## 21 NCAC 42E .0102 PROFESSIONAL RESPONSIBILITY

In keeping with the professional code, the optometrist shall:

- (1) attend to the visual needs of all those seeking his services without regard to financial remuneration;
- (2) maintain adequate equipment and instruments in his office at all times to assure proper and complete examination of patients. Such equipment and instruments shall include, but not be limited to, the following: a direct ophthalmoscope; an indirect ophthalmoscope; condensing lenses; proper instrumentation for foreign body removal; biomicroscope; instrument for plotting central and peripheral fields; applanation tonometer; distance and near acuity charts; test objects for stereopsis and fusion; color vision testing apparatus; refractor, trial frame or phorometer with trial case lenses; keratometer; and retinoscope;
- sterilize according to usage all instruments or equipment used in the treatment of optometric patients, including those instruments or equipment used for the removal of foreign bodies from the external eye or its adnexa. All optometric offices shall follow infection control recommendations as set forth in the infection control manual as recommended by the American Optometric Association's Committee on Primary Care and Ocular Disease, or in the clinical guidelines of the American Optometric Association's Clinical Guidelines and Quality Assurance Coordinating Committee or their successors including subsequent adoptions, amendments, and editions. These materials are incorporated herein by reference. Copies are available for inspection at the Board's office and may be obtained by paying a fee of ten dollars (\$10.00) to the Board;
- (4) assist his patients in whatever manner possible in obtaining further care when in his opinion other than his care is needed;
- (5) maintain adequate and available records on every patient containing case history, findings, diagnosis, treatment, and disposition. In compliance with this requirement, the patient record shall include the name of the patient's family physician or any other physician who may be consulted with regard to the care of the patient. The name and dosage of any medication prescribed shall be recorded with the diagnosis and instructions to the patient concerning follow-up;
- (6) retain full and independent control of and responsibility for patient records. This requirement does not preclude the licensee from providing copies of patient spectacle prescriptions for subsequent optical services, nor does it preclude the licensee from providing copies of patient records to any entity with the consent and authorization of the patient. Patient records shall be maintained by the optometrist responsible for such records for a period of not less than 5 years following the last entry into the patient's chart;
- (7) treat all information concerning his patients as confidential and not to be communicated to others except when authorized to do so by the patient or required by law;
- (8) have an established and appropriate procedure for the provision of eye care to his patients in the event of an emergency outside of normal professional hours, or when the licensee is not available due to vacation, personal illness, attendance at professional meetings or continuing education programs, or other absences of a similar nature. Patients shall be informed of such procedure. The procedure referred to herein may include, but is not limited to, cooperative arrangements with another licensed optometrist or a physician licensed under North Carolina General Statutes Chapter 90, Article 1, a telephone answering system or pager; or written or posted instructions to the patient;
- (9) maintain full and independent control of the terms and conditions of any professional liability insurance coverage pertaining to his services.

History Note: Authority G.S. 90-18; 90-114; 90-121.2; 90-127.2;

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Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. May 23, 2015.