

Fact sheet

8 December 2014

2014 revised Guidelines on use of scheduled medicines

Glaucoma diagnosis and management

The Optometry Board of Australia (the Board) has today published revised 2014 *Guidelines for use of scheduled medicines* following the resolution of a long-standing legal matter between the Board, AHPRA, the Royal Australian and New Zealand College of Ophthalmologists (RANZCO) and the Australian Society of Ophthalmologists (ASO).

The revised guidelines are published under the *Policies, codes and guidelines* section of the Board's website.

All parties have issued a [joint statement](#) that reflects the constructive spirit of the settlement and recognises that optometrists and ophthalmologists are qualified to practise independently.

It also reflects that patient safety and wellbeing is the top priority and is best supported by effective communication and collaboration between optometrists and ophthalmologists.

The updated guidelines, as agreed by all parties:

- reflect the principles set out in the joint statement
- enhance the early diagnosis and treatment of glaucoma in the best interest of the public
- clarify the timelines for information exchange between treating practitioners (optometrists and ophthalmologists)
- confirm that optometrists can assess patients for glaucoma, make an initial diagnosis and start treatment when that is in the patient's best interests
- confirm that within four months of starting treatment for chronic glaucoma optometrists must provide a referral letter to the patient and send a copy to the ophthalmologist or ophthalmology service
- confirm that the timing of the referral up to the four months will be determined by the optometrist's clinical judgement with reference to the Board's guidelines and the National Health and Medical Research Council (2010) *Guidelines for the screening, prognosis, diagnosis, management and prevention of glaucoma*, and
- as the four month referral is the only significant change, it is advised that a patient currently being treated independently by an optometrist for chronic glaucoma should be referred in accordance

with this change at the next scheduled review, or prior, if the next scheduled review is later than 8 April 2015.

Optometrists whose registration is endorsed for scheduled medicines have done accredited training in scheduled medicines in order to meet the Board's *Endorsement for scheduled medicines registration standard*.

Endorsed optometrists have the education, training and authority to prescribe topical anti-glaucoma medicines and are in a position to initiate treatment for chronic glaucoma, facilitating timely stabilisation of glaucoma and increased compliance with treatment.

Optometrists with a registration endorsement for scheduled medicines are required to comply with the new guidelines and failure to do so may constitute evidence of unprofessional conduct (section 41 of the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law)).

For more information

- [Guidelines](#)
- [FAQ](#)
- www.optometryboard.gov.au