anaphylactic reaction and the use of anterior chamber paracentesis in an emergency situation requiring immediate reduction of the pressure inside the eye;

(f)

(1) The use of a local anesthetic in conjunction with the primary care or surgical treatment of an eyelid

lesion or changes in the eye's adnexa as a result of non-pathological aging. However, an optometrist shall not use a local anesthetic for such purposes unless the optometrist has met the certification requirements as described in § 63-8-112(4) and in the rules adopted by the board for the administration of a pharmaceutical agent in the performance of primary eye care and a surgical procedure; and

(2) Utilizing local anesthesia by injection in performing the following procedures:

(A) Needle drainage of an eyelid abscess, hematoma, bulla, and seroma;

(B) Excision of a single epidermal lesion without characteristics of malignancy, no larger than five millimeters (5 mm) in size and no deeper than the dermal layer of the skin;

(C) Incision and curettage of a nonrecurrent chalazion;

(D) Simple repair of an eyelid laceration no larger than two and one-half centimeters (2.5 cm) and no deeper than the orbicularis muscle and not involving the eyelid margin or lacrimal drainage structures;

(E) Removal of a foreign body in the eyelid not involving lid margin, lacrimal drainage structures, and extending no deeper than the orbicularis muscle; and

(F) Intramuscular, subcutaneous, and intradermal pharmaceuticals for the aesthetic mitigation of non-pathological aging facial tissue; and

(B) Does not include the following procedures, which an optometrist shall not perform:

(i) Retina laser procedures, laser-assisted in situ keratomileusis (LASIK), and photorefractive keratectomy (PRK);

(ii) Surgery related to removal of the eye from a living human being;

(iii) Surgery requiring full thickness incision or excision of the cornea or sclera other than paracentesis in an emergency situation requiring immediate reduction of the pressure inside the eye;

(iv) Penetrating keratoplasty, also known as a corneal transplant, or lamellar keratoplasty;

(v) Surgery requiring incision of the iris and ciliary body;

(vi) Surgery requiring incision of the vitreous;

(vii) Intravitreal injections;

(viii) Surgery requiring incision of the retina;

(ix) Surgical extraction of the crystalline lens;

(x) Incisional or excisional surgery of the extraocular muscles;

(xi) Surgery of the eyelid for an eyelid malignancy, for incisional cosmetic, or mechanical repair of blepharochalasis, ptosis, and tarsorrhaphy;

(xii) Surgery of the bony orbit;

(xiii) Incisional or excisional surgery of the lacrimal system other than punctal dilation, lacrimal probing, lacrimal irrigation, placement of punctal plugs, or other approved therapeutic devices;

(xiv) Surgery requiring full thickness conjunctivoplasty with graft or flap;

(xv) A laser procedure into the vitreous chamber of the eye to treat vitreous, retinal, or macular disease;

(xvi) The administration of general anesthesia; and

(xvii) Cataract surgery;

SECTION 2. Tennessee Code Annotated, Title 63, Chapter 8, Part 1, is amended by adding the following as new sections:

**63-8-129.**

An optometrist who uses a local anesthetic, as described in § 63-8-102(12)(A)(v)(f), shall provide to the board proof of the following:

(1) The optometrist has a current cardiopulmonary resuscitation (CPR) certification by an organization approved by the board; and

(2) The optometrist has an automated external defibrillator (AED) present at all times in the optometrist's office in which the optometrist is administering the local anesthetic.

**63-8-130.**

(a) An optometrist shall not perform a surgical procedure utilizing a LASER unless the optometrist is certified by the board to perform such procedure.

(b) To obtain board certification to perform surgical procedures utilizing a LASER, an optometrist must provide proof satisfactory to the board that the optometrist has completed the necessary didactic and clinical training in the use of LASERs from an accredited optometry school or college, including training in the use of LASERs for medically recognized and appropriate treatment of the human eye.

(c) The board shall adopt rules governing the certification of optometrists to utilize LASERs. The rules must be promulgated in accordance with the Uniform Administrative Procedures Act, compiled in title 4, chapter 5.

**63-8-131.**

An optometrist is held to the same standard of care as that of physicians providing similar services.

SECTION 3. For the purpose of rule promulgation, this act takes effect upon becoming a law, the public welfare requiring it. For all other purposes, this act takes effect January 1, 2028, the public welfare requiring it.