



# Core Criteria Handbook

for CERTIFICATION and RECERTIFICATION

**COA<sup>®</sup> | COT<sup>®</sup> | COMT<sup>®</sup>**

**2019 2nd Edition**



International Joint Commission on  
Allied Health Personnel in Ophthalmology<sup>®</sup>

# CERTIFICATION OFFERS EMPOWERMENT TO REALIZE DREAMS AND IMPROVE LIVES.

## The Value of Certification

Four out of five ophthalmologists agree that certified Allied Ophthalmic Personnel (AOP) render their practice more productive. Studies have shown that certified AOP contribute more than non-certified personnel to the efficiency and quality of care in a practice. Just as in other professions, the value of certification and the importance of employing educated, trained, and qualified professionals should be a best practice in ophthalmology.

IJCAHPO has set the bar of excellence in allied ophthalmic health since 1969 with over 26,000 ophthalmic professionals choosing IJCAHPO certification. By achieving certification, join an exceptional group of certified professionals demonstrating your specialized knowledge and continuing competence. By becoming IJCAHPO certified, you demonstrate your commitment to delivering the best patient care and advancing your career potential.

## This handbook provides information on the following IJCAHPO core credentials:

- Certified Ophthalmic Assistant (COA®)
- Certified Ophthalmic Technician (COT®)
- Certified Ophthalmic Medical Technologist (COMT®)

This information includes eligibility requirements for each credential and outlines the body of information that individuals seeking allied ophthalmic certification are expected to know and demonstrate to earn certification. This handbook provides detailed information which outlines the entire certification process.

IJCAHPO's certification staff welcomes questions regarding the certification or recertification process.

## Contact Information

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## ABOUT IJCAHPO®

(INTERNATIONAL JOINT COMMISSION ON ALLIED HEALTH PERSONNEL IN OPHTHALMOLOGY )

### Mission Statement

The International Joint Commission on Allied Health Personnel in Ophthalmology (IJCAHPO) serves to promote global eye health and prevent blindness through training program accreditation, education, and the certification of Allied Ophthalmic Personnel.

### IJCAHPO History

IJCAHPO has been a major force in improving eye care since its inception in the late 1960s. IJCAHPO was created by six medical professional organizations: the American Medical Association, the Association of University Professors of Ophthalmology, American Academy of Ophthalmology, American Association of Ophthalmology, Contact Lens Association of Ophthalmologists, and the Society of Military Ophthalmologists. In the early 1970s, the Canadian Ophthalmological Society joined IJCAHPO. Today, 22 ophthalmology professional organizations interested in enhancing quality eye care by certification and education of Allied Ophthalmic Personnel (AOP) are members of IJCAHPO, including two international organizations. IJCAHPO is the only national and international certifying agency for the allied ophthalmic health field and a leading provider of AOP continuing education.

The IJCAHPO does not express an opinion regarding the competence of any certificant or applicant. Allied ophthalmic healthcare is a multi-specialty field comprised of Ophthalmic Assistants, Technicians, and Technologists (with subspecialties in surgical, ultrasound biometry, and sonography).

### IJCAHPO Purpose

IJCAHPO's purpose is to determine through examination, if an individual has acquired both theoretical and practical knowledge of allied ophthalmic care. In addition, through the acquisition of continuing education credits or through re-examination, all IJCAHPO certificants are required to stay relevant with the ongoing changes in the field of ophthalmology.

### National Accreditation

The National Commission for Certifying Agencies (NCCA) reviews and grants accreditation to IJCAHPO for the administration of the Certified Ophthalmic Assistant (COA).

The NCCA evaluates certifying agencies on a comprehensive set of criteria, including appraising the appropriate certification requirements, assessing the occupation being certified and weighing both the validity and reliability of the certifying examinations, as well as the extent to which the public interest is protected.

### Purpose of IJCAHPO Certification

IJCAHPO certification demonstrates that the individual meets specific criteria for knowledge of allied ophthalmic care. Certified individuals possess the mastery of a broad range of skills related to ophthalmic patient care.

Because certification is voluntary, the decision to become certified exhibits the individual's pride in their profession, the desire to be recognized for their mastery of the IJCAHPO certification content, and the ongoing commitment to quality patient care. Certification is an avenue for employment advancement, potential higher pay, and recognition.

### Purpose of IJCAHPO Recertification

The purpose of certification renewal is to provide a mechanism to assure the public that IJCAHPO certified allied ophthalmic personnel have met current standards of knowledge and skills required to maintain their respective certification.

- Certification is time-limited, granted for 3-year periods only, and must be renewed.
- IJCAHPO certified allied ophthalmic professionals must maintain professional competency based on current information and knowledge affecting their practice.

- Knowledge and skills required for professional and competent allied ophthalmic professionals evolve over time.
- Recertification requirements serve to measure and reassure the public of continued professional competence in allied ophthalmic personnel.
- Without a process for renewal of certification, a credential's value may diminish over time.

### IJCAHPO Standards of Ethics of the Allied Ophthalmic Profession

The Standards of Ethics of the International Joint Commission on Allied Health Personnel in Ophthalmology (IJCAHPO) shall apply to persons holding certificates from IJCAHPO that are either currently certified or to persons applying for certification by IJCAHPO to become certificants holders (Candidates). Certification is a method of assuring the medical community and the public that an individual is qualified to practice within the profession. Because the public relies on certificates issued by IJCAHPO, it is essential that certificate holders and candidates act consistently with these Standards of Ethics. IJCAHPO does not guarantee the job performance of any credential holder or applicant (*Appendix 3*).

### IJCAHPO Scope of Practice of the Allied Ophthalmic Profession

Allied Ophthalmic Personnel (AOP) are individuals qualified through academic and clinical experience to provide patient care and assistance to ophthalmologists and may hold professional credentials.

AOP responsibilities include assisting in the diagnostic evaluation, management, treatment, education, and care of patients with medical and surgical conditions affecting the visual system. Their scope of practice includes the application of technology and the use of protocols across all health care delivery sites including, but not limited to, the hospital, the clinic, and the physician's office. They enter acquired clinical data and dictated information from the physician into paper or electronic medical records. These activities are supported by education, research, and administration.

Allied Ophthalmic Personnel perform assigned duties. AOP may not diagnose or treat eye disorders and may not prescribe medications; they are not independent practitioners. They can provide diagnostic information and clinical data in the ophthalmic exam to the physician, who is treating patients, and may assist in surgery, patient education, and compliance with prescribed treatment. It is not within the AOP scope of practice to perform any injection technique or similar invasive procedures that involve the placement of needles, trocars, cannulas, or installation devices with and beneath tissue surfaces.

Patient and family education activities are to promote knowledge and understanding of the eye disease process, medical therapy, and self-help. Public education activities focus on the promotion of visual and eye health and wellness (*Appendix 4*).

### IJCAHPO Statement of Non-Discrimination

IJCAHPO does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. IJCAHPO is committed to providing an inclusive and welcoming environment for certificants, non-certificants, members of the staff, clients, volunteers, subcontractors, and vendors.

### IJCAHPO Statement of Special Accommodations

IJCAHPO provides reasonable accommodations in accordance with the Americans with Disabilities Act as amended (ADA) for individuals with documented disabilities who demonstrate a need for accommodations. In accordance with ADA, IJCAHPO does not discriminate against individuals with disabilities in providing access to IJCAHPO's certification examinations.

The purpose of special accommodations is to provide candidates equal access to IJCAHPO's examinations. Accommodations are matched with the identified functional limitation so that the area of impairment is relieved with an auxiliary aid or an adjustment to the testing procedure. Functional limitation refers to the aspect of a disability that interferes with an individual's ability to function; that is what someone cannot do on a regular and continual basis due to their disability.

Documentation is required to validate that the applicant for test accommodations is covered under ADA as a disabled individual. Comprehensive information by a qualified professional is necessary to allow IJCAHPO to understand the nature and extent of the applicant's disability and the resulting functional impairment that limits access to examinations.

ADA Confidentiality: IJCAHPO strictly adheres to a policy of confidentiality and does not disclose names of applicants with disabilities or information concerning the application or accompanying documentation. Examinations administered with special accommodations are not identified to third-party score recipients and are scored no differently than examinations of other certification candidates.



# ELIGIBILITY

## Eligibility Requirements

Individuals interested in IJCAHPO certification must first establish eligibility to test. The following information provides the eligibility pathways for the COA, COT, and COMT. The eligibility pathways should be reviewed prior to submitting an examination application and related fees. IJCAHPO retains the sole authority to establish eligibility requirements and final decisions regarding examination eligibility.

## Core Certifications

IJCAHPO certifications are competency-based and successful completion of the specific examination(s) is required for certification.

To be eligible, candidates must meet one of the following education and work experience categories:

Certified Ophthalmic Assistant (COA)		COA
Level	Required Education	Required Work Experience
COA-A1	International Council of Accreditation (ICA) accredited clinical training program. <sup>1</sup> <ul style="list-style-type: none"> <li>If you completed the program more than 12 months ago, you will need to submit 18 IJCAHPO Group A credits for each year following graduation.</li> </ul>	None necessary.
COA-A2	International Council of Accreditation (ICA) accredited non-clinical training program including distance learning programs. <sup>1</sup> <ul style="list-style-type: none"> <li>If you completed the course more than 12 months ago, you will need to submit 18 IJCAHPO Group A credits for each year following graduation.</li> </ul>	500 hours under the supervision of an ophthalmologist within 12 months prior to submitting application.
COA-A3	Graduated from High School or the equivalent. <i>and</i> Completed an approved independent study course such as the JCAT course or the AAO Ophthalmic Medical Assisting course. <ul style="list-style-type: none"> <li>If you completed the course more than 36 months ago, you will need to repeat the course or submit 18 IJCAHPO Group A credits for each year following the 36-month period.</li> </ul>	1,000 hours under the supervision of an ophthalmologist within 12 months prior to submitting application.

Certified Ophthalmic Technician (COT)		COT
Level	Required Education	Required Work Experience
<b>COT-T1</b>	<p>International Council of Accreditation (ICA) accredited training program at the Technician level.<sup>1</sup></p> <ul style="list-style-type: none"> <li>If you completed the program more than 12 months ago, you will need to submit 12 IJCAHPO Group A credits for each year following graduation.</li> </ul>	None necessary.
<b>COT-T2</b>	<p>Current COA certification &amp; IJCAHPO Group A Credits.</p> <ul style="list-style-type: none"> <li>You will need to submit 12 IJCAHPO Group A credits earned within 12 months prior to submitting your application.</li> <li>Must maintain certification as a COA while pursuing COT certification.</li> </ul>	Employed 2,000 hours as a COA within 24 months prior to submitting application.
<b>COT-T3</b>	<ul style="list-style-type: none"> <li>Previous CO or OC(C) certification &amp; IJCAHPO Group A credits.</li> <li>You will need to submit 12 IJCAHPO Group A credits earned within 12 months prior to submitting your application.</li> <li>Must maintain certification as an Orthoptist while pursuing COT certification.</li> </ul>	Employed 2,000 hours as a CO or OC(C) within 24 months prior to submitting application.
<p><b>COT-T4</b>  <b>Fast Track Option:</b> Allows a current COA the use of 6,000 hours of non-certified work experience prior to becoming certified and IJCAHPO Group A credits.</p>	<ul style="list-style-type: none"> <li>You will need to submit 12 IJCAHPO Group A credits earned within 12 months prior to submitting your application.</li> <li>Must maintain certification as COA while pursuing COT certification.</li> </ul>	<p>Current COA Certification  <i>and</i>          6,000 hours of non-certified work experience with an ophthalmologist prior to becoming IJCAHPO certified. Verification of previous work experience needs to be in the form of a letter from your ophthalmologist on official letterhead.</p>

Certified Ophthalmic Medical Technologist (COMT)		COMT
Level	Required Education	Required Work Experience
<b>COMT-TG1</b>	<p>International Council of Accreditation (ICA) accredited training program at the Technologist level &amp; two or more years of college education.<sup>1</sup></p> <ul style="list-style-type: none"> <li>If you completed the program more than 12 months ago, you will need to submit 12 IJCAHPO Group A credits for each year following graduation. The credits must be earned within 36 months prior to submitting your application.</li> <li>Successful completion of two or more years of college and/or university level courses (90 quarter or 60 semester credits)</li> </ul>	None necessary.
<b>COMT-TG2</b>	<p>International Council of Accreditation (ICA) accredited training program at the Technologist level and less than two years of college education.<sup>1</sup></p> <ul style="list-style-type: none"> <li>If you completed the program more than 12 months ago, you will need to submit 12 IJCAHPO Group A credits for each year following graduation. The credits must be earned within 36 months prior to submitting your application.</li> </ul>	Employed 4,000 hours under the supervision of an ophthalmologist within 24 months prior to submitting application.
<b>COMT-TG3</b>	<p>Previous COT &amp; IJCAHPO Group A credits.</p> <ul style="list-style-type: none"> <li>You will need to submit 12 IJCAHPO Group A credits earned within 12 months prior to submitting your application.</li> <li>Must maintain certification as a COT while pursuing COMT certification.</li> </ul>	Employed 6,000 hours as a COT.
<b>COMT-TG4</b>	<p>Previous CO or OC(C) certification &amp; IJCAHPO Group A credits.</p> <ul style="list-style-type: none"> <li>You will need to submit 12 IJCAHPO Group A credits earned within 12 months prior to submitting your application.</li> <li>Must maintain certification as an Orthoptist while pursuing COMT certification.</li> </ul>	Employed 4,000 hours as a CO or OC(C) within 60 months prior to submitting application.
<p><b>COMT-TG5</b> <b>Fast Track Option:</b> Allows a current COT the use of 6,000 hours of non-certified work experience prior to becoming certified and IJCAHPO Group A credits.</p>	<ul style="list-style-type: none"> <li>You will need to submit 12 IJCAHPO Group A credits earned within 12 months prior to submitting your application.</li> <li>Must maintain certification as COT while pursuing COMT certification.</li> </ul>	<p>Employed 3,000 hours as a COT <i>and</i> 6,000 hours of non-certified work experience with an ophthalmologist prior to becoming IJCAHPO certified. Verification of previous work experience needs to be in the form of a letter from your ophthalmologist on official letterhead.</p>

<sup>1</sup> Certification examination candidates who attend a formal training program may apply for the certification examination up to two months prior to graduation from the program; however, no examination results will be sent by IJCAHPO to the candidate until official notification of graduation is received and verification of work experience is received, if applicable.



## Special Considerations

If you do not meet the IJCAHPO eligibility criteria, but you believe that your education, training, and/or experience are equivalent, you may request special consideration. People who received ophthalmic training outside the United States and Canada may be among those qualifying for special consideration. The special consideration process is designed to serve an applicant whose educational and/or employment background is different from the established eligibility criteria, but may be deemed equivalent.

Contact the IJCAHPO Certification Department for information on the documentation required to support your special consideration request. Each request is examined on an individual basis and the process may take six to eight weeks. Special consideration is not offered to candidates who have the opportunity to qualify under the established criteria but have chosen not to do so.

