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MEMBERS OF THE COMMITTEE

Lillian Wang, OD, Chair
Madhu Chawla, OD (Appointed)
Debra McIntyre, OD

**PRACTICE AND EDUCATION COMMITTEE
APPROVED MEETING MINUTES
Friday, July 31, 2020
This public meeting was held via WebEx Events.**

Members Present	Staff Present
Lillian Wang, OD, Chair	Shara Murphy, Executive Officer
Madhu Chawla, OD	Cheree Kimball, Assistant Executive Officer
Debra McIntyre, OD	Marc Johnson, Policy Analyst
	Natalia Leeper, Licensing Coordinator
	Dani Rogers, DCA Regulatory Counsel
	Will Maguire, Legal Counsel

Link to Meeting Audio: <https://www.optometry.ca.gov/meetings/index.shtml>

1. Call to Order / Roll Call

Dr. Wang called the meeting to order at 1:00 p.m. and took roll. All Committee members were present, and a 3-0 quorum was established.

2. Public Comment for Items Not on the Agenda

Audio of discussion: 00:20 / 02:07:54

There were no public comments.

3. Discussion and Possible Action on Continuing Education Course Approval Requests Pursuant to Title 16, California Code of Regulations Section 1536 (RESUBMITTED APPLICATIONS)

Audio of discussion: 01:27 / 02:07:54

A. Sacramento Eye Consultants - Ms. Beatrice Sterchak

1. Glaucoma Update 2019
2. UGH Syndrome
3. Red Eye, Bumps, & Unknown Diagnosing & Treatment

- 4. Neurotropic Keratitis
- 5. Glaucoma or Glaucoma Suspect?
- B. NVISION Centers - Mr. Ryan Mannix**
 - 1. All Things Cataract
 - 2. All Things Refractive

There was no public comment.

Debra McIntyre moved to approve Agenda Items 3.A.1-5 and 3.8.1-2. Madhu Chawla seconded. The Committee voted unanimously (3-0) and the motion carried.

Member	Aye	No	Abstain	Absent	Recusal
Wang	X				
Chawla	X				
McIntyre	X				

4. Discussion and Possible Action on Continuing Education Course Approval Requests Pursuant to Title 16, California Code of Regulations Section 1536 (COMPLETE APPLICATIONS)

Audio of discussion: 03:36 / 02:07:54

A. Luxottica Retail- Ms. Cindy Chiang

Retinal Care for the Busy Retail Optometrist

B. Dr. Alice Tien

- 1. Scleral Depression: To Infinity and Beyond
- 2. Combining Innovative Technology in Management of Glaucoma & Cataract for Your Patients
- 3. Lasik and Cataract Co-Management

C. SoCalEyes- Ms. Rachel Lopez

- 1. Artificial Intelligence in Eye Care
- 2. Glaucoma & Comprehensive Ophthalmology
- 3. Global Eye Care, Dry Eye & Corneal Care
- 4. Wonderful World of Autofluorescence

D. Mind Meld Studios- Mr. Michael Aberle

California AB 1825 / SB 1343 Employee

E. Furlong Vision Correction Medical Center Inc.

- 1. Co-Management Tips and Pearls.
- 2. Corneal Conditions Affecting Cataract Surgery

