

February 12, 2021

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

As a physician and surgeon practicing in Oregon, I wish to express my professional concerns regarding HB 2541. This bill poses a **serious threat** to the health and vision safety of patients in Oregon. I would **strongly encourage** you to oppose HB2541.

From my perspective as a medical doctor, an issue in the proposed bill (HB2541) is whether the exacting standards currently in place to educate, train and oversee the ongoing practice of ophthalmology are **necessary** for the safety and wellbeing of **ALL** patients including you and your family. As a specialized field of medicine, ophthalmology is concerned with complete and uncompromising care of an individual with special focus not just on the eye and its optimal function but the entire health of an individual. To ensure public welfare, the process in place to train such physician surgeons is rigorous. This care encompasses knowledge and skills attained through exacting medical and surgical training, which begins following a four-year (4) undergraduate degree and consists of a four-year (4) **graduate degree of medicine** from an accredited medical school, a one year (1) **internship** spent in the carefully-supervised medical and/or surgical care of patients. Following successful completion of an internship, medical doctors then embark on the specialized training that will represent the focus of their service to the community. For ophthalmology, that involves an additional minimum of three (3) years in what is traditionally referred to as a **residency**. During this time, the doctor furthers her/his skill as a clinician and a surgeon through specific and exacting training under the guidance of expert medical doctors and surgeons aimed to ensure the highest quality of care attainable for the benefit of each individual patient. At the conclusion of residency, the ophthalmologist has completed specialized training over the course of a minimum of 8 years following their undergraduate degree. Amazingly and fortunately, some ophthalmologists choose to pursue additional training in the form of a **fellowship**, which can vary from 1 to 2 years, and often focuses on the most advanced medical and surgical care available for various diseases (i.e. glaucoma) or specific tissues of the eye (i.e. Retina).

The above-detailed training is in place to ensure the public welfare when it comes to their health and their vision. There is no "simple" surgery. The reason a similar (if not longer) timeline for education and training exists for all forms of surgery (be it orthopedic, cardiac or otherwise) is that the development of both surgical skill AND judgment requires time, excellent training and experience, and no legislative effort can change that fact.

HB 2541 proposes several changes to statute that would increase the risk of harm to patients. To quote my colleague, Dr. Kevin McKinney, "As an exclusionary bill, HB 2541 allows optometrists to perform any surgical procedure not specifically excluded in the bill ... including procedures that have not even been invented yet. Technical skills are essential for safe surgery, but even more important is the judgment needed to decide when to operate, what procedure best suits the patient and how to manage complications when they occur. Formal optometric training and weekend surgical courses simply do not provide the depth of experience and the degree of expert supervision needed to safely perform surgery."

As a patient and a parent, I want my care to be in the hands of those appropriately and properly trained to provide such care. Please vote NO on HB 2541 as this bill poses a serious threat to patient safety for Oregonians. I would be happy to answer any questions you have about this bill.

Respectfully yours,

Alan R. Bengtzen, MD

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