## Dear Committee:

I would like to write an addendum for the testimony that I submitted earlier this week. I am an ophthalmologist who opposes HB2541. I believe that context to my written testimony is important to consider.

Optometrists are my friends. Optometrists are my colleagues. My business depends on optometric referrals for solvency. Writing in opposition and verbalizing my concerns could jeopardize all of these relationships. I hope it doesn't, but it could. I have spent thirteen years growing these relationships and my business. My concern for patient safety as it relates to this bill is so great, that it would be irresponsible for me not to submit my testimony.

Another item to consider. My practice administrator invariably asks me, "What problem are we trying to solve?" I think that is important to consider in this situation. Is it really patient access? It is a lack of available resources to care for patients? Is it cost of healthcare? Is it a notch in the belt for the optometric society that they pass this bill? And, if we are able identify a problem we are trying to solve, is this really the solution? Even if access is the problem (which I do not believe it is), is the solution allowing undertrained practitioners the ability to perform these surgeries? No.

Just last week, a colleague received a referral from an optometrist: Reason for referral - to perform a YAG capsulotomy. The problem? The patient had already had a YAG capsulotomy, which is clearly apparent when an adequate exam has been performed. If some optometrists cannot tell if a YAG has been done, how can they be empowered to perform this procedure?

Thank you so much for reviewing our testimony - I can imagine it must be difficult when there are two such opposing views from optometrists and ophthalmologists. Another phrase comes to mind when optometrists assert that they are capable of performing these surgeries, "You don't know what you don't know." And, in this case, ophthalmologists do know what you don't know through eight additional years of training - that optometric training is not sufficient to safely perform these procedures. Please vote No for HB2541.