F. Acuity Eye Group - Ms. April Weekley

Gonioscopy

G. Shepard Eye Center- Ms. Susan Grahame

Intraocular Lens Cataract & LASIK Update

H. Harvard Eye Associates- Ms. Khristine Mays

Atypical UGH Syndrome

I. Harvard Eye Associates- Ms. Khristine Mays

Seeing the Invisible

- J. Harvard Eye Associates- Ms. Khristine Mays**
MIGS Not So Minimal
- K. Harvard Eye Associates - Ms. Khristine Mays**
GDI- Orbital Cellulitis
- L. Shepard Eye Center- Ms. Susan Graham**
In-Office Procedures
- M. East Bay Eye Center- Ms. Tammy Carson**
Glaucoma & Anterior Segment (Cornea, Cataract & External Diseases
CME)
- N. Maloney-Shamie Vision Institute- Mr. Ryan Delaney**
 - 1. Anterior Segment
 - 2. Glaucoma
 - 3. Retina
- O. East Bay Eye Center- Ms. Tammy Carson**
Glaucoma & Anterior Segment (Cornea, Cataract & External Diseases
CME) Part Two- Additional Instructors
- P. EAP Optometry - Dr. Stephen Eap**
Optometry Law
- Q. Luxottica Retail- Dr. Cindy Chiang**
Retinal Care for Busy Retail Optometrist
- R. Dr. Sol Lee**
Diagnosis, Referral & Treatment of Retinal Disorders
- S. National Glaucoma Society- Ms. Janet Swartz**
How to Determine Glaucoma Progression
- T. National Glaucoma Society- Ms. Janet Swartz**
Allergies: The Eyes
- U. National Glaucoma Society- Ms. Janet Swartz**
Taking the Mystery Out of Abnormal Pupils
- V. National Glaucoma Society- Ms. Janet Swartz**
OCT Interpretation in the Diagnosis and Management of Glaucoma
- W. Batra Vision Medical Group - Ms. Hedy Rodriguez**
AcrySof IQ PanOptix IOL
- X. Ketchum University- Dr. John Lee, MD**
Challenging Cases in the Anterior Segment (ONLINE)
- Y. Dougherty Laser Vision - Mr. Jorge Calderon**
ADV Case Studies Eye Q Quiz
- Z. Dougherty Laser Vision - Mr. Jorge Calderon**
Cataract RLE. Surgery Co-Management
- AA. Dougherty Laser Vision - Mr. Jorge Calderon**
COVID-19 & Impact on Ocular Health
- BB. Dougherty Laser Vision- Mr. Jorge Calderon**
Glaucoma Case Studies & Everyday Treatments
- CC. Dougherty Laser Vision- Mr. Jorge Calderon**
Pearls of Cataract Co-Management Case Presentation &
Preoperative Issues (ONLINE)

DD. Dougherty Laser Vision - Mr. Jorge Calderon

Pearls of Cataract Co-Management Part 2 (*online delivery*)

EE. Ketchum University- Dr. John Lee, MD

1. Early Results of the Recent FDA Approved Trifocal IOL (*online delivery*)

2. Epithelial Mapping and Refractive Surgery (*online delivery*)

3. Trauma Drama: Cases of Mechanical Ocular Injury (*online delivery*)

FF. Dougherty Laser Vision- Mr. Matt Liff

Practicing Ophthalmology During the Era of COVID and Rapid-Fire Cases in Postoperative Cataract Management

GG. Dougherty Laser Vision- Mr. Matt Liff

LASIK / PRK Peri-Op Care

HH. Dougherty Laser Vision- Mr. Matt Liff

LASIK / PRK Peri-Op Care in the Era of COVID II.

Dougherty Laser Vision- Mr. Matt Liff

Ocular Emergencies During COVID-19

JJ. Dougherty Laser Vision - Mr. Matt Liff

Adv Case Studies Eye Q Quiz #2

KK. Dougherty Laser Vision- Mr. Matt Liff

Laser Vision Correction: Postoperative Management

LL. Dougherty Laser Vision- Mr. Matt Liff

How I Became a Telemedicine Believer

MM. Retinal Diagnostic Center- Ms. Nonie Velez

Examining and Treating Ocular Diseases in the COVID-19 Era: What You Need to Know (ONLINE)

Madhu Chawla moved to approve all agenda items excluding Items 4.C.1., 4.M., 4.0., 4.GG., and 4.HH. which are held for further consideration. Debra McIntyre seconded. The Committee voted unanimously (3-0) and the motion carried.

Member	Ave	No	Abstain	Absent	Recusal
Wang	X				
Chawla	X				
McIntyre	X				

Upon the conclusion of Agenda Item 7, Members and staff revisited and voted on Agenda Items 4.M and 4.0. Staff was able to obtain the breakdown of the subject matter from the provider. There was no public comment.

Madhu Chawla moved to approve Items 4.M. and 4.0. Lillian Wang seconded. The Committee voted unanimously (3-0) and the motion carried.

