

Optometry in the Age of Disruptors: When Patients are Harmed

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Abstract:

The field of optometry faces unprecedented disruption from companies outside of the profession. Regulatory agencies either have little enforcement dollars or have made commitments to reduce barriers to new unproven technologies. Unfortunately for our patients, this behavior is resulting in real harm. This lecture presents case reports where patients have suffered harm and teaches how to treat the sequelae. For the first time, statistics from a live national database of optometrists complaints about abuses by disruptors are presented. Next, participants learn how to change the focus of their exam to safeguard their patients' health.

Learning Objectives:

- Understand the landscape of disruptors operating now and how they can lead to harm
- Explore the differential diagnosis of contact lens complications from improper prescription validation
- Dissect a case where a simple refractive complaint turned into life-threatening surgical intervention
- Hash through the statistics of a national database of cases of harm reported by our colleagues
- Learn what changes the individual optometrist can make to their exam to ensure patients continue to value comprehensive eye care

Outline

- I. Case studies
 - a. Case study- Online contact lens reseller
 - i. Case history
 1. 27 year old biology professor
 2. Purchasing lenses online for 3 years without appointment
 3. Eye Irritation- goes to local ophthalmologist
 4. Local ophthalmologist sends him directly to cornea specialists office
 - ii. Image of eye
 1. Differential Diagnosis
 - a. Infectious
 - b. Neoplastic
 - c. Inflammatory
 - d. Traumatic
 2. What is your course of action if this patient comes to your office in this state?
 - iii. Eye perforates in cornea specialists' waiting room- pseudomonas ulcer
 - iv. Rushed into emergency PK surgery

- v. Treatment
 - 1. Surgical- 11.5mm graft will need regrant every 5 years
 - 2. Optometric
 - a. Glasses
 - b. Contact lens
 - i. Corneal GP
 - ii. Hybrid
 - iii. Scleral
 - vi. Current status of patient
- b. Case study- patient considering telemedicine
 - i. Case history
 - 1. 12 year old developmentally delayed boy
 - 2. Broken glasses- parents considered online refraction
 - 3. Examined in office instead
 - ii. Image
 - 1. Differential Diagnosis
 - a. Infectious
 - b. Inflammatory
 - c. Neoplastic
 - d. Traumatic
 - 2. Course of action?
 - a. Send to Neuro-ophthalmology next available
 - b. Imaging next day
 - c. ED for immediate imaging
 - iii. Sent to ED for emergent imaging
 - iv. Found to have mucocele invading intracranial space
 - v. Neurosurgeon noted "Patient would have been blind or dead by the weekend"
- II. Reported cases of patient harm by optometrists (national database)
 - a. Statistics
 - b. Landscape of reported cases
- III. Change focus of examination
 - a. Provide conveniences to your patients

- b. Educate
 - i. Explain every test
 - ii. Talk about risks
 - 1. Do not sleep in lenses
 - 2. No water touches lenses
 - 3. Change storage cases monthly
 - 4. Wash storage case with soap and water, air dry face down
 - 5. Rub monthly lenses
 - 6. Go over storage solutions
 - c. Differentiate
 - d. Embrace online strategies
- IV. Conclusion