## Retirement Credential

Certified individuals retiring from the eye care profession, upon approval, may receive the retired credential, e.g., COA (Ret.).

### Eligibility

A certificant may apply for the retirement credential at the most recent level of certification, if they meet the following requirements:

- The certification must be in good standing for the last ten years. This means the certification may not have been in a revoked status in the last ten years.
- The certificant may no longer receive payment for serving in the eye care field and should not plan on using their certification professionally again. Volunteer work is acceptable.

## Application

A certificant must submit an application for the retirement credential. To request an application, contact the IJCAHPO Certification Department. Applications must be submitted within 30 days prior to the certification expiration date. A one-time fee of \$50 is required to accompany the application and the signature of a sponsoring ophthalmologist is not necessary.

## Renewal

No renewal is necessary to maintain the retirement credential.

## Returning to a Practicing Credential

If a certificant wishes to return to a practicing credential instead of the retired credential the individual is required to:

- Submit a complete examination application including a sponsoring ophthalmologist's signature.
- Successfully complete the certification examination(s) at the level at which they are retired, or a lower level. This includes the practical examination for the COT and COMT level of the certification.

## International Council of Accreditation (ICA)

The International Council of Accreditation, formerly known as CoA – OMP, is vested with the responsibility and authority to evaluate ophthalmic training programs that have requested accreditation services. ICA's principal means of program evaluation consists of analyzing Self-Study Reports, sending representative teams to conduct Site Visits of programs, and deliberating at Board meetings.

Contact IJCAHPO's certification department with further questions regarding the eligibility requirements.

## CORE EXAMINATION CONTENT AREA BREAKDOWN

CONTENT AREAS	COA (BASIC)	COT (INTERMEDIATE)	COMT (ADVANCED)
<b>HISTORY AND DOCUMENTATION</b>	Ocular Medical Medication Social Family	Ocular Medical Medication Social Family	Ocular Medical Medication Social Family
<b>VISUAL ASSESSMENT</b>	<p>Test and record visual acuity appropriately for patient with all levels of acuity:</p> <ul style="list-style-type: none"> <li>Counting fingers</li> <li>Hand motion</li> <li>Light perception</li> <li>No light perception</li> </ul> <p>Test and record visual acuity on preliterate, illiterate, non-verbal, or foreign language patients</p> <p>Define low vision</p> <p>Test and record visual acuity using pinhole occlude</p> <p>Test and record stereoacuity</p> <p>Test and record near point of accommodation and convergence</p> <p>Test for visual acuity (distance and near) using optotype (Allen, Tumbling E, numbers, and Snellen)</p> <p>Describe the advantages and disadvantages of different low vision devices</p>	<p>Test and record visual acuity appropriately for patient with all levels of acuity:</p> <ul style="list-style-type: none"> <li>Counting fingers</li> <li>Hand motion</li> <li>Light perception</li> <li>No light perception</li> </ul> <p>Test and record visual acuity on preliterate, illiterate, non-verbal, or foreign language patients</p> <p>Define low vision</p> <p>Test and record visual acuity using pinhole occlude</p> <p>Test and record stereoacuity</p> <p>Test and record near point of accommodation and convergence</p> <p>Test for visual acuity (distance and near) using optotype (Allen, Tumbling E, numbers, and Snellen)</p> <p>Describe the advantages and disadvantages of different low vision devices</p>	<p>Test and record visual acuity appropriately for patient with all levels of acuity:</p> <ul style="list-style-type: none"> <li>Counting fingers</li> <li>Hand motion</li> <li>Light perception</li> <li>No light perception</li> </ul> <p>Test and record visual acuity on preliterate, illiterate, non-verbal, or foreign language patients</p> <p>Define low vision</p> <p>Test and record visual acuity using pinhole occlude</p> <p>Test and record stereoacuity</p> <p>Test and record near point of accommodation and convergence</p> <p>Test for accommodative convergence/accommodation (AC/A) ratio</p> <p>Test for visual acuity (distance and near) using optotype (Allen, Tumbling E, numbers, and Snellen)</p> <p>Calculate approximate magnification needed to read a target acuity level</p> <p>Describe the advantages and disadvantages of different low vision devices</p> <p>Instruct patients in uses of low vision devices (optical and non-optical)</p>
<b>VISUAL FIELD TESTING</b>	<p>Perform Amsler grid testing</p> <p>Perform confrontation fields testing</p> <p>Perform automated perimetry</p> <p>Perform Goldmann perimetry</p>	<p>Perform Amsler grid testing</p> <p>Perform confrontation fields testing</p> <p>Perform automated perimetry</p> <p>Perform Goldmann perimetry</p>	<p>Perform Amsler grid testing</p> <p>Perform confrontation fields testing</p> <p>Perform automated perimetry</p> <p>Perform Goldmann perimetry</p>
<b>PUPIL ASSESSMENT</b>	<p>Measure</p> <p>Compare</p> <p>Evaluate</p> <p>Shape</p> <p>RAPD</p>	<p>Measure</p> <p>Compare</p> <p>Evaluate</p> <p>Shape</p> <p>RAPD</p>	<p>Measure</p> <p>Compare</p> <p>Evaluate</p> <p>Shape</p> <p>RAPD</p>
<b>TONOMETRY</b>	<p>Measure intraocular pressure with hand-held applanator</p> <p>Measure intraocular pressure by applanation tonometry</p> <p>Measure intraocular pressure with non-contact tonometer</p> <p>Clean and disinfect tonometers</p>	<p>Measure intraocular pressure with hand-held applanator</p> <p>Measure intraocular pressure by applanation tonometry</p> <p>Measure intraocular pressure with non-contact tonometer</p> <p>Clean and disinfect tonometers</p>	<p>Measure intraocular pressure with hand-held applanator</p> <p>Measure intraocular pressure by applanation tonometry</p> <p>Measure intraocular pressure with non-contact tonometer</p> <p>Clean and disinfect tonometers</p>

CONTENT AREAS	COA (BASIC)	COT (INTERMEDIATE)	COMT (ADVANCED)
<b>KERATOMETRY</b>	Perform automated keratometry	Perform automated and manual keratometry	Perform automated and manual keratometry
<b>OCULAR MOTILITY TESTING</b>	Versions and Ductions Functions Anomalies Cover tests Stereoaucuity Nystagmus	Versions and Ductions Functions Anomalies Near point convergence Near point accommodation Cover tests Strabismus with prisms Worth 4-Dot test Maddox rod Krimsky Stereoaucuity Nystagmus Amblyopia therapy Convergence training	Versions and Ductions Functions Anomalies Near point convergence Near point accommodation Fusional convergence amplitudes Cover tests Strabismus with prisms Worth 4-Dot test Maddox rod Krimsky Stereoaucuity Nystagmus Amblyopia therapy Convergence training
<b>LENSOMETRY</b>	Neutralize Spectacles <ul style="list-style-type: none"> <li>• Automated</li> <li>• Manual</li> </ul>	Neutralize Spectacles <ul style="list-style-type: none"> <li>• Automated</li> <li>• Manual</li> </ul> Fresnel Ground-in prism Slab-off	Neutralize Spectacles <ul style="list-style-type: none"> <li>• Automated</li> <li>• Manual</li> </ul> Fresnel Ground-in prism Slab-off Geneva lens clock
<b>REFRACTION, RETINOSCOPY AND REFINEMENT</b>	Measure refractive error with an automated refractor Use refraction techniques: fogging, duo chrome, binocular balance Measure vertex distance Perform and record transposition Calculate and record spherical equivalence	Measure refractive error with an automated refractor Use refraction techniques: fogging, duo chrome, binocular balance Perform and record retinoscopy Measure vertex distance Perform and record transposition Calculate and record spherical equivalence Determine near add: <ul style="list-style-type: none"> <li>• Bifocal</li> <li>• Trifocal</li> <li>• Multifocals</li> </ul>	Measure refractive error with an automated refractor Perform and record retinoscopy results Refine refractive error (sphere and cylinder) using phoropter or trial lenses in +/- cylinder Use refraction techniques: fogging, duo chrome, binocular balance Measure vertex distance Perform and record transposition Calculate and record spherical equivalence Determine near add: <ul style="list-style-type: none"> <li>• Bifocal</li> <li>• Trifocal</li> <li>• Multifocals</li> </ul>
<b>BIOMETRY</b>	Diagnostic/standardized A-Scan	Diagnostic/standardized A-Scan and B-Scan	Diagnostic/standardized A-Scan and B-Scan

## CORE EXAMINATION CONTENT AREA BREAKDOWN

CONTENT AREAS	COA (BASIC)	COT (INTERMEDIATE)	COMT (ADVANCED)
<b>SUPPLEMENTAL TESTING</b>	<p>Perform and record glare testing (e.g. BAT)</p> <p>Perform and record Potential Acuity Meter (PAM)</p> <p>Demonstrate use of slit lamp lenses</p> <p>Demonstrate use of pen light</p> <p>Perform and record color vision using color plates</p> <p>Perform pachymetry</p> <p>Assess and record anterior chamber depth with a slit lamp or pen light</p> <p>Perform and record laser tests for glaucoma/retina (OCT)</p> <p>Perform and record tear tests:</p> <ul style="list-style-type: none"> <li>• Schirmer</li> <li>• BUT</li> <li>• Rose Bengal</li> </ul> <p>Order and maintain patient education materials inventory</p>	<p>Perform and record glare testing (e.g. BAT)</p> <p>Perform and record Potential Acuity Meter (PAM)</p> <p>Proper use of slit lamp</p> <p>Demonstrate use of slit lamp lenses</p> <p>Demonstrate use of pen light</p> <p>Perform and record color vision using color plates</p> <p>Perform pachymetry</p> <p>Measure and record fusional amplitudes</p> <p>Perform and record Maddox Rod measurements</p> <p>Perform and record corneal sensitivity testing</p> <p>Identify fluorescein and indocyanine green angiography (ICG) phases and images</p> <p>Identify electrophysiologic tests:</p> <ul style="list-style-type: none"> <li>• ERG</li> <li>• VEP</li> <li>• EOG</li> </ul> <p>Order and maintain patient education materials inventory</p> <p>Assess and record anterior chamber depth with a slit lamp or pen light</p> <p>Perform and record laser tests for glaucoma/retina (OCT)</p> <p>Perform and record tear tests:</p> <ul style="list-style-type: none"> <li>• Schirmer</li> <li>• BUT</li> <li>• Rose Bengal</li> </ul>	<p>Perform and record glare testing (e.g. BAT)</p> <p>Perform and record Potential Acuity Meter (PAM)</p> <p>Proper use of slit lamp</p> <p>Demonstrate use of slit lamp lenses</p> <p>Demonstrate use of direct ophthalmoscopy</p> <p>Demonstrate use of pen light</p> <p>Perform and record color vision using color plates</p> <p>Perform pachymetry</p> <p>Assess and record anterior chamber depth with a slit lamp or pen light</p> <p>Perform and record laser tests for glaucoma/retina (OCT)</p> <p>Perform and record tear tests:</p> <ul style="list-style-type: none"> <li>• Schirmer</li> <li>• BUT</li> <li>• Rose Bengal</li> </ul> <p>Perform and record contrast sensitivity testing</p> <p>Assess and record head and posture abnormalities</p> <p>Perform and record specialized color tests:</p> <ul style="list-style-type: none"> <li>• Farnsworth-Munsell D-15</li> <li>• Farnsworth-Munsell 100-HUE</li> </ul> <p>Perform and record exophthalmometry</p> <p>Perform and record wavefront diagnostics</p> <p>Measure and record fusional amplitudes</p> <p>Perform and record Maddox Rod measurements</p> <p>Perform and record corneal sensitivity testing</p> <p>Identify fluorescein and indocyanine green angiography (ICG) phases and images</p> <p>Identify electrophysiologic tests:</p> <ul style="list-style-type: none"> <li>• ERG</li> <li>• VEP</li> <li>• EOG</li> </ul> <p>Order and maintain patient education materials inventory</p>
<b>MICROBIOLOGY</b>	<p>Describe and follow Universal Precautions and infection control measures to maintain clinical asepsis</p>	<p>Define the types of microorganisms: bacterium, virus, fungus, protozoan</p> <p>Explain pathways of disease transmission</p> <p>Assist in the collection of conjunctival and corneal specimens</p> <p>Describe and follow Universal Precautions and infection control measures to maintain clinical asepsis</p>	<p>Define the types of microorganisms: bacterium, virus, fungus, protozoan</p> <p>Explain pathways of disease transmission</p> <p>Assist in the collection of conjunctival and corneal specimens</p> <p>Describe and follow Universal Precautions and infection control measures to maintain clinical asepsis</p>

CONTENT AREAS	COA (BASIC)	COT (INTERMEDIATE)	COMT (ADVANCED)
<b>PHARMACOLOGY</b>	<p>Describe the advantages and disadvantages of various methods of drug delivery: drops, ointments, sustained-release, injectables, and systemics</p> <p>Describe the components of a medical prescription</p> <p>Describe and demonstrate the correct method of instilling drops and ointments</p> <p>Describe the indications, contraindications, and potential side effects of:</p> <ul style="list-style-type: none"> <li>• Mydriatics and cycloplegics</li> <li>• Provide patient instruction regarding medications</li> </ul>	<p>Describe the advantages and disadvantages of various methods of drug delivery: drops, ointments, sustained-release, injectables, and systemics</p> <p>Describe the components of a medical prescription</p> <p>Describe and demonstrate the correct method of instilling drops and ointments</p> <p>Describe the indications, contraindications, and potential side effects of:</p> <ul style="list-style-type: none"> <li>• Mydriatics and cycloplegics</li> <li>• Glaucoma medications</li> <li>• Anti-infective agents, anti-bacterial, anti-viral, anti-fungal, and anti-parasitic</li> <li>• Allergy medications</li> <li>• Steroids</li> <li>• Non-steroidal, anti-inflammatory drugs</li> <li>• Ocular lubricants</li> <li>• Anesthetics</li> <li>• Diagnostic agents</li> <li>• Nutritional supplements</li> <li>• Anti-neovascular drugs</li> <li>• Provide patient instruction regarding medications</li> </ul>	<p>Describe the advantages and disadvantages of various methods of drug delivery: drops, ointments, sustained-release, injectables, and systemics</p> <p>Describe the components of a medical prescription</p> <p>Describe and demonstrate the correct method of instilling drops and ointments</p> <p>Describe the indications, contraindications, and potential side effects of:</p> <ul style="list-style-type: none"> <li>• Mydriatics and cycloplegics</li> <li>• Glaucoma medications</li> <li>• Anti-infective agents, anti-bacterial, anti-viral, anti-fungal, and anti-parasitic</li> <li>• Allergy medications</li> <li>• Steroids</li> <li>• Non-steroidal, anti-inflammatory drugs</li> <li>• Ocular lubricants</li> <li>• Anesthetics</li> <li>• Diagnostic agents</li> <li>• Nutritional supplements</li> <li>• Anti-neovascular drugs</li> <li>• Provide patient instruction regarding medications</li> </ul>
<b>SURGICAL ASSISTING</b>	<p>Instrument preparation</p> <p>Refractive surgery</p> <p>Aseptic technique</p> <p>Non-refractive laser therapy</p> <p>Intraocular injections</p> <p>Yag laser</p> <p>Sterilization</p> <p>Surgical site identification</p> <p>Maintain surgical instruments and equipment</p> <p>Laser safety</p>	<p>Instrument preparation</p> <p>Refractive surgery</p> <p>Aseptic technique</p> <p>Non-refractive laser therapy</p> <p>Intraocular injections</p> <p>Yag laser</p> <p>Sterilization</p> <p>Surgical site identification</p> <p>Maintain surgical instruments and equipment</p> <p>Laser safety</p>	<p>Instrument preparation</p> <p>Refractive surgery</p> <p>Aseptic technique</p> <p>Non-refractive laser therapy</p> <p>Intraocular injections</p> <p>Yag laser</p> <p>Sterilization</p> <p>Surgical site identification</p> <p>Maintain surgical instruments and equipment</p> <p>Laser safety</p>

