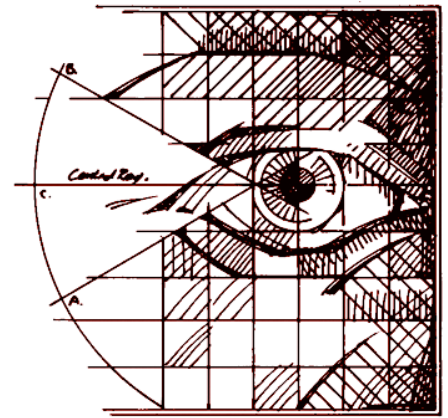


OLIVER M. KORSHIN, M. D.  
DISEASES AND SURGERY OF THE EYE

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March 1, 2016

Senator Mia Costello  
Pouch V  
State Capitol  
Juneau, Alaska 99801

Re: Senate Bill No. 55 — “An Act relating to the practice of optometry”

Dear Senator Costello:

I’m a board-certified ophthalmologist in private practice in Anchorage since 1985.

To become an ophthalmologist, I first obtained an M.D. degree from Harvard Medical School, completed a one year internship in internal medicine at Boston City Hospital, and a three year ophthalmology residency at the U.S. Public Health Service Hospital in San Francisco, CA. I also served as the chief of ophthalmology at the Alaska Native Medical Center for three years before entering private practice.

At the PHS hospital, at ANMC and at the Indian Health Service facilities in Sitka, Ketchikan, Dillingham, Bethel, Fairbanks, Nome, Kotzebue and Barrow, I worked closely alongside optometrists, so I am well-acquainted with their considerable capabilities at diagnosing and treating eye conditions. I have great respect for the optometric profession.

Optometrists are not, however, medical doctors. They lack the intensive and rigorous training medical doctors receive in the pathophysiology, diagnosis and treatment of human disease. They have not been trained in the use of scalpel, laser or needle, all of which can wreak enormous harm as well as producing enormous benefits. They have not cared for patients in a hospital setting. Specifically, they have not cared for *eye* patients in a hospital setting, whereas every resident in ophthalmology provides such care from day one of his training.

SB 55, through its brevity and overly-broad language, seeks to substitute the judgment of the members of the Board of Optometry, who have limited or no training or experience in general medicine or in surgery, for the years of training and experience ophthalmologists must endure before hanging our their shingle.

SB 55 forbids optometrists from performing “invasive surgery,” but then defines invasive surgery in such narrow terms that optometrists would be able to perform complex, delicate and often high-risk procedures involving the cornea, conjunctiva, sclera, eyelids, lacrimal gland and tear drainage system, the bones of the eye socket, and the excision of benign or malignant tumors around the eye or of the eyelids. In short, there is a myriad of scalpel and laser-based procedures that SB 55 would allow optometrists to perform.

*All* these procedures are invasive, some of them highly so. In fact, as a matter of definition, *all* surgery, including laser surgery, is invasive. Restricting the definition of invasive surgery, as SB 55 does, is ample evidence that optometrists have scant understanding of the powers and dangers of surgery and is sufficient reason in itself to vote against SB 55.

Additionally, SB 55 would permit optometrists “to prescribe and use” controlled substances, leaving it up to the judgment of the members of the Board of Optometry to define the standards for the use of pharmaceuticals in which they themselves have little training or experience. (What is particularly odd in allowing optometrists to prescribe controlled substances is how infrequently they are used in ophthalmology: I might write a prescription for a controlled substance once every two years, at the most.)

One of the most important attributes of a good medical doctor is to be aware of one’s limitations, and to readily refer to or consult with a medical specialist or subspecialist on complex, difficult cases. SB 55 would remove, at one stroke, many limitations on the practice of optometry which currently exist for the sake of patient safety.

Please vote “No” on SB 55.

Sincerely,

A handwritten signature in black ink, appearing to read "Oliver Korshin MD", with a stylized flourish at the end.

Oliver Korshin, M. D.