Member	Aye	No	Abstain	Absent	Recus
Wang	X				
Chawla	X				

McIntyre	X				
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5. Discussion and Possible Action on Continuing Education Course Approval Requests Pursuant to Title 16, California Code of Regulations Section 1536 (KAISER PERMANENTE APPLICATIONS)

Audio of discussion: 11:11 | 02:07:54

- A. KP - Ms. Aileen Nokes**
A Usual Day in a Retina Office
- B. KP - Dr. Alisha Truong**
1. Use of OCT in Diagnosis and Management of Glaucoma (*online delivery*)
2. MIGS: Micro-Minimally Invasive Glaucoma Surgery
- C. KP- Dr. Divinder Grewal**
Diagnosing Glaucoma Subtypes and Tests
- D. KP - Dr. Alisha Truong**
Pediatric Eye Care: Strabismus and Nerve Palsies (*online delivery*)
- E. KP- Dr. Alisha Truong**
Scleral Lenses for Scary Corneas Remix (*online delivery*)
- F. KP - Dr. Alisha Truong**
Infectious Keratitis- Pearls on Diagnosis and Management (*online delivery*)
- G. KP- Dr. Alisha Truong**
Evaluation and Management of the Adult Tearing Patient (*online delivery*)
- H. KP - Dr. Alisha Truong**
Corneal Dystrophies: Review and Update (*online delivery*)
- I. Kaiser Permanente c/o Dr. Alvin Chua**
1. Eyelid and Facial Lesions
2. Ocular Manifestations of Systemic Medications
3. Zebra with a Red Eye

There was no public comment.

Debra McIntyre moved to accept Item 5.A. Lillian Wang seconded. The Committee voted (2-Aye, 0-No, 1-Abstention) and the motion carried.

Member	Aye	No	Abstain	Absent	Recusal
Wang	X				
Chawla			X		
McIntyre	X				

There was no public comment.

Lillian Wang moved to accept all Items 5.A. through 5.1.3 with the exclusion of 5.1.2. Debra McIntyre seconded. The Committee voted unanimously (3-and the motion carried.

Member	Aye	No	Abstain	Absent	Recusal
Wang	X				
Chawla	X				
McIntyre	X				

6. Discussion and Possible Action on Continuing Education Course Approval Requests Pursuant to Title 16, California Code of Regulations Section 1536 (INCOMPLETE APPLICATIONS)

Audio of Discussion: 15:34/02:07:54

A. Inland Eye Institute - Ms. Jennifer Hess

1. Refractive Surgery Update
2. Latest and Greatest on Adjunctive Cataract Surgery Services
3. An Update on Intacs
4. Visual Field Interpretation and Review of Micro Invasive Glaucoma Surgical Treatment

B. Acuity Eye Group- Ms. April Weekley

AMD Management and Treatment

C. Lorna Linda University- Ms. Lavina

1. Cortical Vision Impairment
2. Customization of IOL Selection with Cataract Surgery
3. OCT Angiography and Retinal Disease
4. Pain - Blurry Vision - Disc Edema

D. East Bay Eye Center- Dr. Ed Laubach

East Bay Eye Center Multi-Specialty CME

E. Fig Garden Optometry- Dr. Jeffrey Krohn

ATIOLS- Adv Technology Intra-Ocular Lenses

F. Fig Garden Optometry- Dr. Jeffrey Krohn

Oculoplastic Reconstruction

No action was taken on Item 6 as the application packages were incomplete. There was no public comment.

7. Discussion and Possible Action on Title 16, California Code of Regulations Section 1536: Continuing Optometric Education; Purpose and Requirements

Audio of discussion: 16:41 / 02:07:54

Mr. Johnson provided an update on Section 1536. The proposed changes were discussed at the last Board meeting and many comments were received; the Board then referred this proposal back to the PEC for further refinement.

Subsection (c)(1)(f): This subsection is a requested addition, by President Morodomi, to allow the emergence of newer technology. Ms. Rogers explained that subsection (F)

poses the problem of being too big. Specifically, it permits the Board the ability to choose certain means of technology without having to go through the regulatory process. Her recommendation is to strike the language. Committee agrees.

Subsection (f): Dr. Chawla commented that it would be difficult for providers to submit their courses submitted 90 days before the presentation date. She suggested changing the wording to mimic something like "start the application process 90 days in advance and submit all information up to 45 days in advance". Dr. Chawla explained that it is not necessary to have both a detailed outline and PowerPoint. Dr. Wang agrees that it can be either/or and not necessarily both.