CONTENT AREAS	COA (BASIC)	COT (INTERMEDIATE)	COMT (ADVANCED)
<b>OPHTHALMIC PATIENT SERVICES AND EDUCATION</b>	<p>Communicate effectively with:</p> <ul style="list-style-type: none"> <li>• Co-workers</li> <li>• Family of patients</li> <li>• Doctors</li> <li>• Patients</li> <li>• Vendors</li> <li>• Sales representatives</li> </ul> <p>Identify and provide care needs of diverse populations:</p> <ul style="list-style-type: none"> <li>• Cultural</li> <li>• Gender</li> <li>• Age</li> </ul> <p>Demonstrate effective interpersonal relationship skills</p> <p>Recognize and appropriately address patient dissatisfaction</p> <p>Instruct and educate patients on ocular/systemic diseases, medications, tests, procedures, results, and treatments</p> <p>Counsel and provide patient education on ophthalmic conditions, prevention, compliance, and acceptance</p> <p>Explain effects prior to administering eye drops</p> <p>Demonstrate empathy for the patient</p> <p>Demonstrate how to properly greet people</p> <p>Assist patients and accompanying individuals with special needs (e.g. visually and hearing challenged)</p> <p>Provide patient referrals as appropriate</p> <p>Apply and remove eye dressing and shields</p> <p>Provide patient counseling and assistance for medication reimbursement programs</p> <p>Respond to and properly document phone calls</p> <p>Complete legal forms for patient benefits (motor vehicle, government, etc.)</p> <p>Make simple spectacle adjustments and repairs</p> <p>Schedule appointments based on degree of urgency</p> <p>Administer first aid for acute ophthalmic drug reactions and emergencies (e.g. chemical burns)</p> <p>Coordinate patient flow</p> <p>File, locate, and copy patient charts (scan if Electronic Medical Records (EMR))</p> <p>Schedule non-ophthalmic medical diagnostic tests (e.g. magnetic resonance imaging [MRI], computed tomography [CT], blood tests)</p> <p>Vital Signs</p> <ul style="list-style-type: none"> <li>• Measure and record vital signs (e.g. blood pressure, pulse and respiration rate)</li> <li>• Perform cardiopulmonary resuscitation (CPR) procedures</li> </ul>	<p>Communicate effectively with:</p> <ul style="list-style-type: none"> <li>• Co-workers</li> <li>• Family of patients</li> <li>• Doctors</li> <li>• Patients</li> <li>• Vendors</li> <li>• Sales representatives</li> </ul> <p>Identify and provide care needs of diverse populations:</p> <ul style="list-style-type: none"> <li>• Cultural</li> <li>• Gender</li> <li>• Age</li> </ul> <p>Demonstrate effective interpersonal relationship skills</p> <p>Recognize and appropriately address patient dissatisfaction</p> <p>Instruct and educate patients on ocular/systemic diseases, medications, tests, procedures, results, and treatments</p> <p>Counsel and provide patient education on ophthalmic conditions, prevention, compliance, and acceptance</p> <p>Explain effects prior to administering eye drops</p> <p>Demonstrate empathy for the patient</p> <p>Demonstrate how to properly greet people</p> <p>Assist patients and accompanying individuals with 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CONTENT AREAS	COA (BASIC)	COT (INTERMEDIATE)	COMT (ADVANCED)
<b>GENERAL MEDICAL KNOWLEDGE</b>	<p>General Ocular Anatomy, Physiology</p> <p>Describe basic functions and processes of each body system:</p> <ul style="list-style-type: none"> <li>• Respiratory</li> <li>• Cardiovascular</li> <li>• Endocrine</li> <li>• Nervous</li> </ul> <p>Describe the structure and function of the following:</p> <ul style="list-style-type: none"> <li>• Orbit</li> <li>• Extraocular muscles</li> <li>• Lids</li> <li>• Lacrimal system and tears</li> <li>• Conjunctiva</li> <li>• Cornea and sclera</li> <li>• Anterior chamber and angle</li> <li>• Aqueous humor</li> <li>• Lens</li> <li>• Uvea</li> <li>• Retina and vitreous</li> <li>• Optic nerve</li> <li>• Circulation of ocular blood supply</li> <li>• Visual pathway</li> <li>• Cranial nerves III, IV, V, VI, and VII</li> <li>• Describe the pathology of color vision</li> </ul> <p>Eye Diseases</p> <p>Differentiate between inflammation and infection</p> <p>Describe frequently encountered eye conditions involving:</p> <ul style="list-style-type: none"> <li>• Lids</li> <li>• Conjunctiva</li> <li>• Cornea</li> <li>• Lens</li> <li>• Uvea</li> <li>• Vitreous</li> <li>• Retina</li> <li>• Orbit</li> <li>• Trauma</li> <li>• Extra ocular muscles</li> <li>• Optic nerve</li> <li>• Cranial nerves III, IV, V, VI, and VII</li> <li>• Visual pathway</li> </ul> <p>Describe the ocular manifestations of the following systemic diseases:</p> <ul style="list-style-type: none"> <li>• Nutritional deficiencies</li> <li>• Diabetes mellitus</li> <li>• Thyroid disease</li> <li>• Autoimmune/inflammatory disease</li> <li>• Infectious disease (e.g. HIV/AIDS, tuberculosis)</li> <li>• Cardiovascular disease</li> <li>• Neurologic disorders</li> <li>• Cancer (primary and metastatic)</li> </ul> <p>Medical Terminology</p> <ul style="list-style-type: none"> <li>• Spell, define, and use medical terms correctly</li> <li>• Identify, acceptable abbreviations (specifically related to clinical practice)</li> <li>• Utilize a medical dictionary</li> </ul> <p>Safety</p> <ul style="list-style-type: none"> <li>• Define hazardous and bio-hazardous waste</li> <li>• Define acceptable methods for waste disposal</li> </ul>	<p>General Ocular Anatomy, Physiology</p> <p>Describe basic functions and processes of each body system:</p> <ul style="list-style-type: none"> <li>• Respiratory</li> <li>• Cardiovascular</li> <li>• Endocrine</li> <li>• Nervous</li> </ul> <p>Describe the structure and function of the following:</p> <ul style="list-style-type: none"> <li>• Orbit</li> <li>• Extraocular muscles</li> <li>• Lids</li> <li>• Lacrimal system and tears</li> <li>• Conjunctiva</li> <li>• Cornea and sclera</li> <li>• Anterior chamber and angle</li> <li>• Aqueous humor</li> <li>• Lens</li> <li>• Uvea</li> <li>• Retina and vitreous</li> <li>• Optic nerve</li> <li>• Circulation of ocular blood supply</li> <li>• Visual pathway</li> <li>• Cranial nerves III, IV, V, VI, and VII</li> <li>• Describe the pathology of color vision</li> </ul> <p>Eye Diseases</p> <p>Differentiate between inflammation and infection</p> <p>Describe frequently encountered eye conditions involving:</p> <ul style="list-style-type: none"> <li>• Lids</li> <li>• Conjunctiva</li> <li>• Cornea</li> <li>• Lens</li> <li>• Uvea</li> <li>• Vitreous</li> <li>• Retina</li> <li>• Orbit</li> <li>• Trauma</li> <li>• Extra ocular muscles</li> <li>• Optic nerve</li> <li>• Cranial nerves III, IV, V, VI, and VII</li> <li>• Visual pathway</li> </ul> <p>Describe the ocular manifestations of the following systemic diseases:</p> <ul style="list-style-type: none"> <li>• Nutritional deficiencies</li> <li>• Diabetes mellitus</li> <li>• Thyroid disease</li> <li>• Autoimmune/inflammatory disease</li> <li>• Infectious disease (e.g. HIV/AIDS, tuberculosis)</li> <li>• Cardiovascular disease</li> <li>• Neurologic disorders</li> <li>• Cancer (primary and metastatic)</li> </ul> <p>Medical Terminology</p> <ul style="list-style-type: none"> <li>• Spell, define, and use medical terms correctly</li> <li>• Identify, acceptable abbreviations (specifically related to clinical practice)</li> <li>• Utilize a medical dictionary</li> </ul> <p>Safety</p> <ul style="list-style-type: none"> <li>• Define hazardous and bio-hazardous waste</li> <li>• Define acceptable methods for waste disposal</li> </ul>	<p>General Ocular Anatomy, Physiology</p> <p>Describe basic functions and processes of each body system:</p> <ul style="list-style-type: none"> <li>• Respiratory</li> <li>• Cardiovascular</li> <li>• Endocrine</li> <li>• Nervous</li> </ul> <p>Describe the structure and function of the following:</p> <ul style="list-style-type: none"> <li>• Orbit</li> <li>• Extraocular muscles</li> <li>• Lids</li> <li>• Lacrimal system and tears</li> <li>• Conjunctiva</li> <li>• Cornea and sclera</li> <li>• Anterior chamber and angle</li> <li>• Aqueous humor</li> <li>• Lens</li> <li>• Uvea</li> <li>• Retina and vitreous</li> <li>• Optic nerve</li> <li>• Circulation of ocular blood supply</li> <li>• Visual pathway</li> <li>• Cranial nerves III, IV, V, VI, and VII</li> <li>• Describe the pathology of color vision</li> </ul> <p>Eye Diseases</p> <p>Differentiate between inflammation and infection</p> <p>Describe frequently encountered eye conditions involving:</p> <ul style="list-style-type: none"> <li>• Lids</li> <li>• Conjunctiva</li> <li>• Cornea</li> <li>• Lens</li> <li>• Uvea</li> <li>• Vitreous</li> <li>• Retina</li> <li>• Orbit</li> <li>• Trauma</li> <li>• Extra ocular muscles</li> <li>• Optic nerve</li> <li>• Cranial nerves III, IV, V, VI, and VII</li> <li>• Visual pathway</li> </ul> <p>Describe the ocular manifestations of the following systemic diseases:</p> <ul style="list-style-type: none"> <li>• Nutritional deficiencies</li> <li>• Diabetes mellitus</li> <li>• Thyroid disease</li> <li>• Autoimmune/inflammatory disease</li> <li>• Infectious disease (e.g. HIV/AIDS, tuberculosis)</li> <li>• Cardiovascular disease</li> <li>• Neurologic disorders</li> <li>• Cancer (primary and metastatic)</li> </ul> <p>Medical Terminology</p> <ul style="list-style-type: none"> <li>• Spell, define, and use medical terms correctly</li> <li>• Identify, acceptable abbreviations (specifically related to clinical practice)</li> <li>• Utilize a medical dictionary</li> </ul> <p>Safety</p> <ul style="list-style-type: none"> <li>• Define hazardous and bio-hazardous waste</li> <li>• Define acceptable methods for waste disposal</li> </ul>

### 3. CORE EXAMINATION CONTENT AREA BREAKDOWN

CONTENT AREAS	COA (BASIC)	COT (INTERMEDIATE)	COMT (ADVANCED)
<b>OPTICS AND SPECTACLES</b>	Transpose cylinder readings	Transpose cylinder readings Prescriptions Vertex distance <ul style="list-style-type: none"> <li>• Measure</li> <li>• Conversion</li> </ul>	Transpose cylinder readings Prescriptions Vertex distance <ul style="list-style-type: none"> <li>• Measure</li> <li>• Conversion</li> </ul> Geneva lens clock Progressive lens markings
<b>CONTACT LENSES</b>	Contact lens types Contact lens care systems Need for follow-up appointments	Contact lens types Wearing schedules Contact lens care systems Need for follow-up appointments Contraindications, symptoms, and fitting Perform contact lens fitting: <ul style="list-style-type: none"> <li>• Soft rigid</li> <li>• Toric</li> <li>• Bifocal</li> </ul>	Contact lens types Wearing schedules Contact lens care systems Need for follow-up appointments Contraindications, symptoms, and fitting Perform contact lens fitting: <ul style="list-style-type: none"> <li>• Soft rigid</li> <li>• Toric</li> <li>• Bifocal</li> </ul> Specialty lenses for: <ul style="list-style-type: none"> <li>• Irregular cornea</li> <li>• Post-transplant</li> <li>• Keratoconus</li> <li>• Cosmetic/prosthetics</li> <li>• Bandages</li> </ul>
<b>OPHTHALMIC IMAGING</b>	Corneal topography Scanning laser test for glaucoma/retina <ul style="list-style-type: none"> <li>• HRT</li> <li>• OCT</li> </ul>	Fluorescein angiography Corneal topography Scanning laser test for glaucoma/retina <ul style="list-style-type: none"> <li>• HRT</li> <li>• OCT</li> </ul>	Fluorescein angiography Corneal topography Scanning laser test for glaucoma/retina <ul style="list-style-type: none"> <li>• HRT</li> <li>• OCT</li> </ul>
<b>PHOTOGRAPHY AND VIDEOGRAPHY</b>	Slit lamp/anterior segment photography Fundus photography External photography	Slit lamp/anterior segment photography Fundus photography External photography	Slit lamp/anterior segment photography Fundus photography External photography
<b>EQUIPMENT MAINTENANCE AND REPAIR</b>	Change batteries in ophthalmic instruments Maintain and calibrate ophthalmic equipment per manufacturer's recommendations Maintain emergency equipment Clean lenses and prisms Order and maintain medical supplies and inventories Maintain clinical equipment and supplies	Change batteries in ophthalmic instruments Maintain and calibrate ophthalmic equipment per manufacturer's recommendations Maintain emergency equipment Clean lenses and prisms Order and maintain medical supplies and inventories Maintain clinical equipment and supplies	Change batteries in ophthalmic instruments Maintain and calibrate ophthalmic equipment per manufacturer's recommendations Maintain emergency equipment Clean lenses and prisms Order and maintain medical supplies and inventories Maintain clinical equipment and supplies
<b>MEDICAL ETHICS, LEGAL AND REGULATORY ISSUES</b>	Coding Government/institutional rules and regulations Quality assurance Ethical and legal standards Scribing Confidentiality Informed consent	Coding Government/institutional rules and regulations Quality assurance Ethical and legal standards Scribing Confidentiality Informed consent	Coding Government/institutional rules and regulations Quality assurance Ethical and legal standards Scribing Confidentiality Informed consent



