## February 12th, 2021

Dear Chair Prusak, Vice Chairs Salinas and Hayden, and members of the House Healthcare Committee,

I write this letter in strong opposition to House Bill 2541 as I firmly believe that it would seriously jeopardize the quality of care delivered to Oregonians. As a board-certified ophthalmologist and oculofacial plastic surgeon I have spent well more than a decade in postgraduate medical education to earn the privilege of performing delicate surgical procedures on patients who need them. The wording on HB 2541 seeks to minimize the intricacy of deciding when a surgery is indicated, how to accurately perform it, and the postoperative care that is needed to achieve the desired outcome. The very wording chosen on the bill shows the lack of understanding on the proponents part of how delicate the art of surgery is. I know that throughout my training and in my career I have never heard a surgeon say that a procedure is easy, or without risks. The proponents of this bill display a complete lack of understanding of what it entails to perform an operation - this is understandable as they are not surgeons. Not only are these proponents claiming that these procedures lack risks, they are falsely claiming that they have the necessary training on how to perform them. During surgical training I performed over 4000 operations under the watchful eye of my mentors. Before each of these surgeries we had a discussion regarding the indications for the procedure, the technical aspects of the operation, and the potential side effects. This is in stark contrast with the optometric curriculum which includes no surgical training whatsoever.

As a general aviation pilot I often draw similarities between surgical training and flying. It takes the average student pilot about 10 hours with a flight instructor to solo. In other words, after 10 hours, the average Joe can learn how to fly a plane. An additional 100-200 hours of flight training is spent learning how to deal with unexpected circumstances - mechanical failures, loss of aircraft control, inclement weather, etc. Roughly 500-1000 additional hours are needed before a commercial certificate is attainable. Most airlines will not even look at an applicant with less than 5000 hours of flight time before considering hiring him or her as a crew member. This rigorous training, and countless hours spent preparing for unexpected events has made commercial aviation the safest means of transportation in mankind's history. Would you want a pilot with a few hours under his or her belt flying a commercial jet? I bet not. Why then would we allow someone with little to no training to perform an operation on the delicate structures of the eye? When one watches a skilled surgeon perform an operation, the expertise in every movement makes it looks easy. Pilots make landing a 200,000 lb jet seem as ordinary and mundane as a walk in the park. I assure you it's not.

Perhaps the most concerning aspect of this bill is the request to self-govern which procedures an optometrist should be allowed to perform. Every surgical specialty in OR is regulated, and monitored by the OR Medical Board. The training received by surgeons is regulated by the Accreditation Council for Graduate Medical Education. A minimum standard of knowledge and training is set forth by the American Board of Ophthalmology. Without these institutions, which closely monitor the adequacy and relevance of medical and surgical training, any training program could falsely claim that it's trainees have the required knowledge and skill to perform an operation. How does it make any sense for optometrist, who are not surgeons, to determine if a fellow optometrist has the necessary knowledge and skill needed to perform an operation?

Dear members of the healthcare committee, I respectfully ask you to oppose HB 2541 as it would seriously endanger the health and sight of may Oregonians.

Respectfully, Francisco Castillo, MD