Mr. Johnson reported on Subsection (e)(3) replacing "courses" with "activities" which reflects the three-step process for courses COPE has in place. Committee agrees.

Mr. Johnson announced two other sections that the Board identified and requested that the PEC discuss further. Subsection (c)(1) regarding self-study requirements; discussion led to whether a self-study test should be required. This would ensure the individual is paying attention to the self-study course and has absorbed the information. Members agreed that a self-study quiz for all self-study courses needs to continue. Ms. Murphy reported that with regards to which CME course count for optometrists' continuing education (CE), subsection (c)(6) states: *Any continuing education course approved for category 1 of the American Medical Association or category 1A of the American Osteopathic Association Continued Medical Education credits that contributes to the advancement of professional skill and knowledge in the practice of optometry.*

Committee Members and staff discussed whether subsection (c)(1) should include the language: *"Any course which is offered pursuant to this section must include a test component to determine the licensee's understanding and knowledge of the course"*. They discussed various methods of self-study (i.e. reading journals) in which a test is not feasible. Dr. McIntyre noted that including the test component in the language may create a lot of confusion. Members are confused now about how and where to include this requirement and where to not include it. Dr. Wang proposed requiring a quiz for all optometric self-study courses and accepting the CME courses "as-is". Dr. Chawla agreed stating CME courses are under the guidance of the Medical Board and we cannot change what another profession does.

Mr. Johnson stated that the final section the Board wanted this Committee to consider and discuss is subsection (d)(2)- *All remaining hours shall be obtained through live and interactive course study.* Does this subsection need to discern between pre-recorded instruction with chat room enabled Q&A, or live instruction with live Q&A throughout? Ms. Murphy explained that there have been workshop course formats used where the instructor will tape the course, then be available for live chat. Both Southern California College of Optometry (SCCO) and Counselor on Optometric Practitioner Education (COPE) have been looking into this type of presentation during the pandemic. A live presentation would occur and be recorded; then the taped presentation would be rebroadcast later. Then those attendees of the taped presentation would be able to

communicate with the presenters via chat. Dr. Wang feels there is less interaction when you cannot ask a question during the lecture. The Committee needs to decide whether this type of presentation is valid for live CE. Ms. Murphy asked if there are any folks in the meeting today who have had experience with this format.

Kristine Shultz, from COA, reported on her experience with pre-recorded lectures. Her thoughts are that having a recorded lecture as a back-up in case any technical difficulties occur would be fantastic. She also noted that the Q&A does not typically occur until the end of the presentation anyway even when it is live. At some point, she feels the Committee/Board needs to trust the doctors that are participating. She added that the Board does what it can; laws are put into place, and you must allow the doctors to do what they say they are going to do.

Public comment was made by Dr. Cindy Chang. Dr. Chang stated that she agrees with what Ms. Shultz stated. She attended a COPE approved conference that was pre-recorded out of concern that there may be technical difficulties. The person who gave the Q&A at the end was the same speaker who presented the material. The course was COPE approved for live CE.

Subsection (d)(2)(B): Ms. Murphy suggested removing “or if pre-recorded”. She also suggested further connecting the instructor with the instruction period; stating *“the instructor presenting content during the instructional queue”*. Ms. Murphy believes this will address Dr. Wang’s concern about doctors who were not part of the instruction, coming in to answer questions at the end of the course. Ms. Murphy clarified that the language would then read:

“Lectures, webinars, workshops or audio or video conferences delivered via the internet or computer networks which allow participatory interaction between the licensee and the instructor presenting the content during the instructional period. Any course which is offered pursuant to section (d)(2)(B) which is not live shall not qualify under this section.”

Ms. Murphy then addressed the last consideration regarding ensuring that the regulatory language provides the Committee the authority to ask for all the components needed to evaluate the course. She explained that a topic of discussion had been brought up by former board member, Dr. Susy Yu. Dr. Yu wonders how the Committee may better encourage positive educational outcomes. Ms. Murphy noted that, in keeping with Best Practices, the Board’s/Committee’s regulatory language should provide the Committee the authority to ask for every document needed to evaluate courses.