## EXAMINATION CONTENT AREA PERCENTAGES

Core Certification Content Areas			
Content Areas	Certified Ophthalmic Assistant (COA) & Corporate Certified Ophthalmic Assistant (CCOA)	Certified Ophthalmic Technician (COT)	Certified Ophthalmic Medical Technologist (COMT)
Number of Examination Questions	200	200	190
Examination Length *	180 minutes	180 minutes	180 minutes
Examination Content Areas			
Patient Evaluation			
History and Documentation	5%	3%	3%
Visual Assessment	6%	7%	3%
Visual Field Testing	4%	3%	6%
Pupil Assessment	3%	4%	3%
Tonometry	4%	4%	2%
Keratometry	2%	3%	2%
Ocular Motility Testing	4%	6%	12%
Lensometry	3%	3%	4%
Refraction, Retinoscopy & Refinement	5%	5%	6%
Biometry	3%	5%	3%
Supplemental Testing	3%	2%	6%

## 4. EXAMINATION CONTENT AREA PERCENTAGES

Core Certification Content Areas			
<b>Assisting with Interventions and Procedures</b>			
Microbiology	3%	3%	2%
Pharmacology	3%	3%	4%
Surgical Assisting	4%	6%	4%
Ophthalmic Patient Services and Education	14%	12%	8%
General Medical Knowledge	14%	5%	4%
<b>Corrective Lenses</b>			
Optics and Spectacles	2%	5%	2%
Contact Lenses	2%	5%	7%
<b>Imaging</b>			
Ophthalmic Imaging	5%	7%	9%
Photography and Videography	5%	6%	8%
<b>Office and Clinical Skills</b>			
Equipment Maintenance and Repair	2%	1%	1%
Medical Ethics, Legal and Regulatory Issues	4%	2%	1%

### COT Skill Evaluation Content Areas

Candidates completing the computer-simulated COT Skill Evaluation will be asked to demonstrate their skill in each of the following seven areas:

- Lensometry – Demonstrate the ability to perform non-automated lensometry to determine the strength of the distance correction and the bifocal or trifocal add. The task may be performed in plus (+) or minus (-) cylinder.
- Visual Fields – Demonstrate the ability to perform an automated visual field on a specified automated visual field test as determined by IJCAHPO.
- Ocular Motility – Demonstrate the ability to detect a phoria or tropia, and identify the direction of the deviation using appropriate cover tests.
- Keratometry – Demonstrate the ability to perform keratometry.
- Retinoscopy – Demonstrate the ability to perform retinoscopy. The task may be performed in plus(+) or minus (-) cylinder.
- Refinement – Demonstrate the ability to perform refinement. The task may be performed in plus(+) or minus (-) cylinder.
- Tonometry – Demonstrate the ability to perform applanation tonometry.

COT candidates must successfully complete the examination within 24 months of making application for the multiple-choice examination and may complete the examination up to six times.

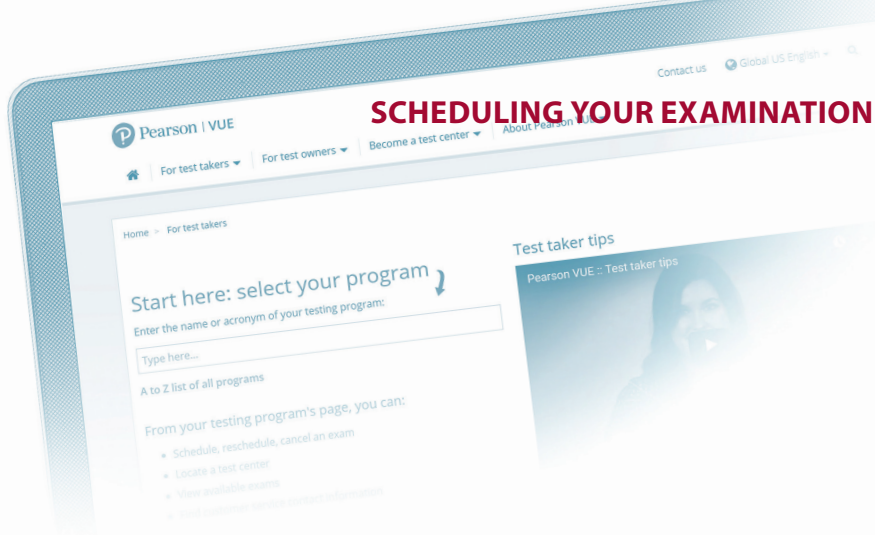
### COMT Performance Test Content Areas

Candidates completing the computer-simulated COMT Performance Test will be asked to demonstrate their skill in the following five areas:

- Measure patient’s ocular motility using prism and cover tests at a distance.
- Perform manual lensometry: Identify and measure prism.
- Perform fundus photography and identify fluorescein angiography phases.
- Measure, compare, and evaluate pupil function at a distance.
- Evaluate versions and ductions, identifying any abnormalities.

COMT candidates must successfully complete the examination within 36 months of making application for the multiple-choice examination and may complete the examination up to four times.

**\*Examination Length** – All IJCAHPO examinations include: A Verification of Examination, Audio Visual Recording Acceptance, and Non-Disclosure Agreement, which are included in the overall examination time period.



## SCHEDULING YOUR EXAMINATION

### Appointments

Candidates may schedule their examination at a Pearson VUE test center upon receipt of the confirmation notice. Candidates may use the toll-free number (888) 231-1929 or go online to [www.pearsonvue.com/jcahpo](http://www.pearsonvue.com/jcahpo). A current list of test sites may also be viewed at [www.pearsonvue.com/jcahpo](http://www.pearsonvue.com/jcahpo) by selecting "Find a Test Site."

IJCAHPO does not control test site availability or examination scheduling. To avoid scheduling complications, schedule examination times promptly after receiving the confirmation notice.

### Failure to Schedule

Candidates who fail to schedule an appointment within the 90-day eligibility period indicated on the confirmation notice will forfeit their application fee and a new application and fee will be required to reapply for the examination.

### Candidate Examination Site Requirements and Instructions

#### Identification

Admission to the test center requires two forms of approved identification. The first and last name that the candidate uses to register must match exactly the first and last name on both of the IDs that are presented on the day of their examination. All IDs required must be issued by the country in which the candidate is testing. If the candidate does not have a qualifying primary ID issued from the country they are testing in, an International Travel Passport from their country of citizenship is required, along with a secondary ID.

The candidate is required to present two forms of original (no photo copies or digital IDs), valid (unexpired) IDs; one form as a primary ID (government issued with name, recent recognizable photo, and signature) and one form as a secondary ID (with at

least a name and signature, or name and recent recognizable photo). All expired forms of ID are unacceptable; unless accompanied by valid renewal papers. The following is NOT an acceptable form of identification: library cards.

1. After identification has been confirmed, the candidate will be escorted into the testing room and assigned a testing station. Candidates may not bring any personal items with them into the testing room. A virtual tour showing candidates what to expect upon arrival at the Pearson VUE test center can be viewed at <http://www.pearsonvue.com/ppc/>.
2. The test center proctor will provide candidates with a white board for use during testing. The white board must be returned to the test proctor upon completion of the examination.
3. Candidates have two minutes to respond to the non-disclosure agreement.
4. If the candidate has any computer-related questions or concerns during the examination, test center proctors are available for assistance. Proctors will not answer specific test questions.
5. Test center proctors will not answer questions related to the examination content areas, specific items, or tasks within the simulated practical examinations.
6. One question at a time will appear on the computer screen during the multiple-choice examination. Candidates will have the option to answer the question or mark the question for review.
7. At the end of the multiple-choice examination, candidates may return to the examination items that were marked for review provided there is time remaining.
8. Candidates must finish the examination within the time allowed. An onscreen timer will display in the upper right corner of the examination and an onscreen warning will

## 5. SCHEDULING YOUR EXAMINATION

appear when there is five minutes remaining for each task of the simulated practical examinations.

9. After completing the examination, candidates will be asked to complete a short online survey about their testing experience. Comments are routinely reviewed in an effort to continuously improve the examination process.

### Appointment Changes, Cancellations, or Eligibility Extensions

- Requests to cancel an application (prior to scheduling an appointment with Pearson VUE) must be received in writing before the end of the 90-day eligibility period and a processing fee is retained.
- To cancel a scheduled examination appointment without a fee, candidates are required to contact Pearson VUE at least 30 days prior to the scheduled appointment. If cancellation is 5 – 29 business days before the appointment, Pearson VUE will collect a \$25 fee.
- If cancellation is within the allowed time period, candidates may either reschedule with Pearson VUE or request a refund in writing from IJCAHPO. All requests for refunds must be received within the 90-day eligibility period and a processing fee is retained. No refunds will be issued for cancellations that do not conform to this policy.
- Failure to appear for the examination or arrival more than 15 minutes late for a scheduled appointment will result in the inability to test and payment of a no-show fee prior to rescheduling.
- Candidates who are unable to take the examination within the eligibility period indicated on the confirmation notice may apply for a one-time 30-day eligibility extension by submitting a written request to IJCAHPO and extension fee prior to the end of the 90-day eligibility period.
- Candidates who are unable to take the examination and cannot cancel or reschedule within the required time period due to a personal emergency, may request consideration to reschedule the examination without paying an additional fee by contacting IJCAHPO in writing within 15 business days of the scheduled test date. A description of the emergency must be included in the written request, and supporting documentation (e.g. doctor's note) must be included. Rescheduling without an additional fee is considered on a case-by-case basis.

### Termination of Examination Administration/ Grounds for Dismissal

Candidates are expected to conduct themselves in a professional manner at all times at the test center. Any person who violates the Examination Confidentiality Policy will be subject to review and possible disciplinary action(s).

The test center proctor is authorized to dismiss candidates from an examination administration and the candidate's results may be canceled, or other appropriate action will be taken, when there is a reasonable basis for concluding that the candidate has engaged in any of the following conduct:

1. Using or attempting to use someone else to take the examination
2. Failing to provide acceptable personal identification.
3. Having access to or using notes or any prohibited aid related to the examination
4. Creating a disturbance (disruptive behavior in any form will not be tolerated; the test center proctor has sole discretion in determining whether specific conduct constitutes disruptive behavior)
5. Communicating, in any manner, with another person other than the test center proctor about the examination during the administration, including attempting to give or receive assistance.
6. Attempting to remove any items from the testing room
7. Eating or drinking in the testing room
8. Leaving the testing room or test center vicinity without permission
9. Removing or attempting to remove, examination-related material, or portions of a test in any format from the testing room
10. Attempting to tamper with a computer
11. Engaging in any dishonest or unethical conduct
12. Failing to follow any examination administration regulations set forth in this criteria book, instructions given by the test center proctor, or specified in any examination materials

**\*Examination Length** – All IJCAHPO examinations include: A Verification of Examination, Audio Visual Recording Acceptance, and Non-Disclosure Agreement, which are included in the overall examination time period.



# RESULTS, CREDENTIALS, APPEALS AND CONFIDENTIALITY

## Official Examination Results

Upon completion of the examination a Performance Report will be provided at Pearson VUE to the candidate indicating whether they passed or failed their assigned examination. This report outlines feedback for each assessment area. These results (pass/fail) are considered unofficial and the candidate will not see their actual score. The Performance Report indicates areas where the candidate may need further study.

Official examination results will be sent via mail by IJCAHPO two to four weeks after the completion of the candidate's examination. Official results are sent by mail only.

## Validation of Results

IJCAHPO is responsible for the validity and integrity of examination results reported. On rare occasions, occurrences such as a computer malfunction or misconduct by a candidate may cause an examination result to be suspect. IJCAHPO reserves the right to invalidate and/or withhold examination results if, upon investigation, violations of IJCAHPO's regulations are discovered. Candidates are expected to fully cooperate with any investigation.

## Certification Upon Passing All Required Exams

A paper certificate and wallet card will be issued to all credential holders who have passed the required examinations and shall include:

- Credential holder's name
- Credential holder's ID number
- Credentials title
- IJCAHPO as the certificate issuer
- Signature of IJCAHPO authorizing agent
- Certificate term of validity
- JCAHPO Seal
- Initial date of IJCAHPO certification

## Use of Credentials

Candidates who have been approved and passed IJCAHPO's certification examinations may use the appropriate credentials for their certification level and maintain their certification based on IJCAHPO's recertification criteria.

## Refund Requests for Higher Credentials

Candidates that achieve a higher-level certification (e.g., a COA that obtained a COT or COT that obtained a COMT certification), may request a pro-rated refund of their current recertification fee. Submit the refund request in writing to IJCAHPO's Certification Department within 60 days of achieving the new credential.

## Retaking IJCAHPO Certification Examinations

Candidates who did not pass their assigned certification examination the first time will be sent a retest application with their official examination results. For a limited time period, candidates can retake the examination at a lower price. Candidates have 12 months from their initial test date to submit two multiple-choice retest applications. If the candidate does not pass the second retest application, a waiting period of 12 months from the initial test date is required, after which the candidate will need to submit a new application with all required supporting documentation and fees.

## Appeal Procedures

Candidates may appeal determinations related to ineligibility or examination results. The appeal must be in writing and received within 30 days of being notified of examination results or ineligibility. The appeal should be addressed to the Secretary of Certification and include: a detailed written explanation of the grounds for the appeal, any evidence or documentation to support the reason a decision should be overturned, and the appeal fee. The burden of proof is the responsibility of the candidate.

### Confidentiality and Use of Certificant Information

IJCAHPO has established a number of policies and procedures to ensure the integrity of its examination procedures and protect candidate privacy.

- IJCAHPO reserves the right to use, for any purpose, all examination data in aggregate reports related to examination performance. Release of such data will NOT include names or personal, identifiable information.
- Performance feedback reports providing data on examination performance will be released only to the candidate.
- All examination content and materials are strictly confidential and will not be released to anyone except those involved in the development and administration of the examination.
- The name of individuals who are newly certified, who have advanced to a higher level of certification, or whose certifications may have expired, may be published by IJCAHPO or provided to the public without authorization.
- IJCAHPO may provide verification of certification status without authorization.

### American Council on Education – College Credit Recommendation Service (ACE Credit®)

The ACE Credit recommendation service is applicable for certifications between January 1997-January 2008 and December 2014-present. The College Credit Recommendation Service (ACE Credit®) evaluated and recommended college credit as follows:

- COA – 12 semester hours in the lower-division baccalaureate/associate degree category
- COT – 18 semester hours in the lower-division baccalaureate/associate degree category
- COMT – 12 semester hours in the upper-division baccalaureate degree category

### Your questions regarding ACE college credit answered...

1. What were the dates of the first ACE college credits being accepted? Can someone still use those dates to claim college credit?

