

## A ROSE IS A ROSE

An article in a recent issue of the American Optometric Association (AOA) News<sup>1</sup> informs us of two new definitions (they are reproduced at the end of this article) of the profession that have been approved by the Association's Board of Trustees. These definitions are in addition to the legal definition that was adopted in 1992, which will continue to be used for legislative and related purposes. Consequently, there are now three official statements defining optometry.

The first is a shorter, and the second a more expanded explanation of the scope of practice and education of an optometrist. The shorter version is to be used for things like dictionaries and broadcasting, and the more expanded version will serve as a source for in-depth articles. Essentially, they both are less complicated versions of the legal definition. And indeed, the article states that the reason for crafting the new statements centered on requests from journalists, other associations and AOA members for a "plain language" definition.

It has been long recognized that there has been public confusion about the "3 O's," optometry, ophthalmology and opticianry. The lines between the three have been further blurred by the remarkable expansion of scope of practice by optometry, the increased fitting of contact lenses and dispensing of glasses in ophthalmological offices, and the movement by organized opticianry to gain refractive privileges. Hopefully, these newer definitions are, in the words of Dr. James Hartzell, chair of the AOA Communications Center Executive Committee, ... "easily understandable by the

media professionals and, most importantly, the general public."<sup>1</sup> This is a worthy goal, particularly clearly and concisely informing the public about what optometry is and does. It is related to, but transcends, truth in advertising. Managed care language to the contrary, I believe that the vast majority of the public still does not feel that they are buying "products" when they seek eye and vision care services. Rather, it is something more personal and human.

Now, let's look at a small, albeit vital part of optometry; namely "us guys," the behavioral/functional/developmental/neuro-optometry practitioners. There can be little doubt that these names, which we and those who seek to define "us" use at various times, are a source of public confusion. And what about the two special interest organizations to which the vast majority of "us" belong? Does "Optometric Extension Program Foundation" give the public a clue as to what the organization does and represents; and is the "College of Optometrists in Vision Development" a campus whose faculty and students are concerned only with the development of vision?

However, we know that in these instances there is no intent to lead the public astray. Rather, all the names that have evolved to describe "us" can be best understood as representing the intellectual growth and accompanying clinical expansion of a particular segment of optometry over time. What was missing was a planning process. And so "we" grew in many directions, providing unique services to groups of the public who were underserved, i.e., the "special

populations." Yet, at the same time, these various names have caused confusion not only to the public at large about what "we" do and who "we" are, but also to health insurance carriers, many of our own colleagues in optometry and the other health-care professions. Not long ago a physician, who has referred many of his patients to optometrists, asked me whether one could be solely a behavioral, or a functional, or a developmental optometrist, or if being one automatically included being all the others.

The action of the AOA to more clearly define the overall profession should serve as a wake up call. The new definitions include all areas of optometric practice, yet present us as an unfragmented, unified profession. I propose that "we" are secure enough in what "we" do and represent, and have matured enough so that the need and benefits to more clearly define "us" are evident. Determining a single name and more precisely describing our special interest organizations will not change who

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"we" are or what "we" do, because after all a rose is a rose by any other name. Rather, it can serve as a first step toward better public, intra- and interprofessional communication and understanding. It can further bring "us" closer together. In the present health care economic environment, this is necessary not only for survival, but for continued growth.

### **Reference**

1. Anonymous. 'Consumer friendly' definition of OD approved. *AOA News* 1997 Sept 15:7.

## **\*NEW DEFINITIONS OF "OPTOMETRIST" APPROVED BY THE AOA BOARD OF TRUSTEES**

### **O.D. Short Definition**

Optometrists are state-licensed health-care professionals who diagnose and treat eye health and vision problems. They prescribe glasses, contact lenses, low vision rehabilitation, vision therapy and medications as well as perform certain surgical procedures. They hold the doctor of optometry (O.D.) degree.

### **O.D. Detailed Definition**

The optometrist is a health-care professional trained and state licensed to provide primary eye care services. These services include comprehensive eye health and vision examinations; diagnosis and treatment of eye diseases and vision disorders; the detection of general health problems; the prescribing of glasses, contact lenses, low vision rehabilitation, vision therapy, and medications; the performing of certain surgical procedures; and the counseling of patients regarding their surgical alternatives and vision needs as related to their occupations, avocations and lifestyle. The optometrist has completed pre-professional undergraduate education in a college or university and four years of professional education at a college of optometry, leading to the doctor of optometry (O.D.) degree. Some optometrists complete a residency.