Members and Ms. Murphy discussed methods of obtaining learning objectives from the CE providers. They discussed the need for everything staff requests to be noted in regulation. Dr. Chawla suggested using the verbiage “needs assessment and learning objectives”. Dr. Wang noted that these forms are often completed by support staff and “needs assessment” could potentially be confusing.

Members discussed with the timeframe for submittal should be 45 or 90 days prior to the presentation date. It was decided to leave it at 45 days. Additionally, they discussed and agreed upon holding Committee meetings more often; monthly or close to monthly.

Mr. Johnson provided a recap as follows:

Subsection (c)(1)(F) – *“any other technology the Board determines is adequate”* – The language is too vague - strike this provision.

Subsection (f) – Not change the timeframe from 45 to 90 days; keep the timeframe at 45 days.

Subsection (e)(3) – Change from courses to activities - keep the change.

Subsection (c)(1) – Second sentence: *“any course which is offered pursuant to the section must include a test component to determine a licensee’s understanding and knowledge of the course”* – Keep this provision.

Subsection (d)(2)(B) – Add *“lectures, webinars, workshops or audio-video conferences delivered via internet or computer networks which allow for participatory interaction between the licensee and the instructor”*- Add the words *“presenting the contents during the instructional period. Any course which is offered pursuant to Subsection (d)(2)(B) which is not live or is prerecorded shall not qualify under this section”*- Strike *“or is prerecorded”*.

On the form we are incorporating by reference – Add the requirement that instructors include a description of their learning objectives.

Within section (f) – include in the list of requirements the learning objectives.

There was no public comment.

Madhu Chawla moved to present the draft regulations section 1536 to the Board incorporating the changes discussed and approved by Committee Members today. Debra McIntyre seconded. The Committee voted unanimously (3-0) and the motion carried.

Member	Aye	No	Abstain	Absent	Recusal
Wang	X				
Chawla	X				
McIntyre	X				

Upon conclusion of the discussion on Agenda Item 7, Members and staff revisited Agenda Items 4.M. and 4.0. and staff was able to obtain the breakdowns in continuing education credit.

There was no public comment.

Madhu Chawla moved to approve Agenda Items 4.M. and 4.O. Debra McIntyre seconded. The Committee voted unanimously (3-0) and the motion carried.

Member	Aye	No	Abstain	Absent	Recusal
Wang	X				
Chawla	X				
McIntyre	X				

Dr. McIntyre had to leave the meeting.

- 8. Review, Discussion and Possible Action on Optometry Strategic Plan**
- o **Presentation by SOLID on Strategic Planning**
 - o **Existing 2017-2020 Optometry Strategic Plan Items**
 - o **Potential 2021 Optometry Strategic Plan Items**

Audio of discussion: 01:45:33 / 12:07:54

Drs. Chawla and Wang believe that keeping up with technology, especially as it pertains to CE education, is an important part of the strategic plan and should be discussed in future meetings. Additionally, they agree that many of the strategic plan points were discussed today.

There was no public comment.

- 9. Discussion on Telemedicine**

Audio of discussion: 01:54:49 / 02:07:54

Ms. Murphy explained that the Board lost the staff person responsible for performing research for the workgroup. With the limited staff resources, she requested more pin-pointed direction for staff on the next steps. Dr. Chawla suggested that the Committee reconvene the workgroup with the staff person who will now be performing the research.

Dr. Chawla stated that the workgroup previously focused on the refractive part which is not necessary. What the workgroup needs is 1) when the technology comes forward, ensure that it is reliable and 2) not overlook ocular health. She noted that refractive technology does not consider the ocular health of the individual. 3) consultative piece where technicians are collecting data for the optometrists. Dr. Chawla added that the workgroup may set up criteria for refraction. She suggested that this criteria setup be added to a future agenda item, and she would like Dr. McIntyre to be a part of the conversation. Dr. Wang agreed.

Dr. Wang suggested researching how medical doctors are using telemedicine in their offices. Drs. Chawla and Wang and Ms. Murphy agreed that contacting, and partnering with, the medical board would be a great way for obtaining this information.

There was no public comment.

10. Future Agenda Items

Audio of discussion: 02:06:24 / 02:07:54

There were no suggestions from members. There was no public comment.

11. Adjournment

Meeting adjourned at 3:07 p.m.