*The American Council on Education previously approved college credit recommendation for certifications received from 1/1/1997 through 1/31/2008. If you received your COA, COT, or COMT certification during that time period, you may submit a request for transcript to the American Council on Education.*

2. If someone is currently certified, but not within the dates being accepted, can they retest, pass the exam, and claim the college credits?

*Yes, you may submit an application to retest in lieu of credits for recertification. The date you pass the exam may be used for submission to the American Council on Education.*

3. Would this apply to anyone who recertifies or only to NEW certificants?

*This applies to new certification dates only, not the date of recertification. However, you may take the examination in lieu of credits for recertification and then the date you pass the examination may be used for submission to the American Council on Education.*

4. What are the necessary steps to obtain these credits?

*You may order a transcript from the American Council on Education. You may do this by going to <https://www2.acenet.edu/credit/?fuseaction=transcripts.main>.*

5. Where can people go to learn what colleges accept the credit and how to do it?

*The ACE Credit College and University Network may be viewed at: <http://www2.acenet.edu/CREDITCollegeNetwork/>. You would need to contact the college or university for more information about how to submit the transcript received from ACE.*



# RECERTIFICATION

Recertification through continued study demonstrates that designees are using the knowledge and skills represented by the certification. By using the designation, you are promoting your high level of experience and knowledge. Without a program in place to keep up with the dynamic changes in the field of Ophthalmology, the power and prestige of the designation would be diminished.

Candidates who earn IJCAHPO certification may continue to use the credential as long as they comply with recertification requirements and must abide by IJCAHPO’s policy concerning the use of the designation for various purposes including logos and trademarks.

IJCAHPO certifications are valid for 36 months. To maintain a credential, the IJCAHPO Certification Committee and the Board of Directors established the recertification process: a process that requires you to keep current with new developments in the field of ophthalmology through continuing education credits or re-examination.

A reminder email is sent approximately six months prior to a certificant’s recertification date. When recertifying with continuing education credits, an applicant needs to submit the following postmarked by their certification date:

- Recertification Application – printable at [www.jcahpo.org](http://www.jcahpo.org) under Certification/Recertification
- The recertification fee (*Appendix 2*)
- The required total of continuing education credits as indicated in the following table

Number of Credits Required Per Each 36-Month Cycle			
Credential	Total Number of Credits Required	Minimum Number of Group A Credits Required	Maximum Number of Group B Credits Permitted
COA	18	12	6
COT	27	18	9
COMT	36	18	18

### Earning Group A credits:

- Attending lectures, workshops, or distance-learning courses, such as online courses, that have been awarded IJCAHPO Group A credit. Courses can be found at [www.jcahpo.org](http://www.jcahpo.org) and selecting “Education.”
- Teaching courses awarded IJCAHPO Group A credit (1:1 basis). Only one credit per course topic will be awarded per recertification cycle.

### Earning Group B credits:

- Attending Grand Rounds or Physician’s Continuing Medical Education (CME) in ophthalmology, Category 1 courses approved by the AMA and CMA that meet IJCAHPO’s Group A content areas (2 hours attended = 1 credit for COAs and COTs; 1 hour attended = 1 credit for COMTs).
- Authoring or coauthoring a scientific publication and/or poster. IJCAHPO reviews submissions for consideration of credit: Maximum of 5 credits for first author and 3 credits for coauthor. Contact the IJCAHPO Education Department for more details.

## RECERTIFICATION

- CPR certification. You may count 1 Group B credit per course for CPR certification for a maximum of 3 Group B credits per CE cycle.

### Non-Certified Status

Individuals who do not apply for recertification or miss the recertification deadline, will be placed on non-certified status. Individuals who are placed on non-certified status are not permitted to present themselves as IJCAHPO certificants; and they may not utilize the credential after their name on business cards, stationery, name badges, etc. From the time the individual is placed on non-certified status, they will have 12 months to apply for recertification before their credential becomes revoked. Within that 12 month period, the number of continuing education credits required to recertify does not increase, but a late fee will be assessed. Individuals will not receive a new recertification date if they recertify within the 12 month non-certified period.

For example, if the individual is due to recertify in December 2019, but does not recertify until December 2020, the recertification cycle will remain December 2019 – December 2022. If the non-certified status continues for longer than 12 months, certification will be considered revoked. Individuals in revoked status are required to contact the IJCAHPO Certification Department for reinstatement options.

### Revocation of Certification

IJCAHPO certification may be revoked for disciplinary reasons. Conduct which may initiate disciplinary action may include, but is not limited to, supplying false information on the certification application or supporting documentation, engaging in inappropriate or dishonest conduct during the examination, or otherwise failing to comply with the *IJCAHPO Standards, Procedures, and Sanctions Pertaining to Certification and Recertification*.

### Recertification Application Audits

Certificants applying for recertification for the first time or recertifying late, are required to include copies of the evidence of credits earned with the recertification application. IJCAHPO also conducts random audits of recertification applications, requesting proof of attendance and credits earned for all CE courses listed on the application. It is advised to retain all documentation to verify credits in the event of an audit.

### Recertification Alternative to Earning CE Credits

Individuals may retest at their most recent level of certification in lieu of earning continuing education credits. The certification must not be in a revoked status. COT and COMT certificants are only required to complete the multiple-choice examination to retest to recertify. Certificants that choose to retest in lieu of

earning continuing education credits for recertification should submit the following:

- Application for Examination – printable on the “Get Certified” page at [www.jcahpo.org](http://www.jcahpo.org) under Certification/Recertification
- Examination Fee (*Appendix 2*)

### Denial of Recertification

If, during the process of applying for recertification, allegations of a violation of the IJCAHPO Standards, Procedures, and Sanctions Pertaining to Certification and Recertification are investigated and proven true, this may result in the denial of recertification, either on a temporary or permanent basis, depending on the circumstances. Certificants are expected to fully cooperate with the investigation.

### Recertification Appeal Procedures

Any candidate may appeal determinations related to denial of recertification. The appeal must be in writing and received within 30 days of being notified of denial. The appeal should be addressed to the Secretary of Certification and include: a detailed written explanation of the grounds for the appeal, any evidence or documentation to support the reason a decision should be overturned, and the appeal fee. The burden of proof is the responsibility of the applicant.

IJCAHPO’s Secretary of Certification will submit the appeal to the members of the Appeal Committee for review, and a written notification of the Committee’s decision will be mailed within 6 weeks of the initial appeal communication. If the initial appeal is denied, a second appeal may be sent to the IJCAHPO Certification Committee within 30 days of notice of the first appeal decision. The Certification Committee’s decision is final and binding.

### Recertification Special Consideration for Hardship

Individuals who are unable to complete the recertification requirements due to hardship have an opportunity to request a review of their case. A written request must be submitted to the Secretary of Certification. The request must be postmarked within 30 days of their recertification deadline and include detailed supporting documentation regarding the hardship. Examples of hardship include: health, natural disasters, and extended active duty military leave.



# APPLICATION COMPLETION PROCESS

## Application for Examination

All candidates must complete the Application for Examination before determination can be made on eligibility for the certification examination. The application is available on Pages 27-30 or online at [www.jcahpo.org](http://www.jcahpo.org). Incomplete applications will not be accepted.

- **Section 1 – Examination Type**

Select the certification examination being requested.

**COA Practice Examination** – The COA Practice Examination allows candidates to sit for the COA examination for an initial fee of \$150. If the candidate passes the examination, they must pay an additional fee of \$150 to obtain the COA certificate within 30 days of receiving their official practice examination results from IJCAHPO. The practice examination will not be considered a formal attempt unless a passing score has been achieved. If a passing score is not achieved, there are no refunds and candidates will be required to retest with the initial COA examination fee within 12 months of the practice examination date.

- **Section 2 – IJCAHPO Identification Number**

If you have been previously assigned an IJCAHPO identification number, include it on the application. If you do not have a number, leave this section blank and one will be assigned to you.

- **Section 3 – Applicant**

The name you indicate on the application **MUST** match two forms of identification that will be presented at the test site. Notify IJCAHPO of any name or address changes that will affect your ability to test. Name changes require a copy of verification, such as a marriage license or current form of government or state issued identification.

- **Section 4 – Eligibility**

Refer to the Eligibility Criteria on pages 4-7.

- **Section 5 – Payment**

The Fee Schedule is located in Appendix 2. Application processing time is 2 to 4 weeks; rush processing option is available for an additional fee. All fees are subject to change and include a non-refundable processing fee. Refund amounts, if any, vary depending on when IJCAHPO receives the cancellation request. IJCAHPO will not redeposit a check returned for non-sufficient funds (NSF). A handling fee for returned checks or declined credit cards will be assessed.

- **Section 6 – Responsibility Statement**

All candidates are required to check boxes on question 9 of the application and sign the bottom of this section. If any of the answers are “yes” to the questions indicated, a statement of explanation is required and a copy of official verification to reflect any penalties have been completed, including fines paid.

### **Statement of Non-Disclosure**

All IJCAHPO examinations and IJCAHPO study materials are copyrighted, confidential and proprietary. The examination(s) and study materials are available to the candidate solely for the purpose of assessing proficiency in the assessment levels and sub-content levels referenced in the examination(s) and study materials for which the candidate is eligible. Candidates are expressly prohibited from disclosing, publishing, reproducing, or transmitting the examination(s) or study materials in any manner, in whole or in part, in any form or by any means, verbal, written, electronic or mechanical, for any purpose. By signing the application, you agree to the Statement of Non-Disclosure. If you do not agree to the Statement of Non-Disclosure and do not sign the application, you will not be eligible to take any IJCAHPO examination.

- **Section 7 – Employer**

All applicants are required to complete Section A.

- **Section 8 – Sponsor/Employer Endorsement**

All applicants must include a sponsor/employer

## 8. APPLICATION COMPLETION PROCESS

endorsement. Applicants for the COA, COT, and COMT certification examinations must include the endorsement of a sponsoring ophthalmologist. The ophthalmologist may be the candidate's employer or another licensed ophthalmologist.

### • Section 9 – Release of Examination Data

IJCAHPO reserves the right to use, for any purpose, all examination data in aggregate reports related to examination performance. Release of examination data will not include names or personal identifiable information.

### Submission of Application, Payment and Supporting Documentation

The application for examination and payment MUST be mailed to IJCAHPO. Faxed or emailed applications will not be accepted. The mailing address is:

IJCAHPO  
2025 Woodlane Drive  
St. Paul, MN 55125

Copies of supporting documentation such as verification of completion of a formal training program, IJCAHPO Group A credits, or legal documentation are required as necessary.

### Approval/Denial of Application

Normal processing time for applications is 2 – 4 weeks. If the application is incomplete, a written request for the missing documentation will be sent to the applicant with a deadline for submission of the information before the application is denied. No refunds are provided for denied applications.

### Application Approval Confirmation Notice

IJCAHPO will send a confirmation notice to applicants with approved applications. The confirmation notice will provide a toll-free number and other scheduling information, including a 90-day eligibility period to schedule the examination with IJCAHPO's testing vendor, Pearson VUE. The confirmation notice will also outline important information regarding the identification that MUST be presented at the test site.

### Submission of Application for Practical Examination(s) if Required

COT and COMT candidates, who are not currently COT certified, are required to complete the computer-simulated COT Skill Evaluation. COMT candidates who have previously successfully completed the COT Skill Evaluation will only be required to complete the computer-simulated COMT Performance Test.

### COT Skill Evaluation

Candidates who pass the COT or COMT multiple-choice examination and are eligible will receive a form for the COT Skill Evaluation.

COT candidates must successfully complete all tasks on the COT Skill Evaluation within 24 months of application for the COT multiple-choice examination. Please refer to page 16 to review the COT Skill Evaluation tasks. Upon receipt of the completed form, IJCAHPO will send candidates a confirmation notice with a tutorial link as well as the COT Skill Evaluation checklist to aid in examination preparation.

Candidates may choose to complete a practice COT Skill Evaluation or the initial examination. The practice examination requires an additional fee and will not be considered a formal attempt. However, if the candidate passes all the skills on the practice examination during this initial attempt they may count it towards the COT certification, with no refund of the practice examination fee issued.

Upon receipt of the confirmation notice, a candidate may schedule their appointment to take the computer-simulated COT Skill Evaluation at a Pearson VUE test site. All guidelines noted under Examination Scheduling will apply.

### COMT Performance Test

If a COMT candidate has previously completed the COT Skill Evaluation, the candidate will receive a form for the COMT Performance Test upon successful completion of the COMT multiple-choice examination. COMT candidates must successfully complete all tasks on the COMT Performance Test within 36 months of application for the COMT multiple-choice examination. Please review the COMT Performance Test tasks on page 16. Upon receipt of the completed form, IJCAHPO will send candidates a tutorial link as well as a COMT Performance Test checklist to aid in preparation.

The computer-simulated COMT Performance Test is available at the IJCAHPO headquarters in St. Paul, Minnesota. Contact the Certification Department for additional available testing locations or to schedule an appointment to take the Performance Test in St. Paul.

### **COT or COMT Candidates Pending Successful Completion of the Practical Examinations**

Non-certified candidates, who have passed the COT multiple-choice examination but have conditionally passed, failed, or chosen to delay the COT Skill Evaluation, may be granted a certificate at the COA level if they submit a written request to IJCAHPO. If a COT candidate is currently certified as a COA, they must maintain their COA certification while pursuing their COT certification.

Non-certified candidates, who have passed the COMT multiple-choice examination but have conditionally passed, failed, or chosen to delay the COT Skill Evaluation and COMT Performance Test, may be granted certification at the COA level if they submit a written request to IJCAHPO. Candidates who have passed the COMT multiple-choice examination and the COT Skill Evaluation, but conditionally passed, failed, or have chosen to delay the COMT Performance Test, may be granted certification at the COT level if they submit a written request to IJCAHPO. If a COMT candidate is currently certified as a COT, the COT certification must be maintained while pursuing the COMT certification.

### **Military Personnel**

Military personnel in the United States and Canada will receive up to a 50% discount on multiple-choice certification examination application fees. The discounted certification application fees are for initial examinations at all core certification levels for military personnel in the following areas: Active Duty, Contract Military, Veterans' Affairs, and Military Veterans. Individuals who may serve in other foreign services may contact IJCAHPO for more information and overseas testing locations.

### **COA Practice Examination**

Candidates that pass the COA practice examination will receive a form to return to IJCAHPO with an additional \$150 fee to receive their COA certification. The form should be returned to IJCAHPO within 30 days of receipt. Upon receipt of payment, IJCAHPO will issue the COA certificate to the candidate.

Candidates that fail the COA practice examination will need to reapply and pay the initial COA examination fee. The initial examination form needs to be submitted within 12 months of the practice examination date.



# APPENDICES

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**1. Examination Type**

Please check the examination for which you are applying:  COA (\$300)  COA Practice (\$150)  COT  COMT  OSA-ST  ROUB  CCOA  CDOS  
 Please check one of the following:  
 Rush fee enclosed. Please refer to the payment section below.  This is my first time applying for this exam.  
 I have taken this exam previously - Last test date: \_\_\_/\_\_\_/\_\_\_(month / year)  I am taking this exam to recertify my credential in lieu of continuing education credits

**2. JCAHPO Identification Number (if applicable)**

ID# \_\_\_\_\_

**IMPORTANT:** The name on your two forms of identification that will be presented at the testing center when you take the exam must match exactly the name provided below.

Name:  Mr.  Mrs.  Ms. Date of Birth: (mm/dd/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_

First Middle Last Suffix Former name (if applicable)

Home Address Apt. #

City State Zip Code Country

Home or Mobile Telephone Business Telephone

E-mail FAX

**NOTE:** Notify IJCAHPO of any name or address changes. Official examination correspondence will be mailed to your home address.

**Applicant's highest educational credential completed.** (Check one box and indicate subject/discipline as appropriate.)

High school diploma  Two year college (Associate) degree  Bachelor's degree  Master's degree  Other: \_\_\_\_\_

Subject/Discipline: \_\_\_\_\_

**Applicant's occupational background** (Check all that apply.)

Certified Orthoptist  Contact Lens Technician  Ophthalmic Photographer  Optician  Registered Nurse  Other: \_\_\_\_\_

**NOTE:** Your application will not be processed if the appropriate section below is not completed. See the Criteria handbook for further explanation of the eligibility criteria. Supporting documentation of your education (such as a transcript or a copy of a certificate of completion) must be attached.

**COA Applicants - Check only one box.**

- Graduate of formal clinical training program (A1)
- Graduate of formal training program and work experience (A2)
- Completion of independent study course and work experience (A3)

**COT Applicants - Check only one box.**

- Graduate of formal training program (T1)
- Currently certified as a COA and work experience (T2)
- Currently certified as an orthoptist and work experience (T3)
- Currently certified as a COA and non-certified work experience (T4)

**COMT Applicants - Check only one box.**

- Graduate of formal training program and two or more years of college education (TG1)
- Graduate of formal training program, less than two years of college education, and work experience (TG2)
- Currently certified as a COT and work experience (TG3)
- Currently certified as an orthoptist and work experience (TG4)
- Current COT, work experience as a COT, and non-certified work experience (TG5)

**OSA-ST Applicants - Check only one box.**

- Graduate of formal clinical training program (SA1)
- On-the-job training (SA2)
- Approved Surgical Assisting Course(s) and Surgical Log (SA3)

**ROUB Applicants**

- Graduate of formal training program (R1)
- Currently certified by JCAHPO as a COA, COT, COMT, or CDOS, and work experience (R2)
- Earned CE credits in classroom setting, hands-on course, and work experience (R3)

**CDOS Applicants**

- Graduate of formal training program (B1)
- Currently certified as a COA, COT, COMT, ROUB, RDCS, RT(S) or CRA, and work experience (B2)
- Earned CE credits in classroom setting, hands-on course, and work experience (B3)

**CCOA Applicants**

- Completion of independent study course and current employment with supplier of ophthalmic products and/or services.

**I comply with the criteria that corresponds to the selection made above and have attached copies of the required documentation.**

X \_\_\_\_\_  
Signature Date

**5. Payment**

Indicate method of payment (please refer to the fee schedule in the criteria handbook for amount): Discount Code if Applicable: \_\_\_\_\_

- Check/Money Order (drawn on a U.S. bank, in U.S. dollars, payable to JCAHPO)  VISA  MasterCard  Discover  American Express
- \$50.00 Rush Processing Fee (credit card only)

If payment is by credit card, please provide the following information:

Card Number Security Code Expiration Date (month / year)

Payer's Name (please print) Authorized Signature

Payer's Billing Address Payer's Zip Code

**6. Responsibility Statement**
**IJCAHPO's Responsibility for Certification and Recertification of Medical Personnel Performing Technical Ophthalmic Services for Ophthalmologists**

IJCAHPO is the federated organization of ophthalmological societies and associations which has been charged with certain responsibilities related to the education and utilization of allied health personnel in ophthalmology. To implement these goals, IJCAHPO has established criteria for training, examination, certification, and utilization at various levels of expertise for Allied Ophthalmic Personnel.

Certification by IJCAHPO indicates ONLY that the individual has fulfilled the eligibility requirements and successfully completed an examination for which the individual qualifies. Certification by IJCAHPO does NOT imply, by any criteria, that the individual is qualified as an independent practitioner.

**AGREEMENT OF CERTIFICATION AND RECERTIFICATION**

As an applicant for certification or recertification from IJCAHPO, I agree to the following:

*Numbers 1 and 2 applicable to COA, COT, COMT, OSA, CDOS, and ROUB applicants only.*

1. I shall perform, to the best of my ability, those technical ophthalmic services specifically delegated to me by a sponsoring ophthalmologist/physician according to his or her directions, instructions, and prescriptions.
2. I shall provide technical ophthalmic services only in the office of my sponsoring ophthalmologist/physician, a medical clinic, or other medical facility.

*Number 3 applicable to CCOA applicants only*

3. I am currently employed by a corporation that does business within the ophthalmic community and, in my position, I will be interacting with ophthalmic professionals on a continuing basis.

*Numbers 4-10 applicable to all applicants*

4. I authorize IJCAHPO to communicate any violation of its rules or standards by me, my status of application or certification, and any matter involving me to state and federal authorities, employers, training programs, and others.
5. I agree not to make and to correct immediately any statements concerning my certification status which are or which become untrue or misleading. I agree to provide IJCAHPO confirmation as requested by IJCAHPO.
6. I release IJCAHPO, its officers, directors, agents, employers, committee members, and others for disciplinary action taken in good faith pursuant to the rules, standards, procedures, and sanctions of IJCAHPO.
7. I authorize IJCAHPO in its discretion to request information concerning matters relevant to this application and my certification, recertification, and review of certification.
8. I have received and read the rules, standards, procedures and sanctions of IJCAHPO. I comply with and agree to be bound by them.

**9. Please respond to the following questions:**

- |                              |                             |  |
|------------------------------|-----------------------------|--|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Have you ever had a certification or license suspended or revoked?                   |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Have you ever been dismissed from a job because of alcohol or other drug dependency? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Have you ever been convicted of a crime?   |

**If the answer to any question to number 9 is "Yes" include a statement of explanation with the application and a copy of verification to show any penalties have been completed.**

10. IJCAHPO examinations are confidential and proprietary. The examination(s) are available to you, the examinee, solely for the purpose of assessing your proficiency level in the content areas referenced in the examination(s) for which you are eligible. You are expressly prohibited from disclosing, publishing, reproducing, or transmitting the examination(s) in any matter, in whole or in part, in any form or by any means, verbal or written, electronic or mechanical, for any purpose. By signing this application you agree to the above disclosure statement. If you do not agree to the disclosure statement and do not sign the application you will not be eligible to take any IJCAHPO examinations.

I affirm that all statements made in the above application are true. (Sign and date below.)

X \_\_\_\_\_  
 Applicant's Signature Date

**7. Employer**

All applicants, other than CCOA applicants, complete section A. CCOA applicants complete section B.

**SECTION A (for COA, COT, COMT, OSA-ST, ROUB, and CDOS applicants)**

Clinic Name

Clinic Address City State  
Zip

Telephone FAX

Clinic Manager First M.I. Last

**Employer's Practice Setting** (Check all that apply)

- Private, Solo  Private, Group: Number of Physicians  2-5  6-10  11 or more
- Hospital Clinic or HMO  University Clinic  Other: \_\_\_\_\_

**Employer's Main Subspecialty** (Check all that apply)

- Cataract and IOL  Comprehensive Ophthalmology  Contact Lenses  Cornea and External Diseases
- Glaucoma  Low Vision  Neuro-Ophthalmology  Ophthalmic Pathology
- Ophthalmic Plastic/Reconstructive Surgery  Optical Dispensing  Pediatric Ophthalmology/Strabismus
- Refractive Surgery  Retina and Vitreous Disease  Other: \_\_\_\_\_

**Section B (for CCOA applicants only)**

Supervisor's Name First M.I. Last

Company Name

Main Company Address

Product or Service Provided Supervisor's E-Mail

Applicant's Job Title

**8. Sponsor/Employer Endorsement**

**SPONSORING OPHTHALMOLOGIST ENDORSEMENT** (for COA, COT, COMT, OSA-ST, ROUB, CDOS applicants only)

Please check ONE of the following: o The applicant works under my direct supervision. o The applicant has my sponsorship.  
(The sponsoring ophthalmologist (or physician for ROUB or CDOS) attests that he/she knows the individual applicant, certifies that the individual is knowledgeable and skilled in the field, and that the individual is working within established IJCAHPO guidelines for allied ophthalmic personnel.)

I am an ophthalmologist (or physician for ROUB or CDOS), licensed to practice medicine in: \_\_\_\_\_ State or Province My license number

X \_\_\_\_\_  
Sponsor's Signature Date

Sponsor's Name First M.I. Last

Clinic Name

Clinic Address City State Zip Country

Telephone FAX Email

**EMPLOYER'S ENDORSEMENT** (CCOA applicants only)

The employer/supervisor attests that he/she knows the individual applicant, certifies that the individual is knowledgeable and skilled in the field, and that the individual is working within established IJCAHPO guidelines.

X \_\_\_\_\_  
Employer's Signature Date

## IJCAHPO Application for Examination

## 9. Release of Examination Data

IJCAHPO reserves the right to use, for any purpose, all examination data in aggregate reports related to exam performance. Release of such data will not include names or personal, identifiable information. Examples of the purposed, for which such data might be used include, but are not limited to: IJCAHPO research projects, grants, and formal training program reports.

Information regarding whether or not you are actively certified is public and may be verified or accessed by anyone.

If you wish to authorize IJCAHPO's release of your individual, identifiable data (name) to any source, please contact JCAHPO, in writing, with the name of the intended recipient and the time period in which release can be made.

**Compliance with the Americans with Disabilities Act (ADA)**

In compliance with the ADA, IJCAHPO will provide reasonable accommodations for candidates with disabilities who cannot take the examination under the usual testing conditions. Disabled individuals must provide notice and appropriate documentation (at the applicant's expense) of their disability when applying for the examination.

If accommodations are necessary for you to complete a IJCAHPO examination due to functional limitations imposed by a disability, you will be required to complete and return a questionnaire. Questionnaires must be submitted with proper documentation and included with the examination application.

**Application Checklist**

Before mailing your application, please be sure that the following have been included:

- A copy of documentation showing successful completion of a formal educational training program or independent study course, if applicable.
- A copy of verification of college credits or IJCAHPO continuing education credits, if applicable.
- OSA-ST applicants only: A copy of a document showing official accreditation of the surgical facility by a nationally-recognized accrediting agency, if using the SA2 eligibility pathway.
- OSA-ST applicants only: Case log of 15 observed category A surgeries if using the SA3 eligibility pathway.
- Completion of the appropriate eligibility criteria box, question #9 on section 6, and your signature on application pages 1 and 2.
- COA, COT, COMT, OSA-ST, ROUB, and CDOS applicants: Your sponsor's signature (application page 3 of 4). Your sponsor must be an ophthalmologist. If you are applying for the COA, COT, COMT, or OSA-ST exam. ROUB and CDOS applicants may have any physician serve as their sponsor. Original signatures are required - signature stamps or computerized digitized signatures are not accepted.
- COT or COMT applicants: If using the T4 or TG5 eligibility pathway, verification of non-certified work experience from your ophthalmologist on letterhead.
- CCOA applicants only: Your supervisor's signature (application page 3 of 4). Original signatures are required - signature stamps or computerized digitized signatures are not accepted.
- CDOS applicants only: Case log of 20 abnormal ophthalmic B-scan examinations.
- Examination fee, payable to IJCAHPO in U.S. dollars. (Refer to fee schedule). All applications denied due to not meeting the eligibility requirements or incomplete applications, will not receive a refund of the exam fee.

**NOTE: Please retain a photocopy of your application. If any of the above-mentioned items are missing or incomplete, your application will not be processed. Mail (DO NOT FAX) your application to:**



INTERNATIONAL JOINT COMMISSION ON ALLIED  
HEALTH PERSONNEL IN OPHTHALMOLOGY®

**IJCAHPO  
2025 Woodlane Drive  
St. Paul, MN 55125-2998**

*Once your application is accepted, you will be assigned a 90-day eligibility period. You must schedule and take your examination during this period. This eligibility period, along with information on how to schedule your exam, will be provided to you in a confirmation letter you will receive after your application is accepted.*



## IJCAHPO Examination Fees and Timelines

EXAMINATION FEES AND TIMELINES				
Certification Level	Details	Multiple-Choice	Skill Evaluation	Performance Test
COA	To avoid ineligibility or a change in eligibility requirements, the application must be received within a specific time after completion of a training program – refer to the Criteria handbook for specific time frame.  Application for retest must be received within 12 months of initial examination.  <b>Military Personnel</b> Please contact IJCAHPO's Certification Department about reduced exam fees.	\$300 Initial \$250 1st Retest \$150 2nd Retest		
COT		\$325 1 Multiple-Choice and 1-Skill Eval Attempt \$275 1st Retest \$150 2nd Retest	\$85 Practice Test \$85 Retest	
COMT		\$340 1 Multiple-Choice and 1 Skill Eval Attempt \$290 1st Retest \$150 2nd Retest	\$85 Retest	\$110 Initial \$85 Retest
COA Practice Examination	Upon passing the examination, the additional fee required must be received within 30 days of receiving the official results	\$150 Initial \$150 After Pass Results		
Rush fee for examination application processing	Normal processing time is 2 – 4 weeks	\$50		
Confirmation Letter mailed by IJCAHPO for computer administered examinations.	Within 2 – 4 weeks of receiving an application.			
Appealing certification eligibility	Postmarked within 30 days of notification of ineligibility.	\$50		
Requesting special consideration of eligibility	Special considerations may take up to 8 weeks to process.			
Taking computer-administered examinations	Examinations must be taken within the 90 – day eligibility period.			
Application Cancellation	Request must be received within the 90 – day eligibility period. This is a non-refundable portion of the examination fee.	\$75		
Cancelling/Rescheduling examination appointments	Pearson VUE must be contacted at least 30 business days prior to the scheduled appointment to avoid a fee. If cancelled or rescheduled 5 – 29 business days prior to the appointment, Pearson VUE will collect \$25. No-show fee if canceled less than 5 business days prior to appointment.	\$85 No-show fee		
Extending eligibility period: Only one 30-day extension of the 90-day eligibility period is allowed.	Request must be received within the 90-day eligibility period.	\$50		
Appealing examination results	Postmarked within 30 days of examination results.	\$50		
Denied Application	Does not meet requirements or application is incomplete. No refund will be issued.			
RECERTIFICATION EVENTS AND FEES				
Emailing of recertification reminder by IJCAHPO	Approximately 6 months prior to recertification date. It is the candidate's responsibility to comply with recertification procedures and deadline even if they do not receive a reminder.			
Recertification application submitted by certificant to IJCAHPO for processing.	Postmarked on or before the last day of the last month in recertification cycle. In the event the certificant wishes to recertify by retesting in lieu of continuing education, an examination application must be submitted and the examination fee must be paid instead of the recertification fee – see above for fee information.	\$125		
Submitting recertification application during the first 12 months after the recertification date.	Postmarked within 12 months of recertification date.	\$85 Late fee		
Rush fee for recertification application processing.	Normal processing time is 4 – 6 weeks.	\$50		
Appealing recertification denials	Appeal postmarked within 30 days of denial.	\$50		
Cancelling recertification application	This is the non-refundable portion of the recertification fee.	\$50		
Denial of recertification application	Does not meet eligibility requirements or application is incomplete. No refund will be issued.			
EVENTS AND FEES APPLICABLE TO BOTH EXAMINATION AND RECERTIFICATION				
Declined credit card transactions or receipt of non-sufficient funds (NSF) check		\$25		

## IJCAHPO Standards of Ethics

**Overview**

The Standards of Ethics of the International Joint Commission on Allied Health Personnel in Ophthalmology (IJCAHPO) shall apply to persons holding certificates from IJCAHPO that are either currently certified and to persons applying for certification by IJCAHPO to become certificant holders (Candidates). Certification is a method of assuring the medical community and the public that an individual is qualified to practice within the profession. Because the public relies on certificates issued by IJCAHPO, it is essential that certificate holders and candidates act consistently with these Rules of Ethics. IJCAHPO does not guarantee the job performance of any credential holder or applicant. The IJCAHPO Board of Directors does not express an opinion regarding the competence of any certificant or applicant. Allied ophthalmic healthcare is a multi-specialty field comprised of Ophthalmic Assistants, Technicians and Technologists (with sub-specialties in surgical, ultrasound biometry, and sonography).

The Standards of Ethics are intended to be consistent with the Mission Statement of IJCAHPO, and to promote the goals set forth in the Mission Statement.

**Statement of Purpose**

The purpose of the ethics requirements is to identify individuals who commit to a set of professional values that cause one to act in the best interest of the patients. These professional values and the resulting behavior is one element of IJCAHPO's definition to be certified. The Standards of Ethics provides guidance on what it means to be qualified and to motivate and promote a culture of ethical behavior within the profession. Certificants with behavior inconsistent with the Standards of Ethics shall have their IJCAHPO credential removed or restricted.

**A. Code of Ethics**

The Code of Ethics shall serve as a guide by which certificate holders and candidates may evaluate their professional conduct as it relates to patients, healthcare consumers, employers, co-workers, and other members of the ophthalmic healthcare team. The purpose of the Code of Ethics is to aid certificate holders and candidates in maintaining a high level of ethical conduct and in providing for the protection, safety, and comfort of patients. Allied Ophthalmic Personnel (AOP) shall:

1. Act in a professional manner, respond to patient needs, and support co-workers and associates in providing quality patient care.
2. Deliver patient care and services unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on

the basis of sex, race, creed, religion or socio-economic status.

3. Use theoretical knowledge and concepts, use equipment and accessories consistent with the purposes for which they were designed, and employ procedures techniques appropriately and perform services in accordance within the accepted standard of practice.
4. Assess situations; exercise care, discretion, and judgment; assume responsibility for professional decisions; and acts in the best interest of the patient.
5. Act as an agent through observation and communication to obtain pertinent information for the ophthalmologist to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
6. Practice ethical conduct appropriate to the profession and protect the patient's right to quality ophthalmologic care.
7. Respect the confidence entrusted in the course of professional practice, respect the patient's right to privacy, and reveal confidential information only as required by law or to protect the welfare of the individual or the community.
8. Continually strive to improve their knowledge and skills through the participation in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.

**B. Rules of Ethics**

The Rules of Ethics form the second part of the Standards of Ethics. They are mandatory standards of minimally accepted professional conduct of all certificate holders and candidates. These Rules of Ethics are intended to promote the protection, safety, and comfort of patients. The Rules of Ethics are enforceable. IJCAHPO certificants are required to indicate any ethics violations, criminal charges, and convictions as required on initial and recertification applications.

**Fraudulent or Deceptive Practices**

1. Employing fraud or deceit in procuring or attempting to procure, maintain, renew, or obtain, reinstate or renew certifications as issued by IJCAHPO. This includes the altering in any respect any document issued by IJCAHPO or indicating in writing certification and registration with IJCAHPO when that is not the case.
2. Engaging in false, fraudulent, deceptive, or misleading communications to any person regarding the individual's education, training, credentials, experience or qualifications or the status of the individual's certification with IJCAHPO.

3. Knowingly engaging or assisting any person to engage in or otherwise participating in, abusive or fraudulent billing practices, including violations of federal laws or state/provincial medical assistance laws.
4. Subverting or attempting to subvert IJCAHPO's certification and registration processes by: making a false statement or knowingly providing false information to IJCAHPO; or failing to cooperate with any investigation by IJCAHPO.

**Conduct and Scope of Practice -  
Failure to Conform to Minimally Acceptable Standards**

5. Engaging in unprofessional conduct, including but not limited to:
  - a. departure from or failure to conform to applicable federal, state or local governmental rules regarding ophthalmic scope of practice.
  - b. any ophthalmic practice that may create unnecessary danger to a patient's life, health or safety.
6. Engaging in conduct with a patient that is sexual or may reasonably be interpreted by the patient as sexual, or in any verbal behavior that is seductive or sexually demeaning to a patient; or engaging in sexual exploitation of a patient or former patient. This also applies to unwanted sexual behavior, verbal or otherwise.
7. Engaging in any unethical conduct, including, but not limited to, conduct likely to deceive, defraud, or harm that public; or demonstrating a willful or careless disregard for the health, wealth, or safety of a patient. Actual injury need not be established for this clause to be effective.
8. Performing procedures which the individual is not competent to perform through appropriate training and/or education or experiences unless assisted or personally supervised by someone who is competent through training and/or education or experience.
9. Delegating or accepting the delegation of an ophthalmic function or any other prescribed healthcare function when the delegation or acceptance could reasonably be expected to create an unnecessary danger to a patient's life, health, or safety. Actual injury to a patient need not be established under this clause to be effective.
10. Actual or potential inability to practice allied ophthalmic patient care with reasonable skill and safety to patients by reason of illness; use of alcohol; drugs, chemicals, or any other material; or as a result of any mental or physical condition.
11. Adjudication as mentally incompetent, mentally ill, chemically dependent, or dangerous to the public by a court of competent jurisdiction.

12. Improper management of patient records, including failure to maintain adequate patient records or to furnish a patient record or report required by law; or making, causing, or permitting anyone to make false, deceptive, misleading entry in any patient record.
13. Revealing privileged communication, providing false or misleading information from or relating to a former or current patient, except when otherwise required or permitted by law, or viewing, using, releasing, or otherwise failing to adequately protect the security or privacy of confidential patient information.

**Violation of Government Laws and Regulations**

14. Violating a state or federal narcotics or controlled substance law, even if not charged or convicted of a violation.
15. Violating a rule adopted by a state or federal regulatory authority or certification board resulting in the individual's certification/license being denied, revoked, suspended, placed on probation, or a consent agreement or order, voluntarily surrendered, subject to any conditions, or failing to report to IJCAHPO any of the violations or actions in this rule.
16. Convictions, criminal proceedings, or military court martial as described:
  - a. conviction of a crime, including felony, a gross misdemeanor, or a misdemeanor. All alcohol and/or drug related violations must be reported: and/or
  - b. criminal proceeding where a finding or verdict of guilt is made or returned but the adjudication of guilt is either withheld; deferred, or not entered or the sentence is stayed; or a criminal proceeding where the individual does not admit to guilt to the criminal act and asserts innocence; a plea of guilty or no contest; or where the individual enters a pre-trial diversion activity; or military court martial related to any offense identified in these Rules of Ethics.
17. Failing to immediately report to the Certificate holder's or Candidate's supervisor information concerning an error made with the treatment or care for a patient. Errors include any departure from the standard of care that reasonably may be considered to be potentially harmful, unethical, or improper. Errors also include behavior that is negligent or should have occurred in connection with a patient's care, but did not by omission. The duty to report exists whether or not the patient suffered any injury.

## Overview of the Scope of Practice

The purpose of this document is to define the Scope of Practice for Allied Ophthalmic Personnel (AOP) and to specify their roles as members of the ophthalmic health care team. Allied Ophthalmic Personnel are employed in a multi-specialty field that is comprised of Ophthalmic Assistants, Technicians and Technologists (with subspecialties in surgical assisting, imaging, biometry, and ultrasound) and other mid-level eye care team members. The scope of practice as outlined below will evolve as ophthalmic technology changes.

The knowledge, skills, and interpersonal behaviors required of Allied Ophthalmic Personnel include the following core competency domains:

- Patient care
- Medical knowledge
- Professionalism, interpersonal and communication skills
- Technical and scientific skills
- Community and health services

## Definition of the Allied Ophthalmic Personnel Profession

Allied Ophthalmic Personnel are eye health care professionals working under the supervision of a physician who is qualified or licensed to practice medicine and surgery specializing in ophthalmology. AOP (assistant, technician, medical technologist) are qualified to assist in the diagnostic evaluation, treatment and management, and care of patients with deficiencies and abnormalities that affect vision and the visual system. The AOP scope of practice allows an assistant, technician, and medical technologist to perform tasks in accordance with laws and regulations that permit the physician to delegate.

Allied ophthalmic health professionals use evidence-based practices to optimize patient outcomes. Allied ophthalmic health professionals must also attempt to prevent disease and management of patients with chronic diseases. Thus, the scope of allied ophthalmic health covers the individual, the family, and the community; many allied health professionals specialize in the promotion of optimum eye function and health, and the improvement of eye health-related quality of life. Allied Ophthalmic Personnel also work in health care administration and health systems management.

## Scope of Practice of the AOP Profession

Allied Ophthalmic Personnel are individuals qualified through academic and clinic experience to provide patient care and assistance to ophthalmologists and may hold professional credentials.

The responsibilities of Allied Ophthalmic Personnel include assisting in the diagnostic evaluation, management, treatment, education, and care of patients with medical and surgical conditions affecting the visual system. Their scope of practice includes the application of technology and the use of protocols across all health care delivery sites including, but not limited to, the hospital, the clinic, and the physician's office. They enter acquired clinical data and dictated information from the physician into paper or electronic medical records. These activities are supported by education, research, and administration.

Allied Ophthalmic Personnel perform assigned duties. AOP may not diagnose or treat eye disorders and may not prescribe medications; they are not independent practitioners. They can provide diagnostic information and clinical data in the ophthalmic exam to the physician, who is treating patients, and may assist in surgery, patient education, and compliance with prescribed treatment. It is not within the AOP scope of practice to perform any injection technique or similar invasive procedures that involve the placement of needles, trocars, cannulas, or instillation devices within and beneath tissue surfaces.

Patient and family education activities are to promote knowledge and understanding of the eye disease process, medical therapy and self-help. Public education activities focus on the promotion of visual and eye health and wellness.

## Assisting in the performance of clinical and diagnostic activities may include but is not limited to:

1. Obtaining and documenting patient histories
2. Maintaining and repairing equipment and instruments
3. Determining visual acuity including: pupillary assessment and, visual acuity assessment
4. Performing tests, evaluations, and studies of the visual system including: visual fields, keratometry, ocular motility, PAM, and Osmolarity
5. Performing automated and subjective refraction without prescribing
6. Performing ophthalmic imaging
7. Administering eye drops, ointments, and irrigating solutions to the eye, and knowledge about oral medications and non-invasive techniques
8. Assisting with corrective lenses including: spectacles and contact lenses (i.e. lensometry, etc.)
9. Performing supplemental testing

10. Performing office duties and clinical tasks – entering data into the EMR
11. Providing patient services

**Assisting with patient treatments, interventions, procedures and management may include but is not limited to the application and monitoring of:**

1. Administration of pharmacological agents related to eye care procedures as prescribed and supervised by the physician, including but not limited to topical anesthetics, fluorescein and other topical dyes, dilating agents, miotics, and pressure lowering eye drops
2. Acquisition and processing of microbiological specimens. Preparation and labeling of microscope slides and culture media for cultures obtained by the physician.
3. Measurement of intraocular pressure (tonometry).
4. Performing automated and manual refraction for diagnostic purposes
5. Performing amblyopia treatment: patching, drops, prisms, etc.
6. Performing surgical procedures

**Assisting in the performance of ophthalmic surgical activities may include but is not limited to:**

1. Pre-operative preparation of the patient
2. Preparation of surgical instruments and equipment
3. Proper aseptic technique
4. Induction of ophthalmic anesthesia
5. Surgical procedures
6. Surgical complications
7. Ophthalmic surgical pharmacology
8. Minor surgical and therapeutic procedures
9. Post-operative education

**Performing imaging and other activities that may include but is not limited to:**

1. Examination techniques: fundus photography, external photography, Optical Coherence Tomography, A-Scan and B-Scan, ultrasonography, ultrasound biomicroscopy
2. Proper maintenance of instruments
3. Intraocular lens power calculations

## I. Basic Principles

The Joint Commission on Allied Health Personnel in Ophthalmology (IJCAHPO) is an organization of ophthalmological societies and associations. IJCAHPO has established criteria for training, examination, certification, recertification and utilization at various levels of expertise for Allied Ophthalmic Personnel.

Certification by IJCAHPO means that the individual has fulfilled the educational requirements pertaining to specifically delegated technical ophthalmic services under the direction of an employing ophthalmologist, either in his or her private office, a medical clinic, a hospital, or other medical facility. IJCAHPO certification does not warrant the competence or job performance of certificants.

Certification by IJCAHPO is a non-exclusive and non-transferable right to use the applicable IJCAHPO certification designation(s) for the certification period, so long as the certificant remains in compliance with all IJCAHPO rules and requirements. IJCAHPO reserves the right to revise its rules and requirements at any time.

References herein to "individual(s)" include applicants for certification and recertification and current IJCAHPO certificants.

## II. Eligibility for Certification and Recertification

A. No individual may apply for certification or recertification, or maintain certification, unless they comply with all IJCAHPO rules and standards.

Certification or recertification may be denied, revoked or otherwise affected for non-compliance with IJCAHPO rules and standards.

B. The individual must truthfully complete and sign an application in the form provided by IJCAHPO and shall provide additional information as requested. The individual must notify IJCAHPO within thirty (30) days of occurrence of any change in name, address, telephone number, and any facts bearing on eligibility, certification, or recertification (including but not limited to: (i) disciplinary action by a professional licensing board or professional organization; (ii) indictment, arrest, conviction, or plea of guilty to any felony or misdemeanor; and (iii) any mental or physical condition which impairs the individual's ability to render objective and competent professional performance). Applicants must refrain from and/or correct any statement concerning their certification status which is or becomes untrue or misleading.

Upon receipt of notice of any information referenced in paragraph II B above, or any other information bearing upon the

individual's certification status, IJCAHPO may: (i) Request additional information from the individual, including, but not limited to, court records, evidence of rehabilitation, and related medical documentation; and/or (ii) Refer the matter to the Disciplinary Review Committee pursuant to Section VI of these rules.

C. In applying for certification and recertification, and in maintaining current certification, all individuals agree that:

1. The individual will not use in any way the examinations, certificates, cards, logos, and emblems of IJCAHPO, the name "International Joint Commission on Allied Health Personnel in Ophthalmology, Inc.", the term "IJCAHPO", and abbreviations relating thereto, and IJCAHPO's certification designations without the express prior written consent of IJCAHPO.
2. The individual shall immediately relinquish, refrain from using, and correct, at the individual's expense, any outdated or other inaccurate use of any IJCAHPO certificate, card, logo, emblem, name, and related abbreviations in case of suspension, limitation, or revocation by IJCAHPO or as otherwise requested by IJCAHPO.

D. Unauthorized Use of IJCAHPO's Designations and Property

IJCAHPO will enforce all rights and legal remedies against any individual found to have misrepresented that they are certified by IJCAHPO when they are not, or found to have engaged in unauthorized use or misappropriation of IJCAHPO property (as described in Section II.C above). IJCAHPO may suspend eligibility for certification in such instances and may require the payment of damages and expenses, including attorney's fees, and a showing of rehabilitation before certification eligibility is permitted.

## III. IJCAHPO Examinations

All examinations are delivered in English.

Where questions concerning a test score are raised, individuals are required to cooperate in any IJCAHPO review or investigation. IJCAHPO reserves the right to disregard or nullify any examination score if, in the sole opinion of IJCAHPO, there is adequate reason to question the validity of the score. IJCAHPO in its discretion may: (i) offer the individual an opportunity to take the examination again at no additional fee, (ii) offer the individual an opportunity to take the examination again in the ordinary course, including payment of all fees; or (iii) proceed as described in Section VI, below. No detail concerning the candidate's performance on specific examination items or the candidate's examination score will be provided. All examination

**IJCAHPO Standards, Procedures and Sanctions**

information and materials are confidential and will not be released to the candidate.

**IV. Review of Application and Certification**

- A. Grounds for Action. The following are grounds for IJCAHPO to deny, revoke, or otherwise act upon certification or recertification eligibility:
1. Obtaining or attempting to obtain certification or recertification for oneself or another by fraud or deception of material fact in an application or any other communication to IJCAHPO, including but not limited to: (a) misstatement of a material fact, and (b) failure to make statement of a material fact, or (c) failure to provide information requested by IJCAHPO.
  2. Providing or attempting to provide ophthalmic services except as specifically delegated by an ophthalmologist.
  3. Misrepresentation of IJCAHPO certification or certification status, including but not limited to falsification of documents, use of credential while on non-certified status, and use of credentials without attainment.
  4. Irregularity in connection with any IJCAHPO examination, including but not limited to copying answers or permitting another to copy answers for any examination.
  5. Unauthorized distribution of, possession of, use of or access to pertinent materials or information regarding questions or answers relating to any IJCAHPO examination or other confidential IJCAHPO documents.
  6. Gross or repeated negligence or malpractice in providing ophthalmic care.
  7. Personal use of alcohol or any drug or substance to a degree which impairs professional performance providing ophthalmic care.
  8. Any physical or mental condition which impairs competent professional ophthalmic care performance.
  9. Physical or sexual abuse of a patient.
  10. The conviction of, plea of guilty, or plea of nolo contendere to a crime which is directly related to public health, safety, or professional performance providing ophthalmic care.
  11. Failure to cooperate reasonably with any IJCAHPO investigation of a disciplinary matter.

12. Unauthorized disclosure of confidential information.

- B. Sanctions may be applied for violations of any of the above grounds for discipline as set forth in Section VI, below.

**V. Disciplinary Review Committee**

The Disciplinary Review Committee is composed of three members, all of whom are members of the Certification Committee. A committee member may not serve on any matter in which his or her impartiality or the presence of actual or apparent conflict of interest might reasonably be questioned. It is the responsibility of the committee member to identify any potential conflict and to disclose all appropriate facts to the Chair of the Certification Committee, who shall have final authority to determine whether the Disciplinary Review Committee member shall be replaced for that hearing.

**VI. Review Procedures****A. Submission of Allegations**

1. Allegations of a violation of IJCAHPO disciplinary rules are to be referred to IJCAHPO for disposition. A person concerned with possible violation of IJCAHPO rules (the "complainant") must identify the person(s) alleged to be involved and the facts concerning the alleged conduct in as much detail and specificity as possible, with available documentation, in a written statement addressed to IJCAHPO's Executive Director. The statement should identify by name, address, and telephone number the person making the information known to IJCAHPO and others who may have knowledge of the facts and circumstances concerning the alleged conduct. The complainant may be required to supplement the information provided, or to provide a written complaint, notarized affidavit, release, or other documentation.
2. If a complainant is not available but the Executive Director has reason to believe there may have been a violation of a IJCAHPO rule, the Executive Director may still refer the matter to the Disciplinary Review Committee.
3. The Executive Director shall make an initial determination of the allegations of violation. The Executive Director shall determine whether (a) the allegations fail to state a violation of IJCAHPO's rules, or (b) good cause may exist to deny eligibility or question compliance with IJCAHPO's rules. If the Executive Director determines that the allegations fail to state a violation of IJCAHPO rules, no further action shall be taken and the Board and complainant (if any) shall be

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notified of this decision. Appeals of such decisions by complainants may be made in the manner described in Section VII B and C except that no fees shall be paid and no written decision shall be necessary. The Executive Director may not appeal a decision in a matter where there was no complainant.

4. If the Executive Director determines that a legitimate question of compliance with IJCAHPO rules has been presented, the Executive Director shall transmit the allegations to the Disciplinary Review Committee.

B. Procedures of the Disciplinary Review Committee

1. The Disciplinary Review Committee shall review the allegations. If the Committee determines after such review that the complaint does not justify further inquiry into possible violation of IJCAHPO disciplinary rules, no further action shall be taken. The Board and the complainant (if any) shall be so informed. Appeals of such decisions may be made in the manner described in Section VII B and C except that no fees shall be paid and no written decision shall be necessary. The Executive Director may not appeal a decision in a matter with no complainant.
2. If the Committee finds by majority vote that good cause exists to question whether a violation of a IJCAHPO rule has occurred, the Committee shall transmit a statement of allegations to the applicant or certificant by certified mail, return receipt requested, setting forth the applicable standard alleged to have been violated and a statement:
  - a. Of facts constituting the alleged violation of the standard;
  - b. That the applicant or certificant may request an oral hearing for the disposition of the allegations, with the applicant or certificant bearing his or her own expenses for such matter;
  - c. That the applicant or certificant shall have fifteen (15) days after receipt of the statement to notify IJCAHPO if he or she disputes the allegations and/or requests an oral hearing on the record;
  - d. That the applicant or certificant may attend the hearing with or without the assistance of counsel, may question any witness, and produce evidence on his or her behalf;
  - e. That the truth of allegations or failure to respond may result in sanctions including revocation; and
  - f. That if the applicant or certificant does not dispute the allegations or request a hearing, the applicant

or certificant consents that the Disciplinary Review Committee may render a decision and apply available sanctions. (Available sanctions are set out in VI D.)

3. IJCAHPO will not review such an application for certification until the Disciplinary Review Committee and/or the IJCAHPO Board of Directors renders a final decision on the complaint authorizing staff to proceed with reviewing the application.
4. Where an applicant or certificant has failed to respond to a complaint in the manner provided for above, or does not dispute the allegations or request a hearing, the applicant or certificant consents that the Disciplinary Review Committee may render a decision and apply available sanctions (set out in VI D).

C. Hearing Procedures

If the applicant or certificant disputes the allegations or requests a hearing:

1. The Disciplinary Review Committee shall:
  - a. Schedule a hearing after the request is received, allowing for an adequate period for preparation for the hearing; and
  - b. Send by certified mail, return receipt requested, a Notice of Hearing to the applicant or certificant. The Notice of Hearing shall include a statement of the time and place of the hearing as selected by the Disciplinary Hearing Committee. The applicant or certificant may request modification of the date of the hearing for good cause.
2. The Disciplinary Review Committee shall maintain a verbatim oral or written transcript.
3. IJCAHPO and the applicant or certificant may consult with and be represented by counsel, make opening statements, present documents and testimony, question witnesses, make closing statements, and present written briefs as scheduled by the Disciplinary Review Committee. The extent of this activity is at the complete discretion of the Disciplinary Review Committee.
4. The Disciplinary Review Committee shall determine all matters relating to the hearing. The hearing and related matters shall be determined on the record by majority vote.
5. Formal rules of evidence shall not apply. Relevant evidence may be admitted. Disputed questions shall be determined by majority vote of the Disciplinary Review Committee.



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6. Proof shall be by preponderance of the evidence.
7. Whenever mental or physical disability is alleged, the applicant or certificant may be required to undergo a physical or mental examination at the expense of the applicant or certificant. The report of such an examination shall become part of the evidence considered.
8. The Disciplinary Review Committee shall issue a written decision following the hearing and any briefing. The decision shall contain factual findings, conclusions and any sanctions applied. It shall be mailed promptly by certified mail, return receipt requested, to the applicant or certificant.

## D. Sanctions

Sanctions for violation of any IJCAHPO rule may include one or more of the following:

1. Denial or suspension of eligibility;
2. Re-examination or suspension from the examination process for one (1) year;
3. Revocation;
4. Non-renewal;
5. Censure;
6. Reprimand;
7. Suspension;
8. Training, education, treatment, or other corrective action;
9. Probation for up to five (5) years; and
10. Conditions relating to the above.

A failure to comply with conditions of sanctions (such as corrective action) may result in a re-evaluation of sanctions by the committee issuing the sanctions.

## VII. Appeal Procedures

- A. If the decision of the Disciplinary Review Committee finds that the allegations are not established, no further action on the appeal shall occur and the individual shall be notified.
- B. If the decision rendered by the Disciplinary Review Committee is not favorable to the applicant or certificant, and the applicant or certificant alleges that the decision of the Disciplinary Review Committee was arbitrarily or capriciously rendered, the decision may be appealed to the IJCAHPO Board of Directors. The ground for appeal is limited to only those adverse decisions alleged to have been arbitrarily or capriciously rendered. The applicant or certificant may appeal the adverse determination by

submitting a written appeals statement within thirty (30) days following receipt of the decision of the Disciplinary Review Committee. A fifty dollar (\$50) filing fee must accompany the written appeals statement. This fee may be waived in instances of documented and severe financial hardship. IJCAHPO, through its Executive Director or a designee, may file a written response to the statement of the applicant or certificant.

- C. The IJCAHPO Board of Directors by majority vote shall render a decision on the record below without hearing, although written briefs or other submissions may be submitted at the request and discretion of the IJCAHPO Board of Directors.
- D. The decision of the IJCAHPO Board of Directors shall be rendered in writing following any briefing. The decision shall contain factual findings, conclusions and any sanctions applied and shall be final. (Available sanctions are set out in Section VI D 1-10, above.) The decision shall be transmitted to the applicant or certificant by certified mail, return receipt requested.

## VIII. Summary Procedure

Whenever IJCAHPO determines that there is cause to believe that a threat of immediate and irreparable injury to the health of the public exists, such allegations shall be forwarded to the Disciplinary Review Committee, who shall review the matter immediately by telephone or other expedited notice and hearing procedure. Following such notice and opportunity by the individual to be heard, if the Disciplinary Review Committee determines that a threat of immediate and irreparable injury to the public exists, certification may be suspended for up to sixty (60) days pending a full hearing under the procedures outlined in Section VI.

## IX. Release of Information

- A. All candidate applications, forms, and information are the property of IJCAHPO.
- B. IJCAHPO is not required to return, provide, or permit access to such information.
- C. By virtue of application for and/or receipt of certification, the individual applicant or certificant authorizes IJCAHPO and its officers, directors, agents, employees, committees, committee members, counsel, and others to communicate any and all information relating to any IJCAHPO application, certification, and review thereof including pendency or outcome of disciplinary proceedings to state and federal authorities, employers, other certificants, training programs, and others by any means.

## X. Waiver

The individual applicant or certificant agrees that he or she releases, discharges, and exonerates IJCAPHO, its officers, directors, agents, employees, committees, committee members, counsel, and others for any actions taken in good faith pursuant to IJCAPHO rules, standards, and procedures from any and all liability, including but not limited to liability arising out of (i) the furnishing or inspection of documents, records, and other information, and (ii) any investigation and review of application or certification made by IJCAPHO.

## XI. Consideration of Eligibility

Eligibility and/or certification is considered on the following basis:

- A. In the event of a felony or misdemeanor conviction described in Section IV, a candidate may make application upon exhaustion of appeals and the completion of sentencing (including but not limited to probation, final release from confinement, or parole [if any], whichever is later);
- B. In any other event that has rendered a decision of ineligibility or revocation, a candidate may make application no earlier than one (1) year from the final decision of ineligibility or revocation.

In addition to other facts required by IJCAPHO, such an individual must fully set forth the circumstances of the decision denying eligibility or revoking certification, information concerning all convictions, sentences received, and conditions of probation and parole, as well as all relevant facts and circumstances since the decision relevant to the application. The individual bears the burden of demonstrating by clear and convincing evidence that the individual has been rehabilitated and poses no danger to others.



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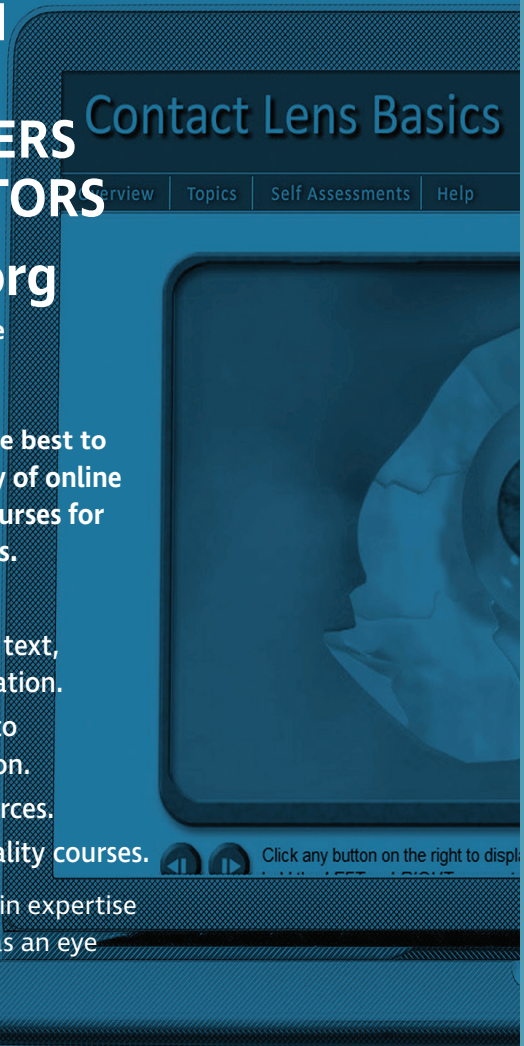
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