

Ethical Considerations in Optometry

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Received 12 March 2025; accepted 7 April 2025

Abstract

Purpose. To consider how ethics would impact the clinical practice of Optometry.

Material and Methods. A review of some of the ethical documents from the optometric profession over the past one hundred years was conducted. Additional literature related to ethics in general and in medicine was also examined.

Results. There is a strong ethical component in health care. This is present in the optometric profession as well. It has evolved over the years as the profession has changed too. Many of the ways this should be incorporated into practice can be taken from the Optometric Oath of the American Optometric Association.

Conclusion. Ethical behavior is part of being a healthcare provider and needs to be a part of everything the optometrist does. Practitioners are responsible for the soul of the profession and should strive to leave it stronger than when they began to practice. Ethical standards are a part of what allows a profession to grow and garner respect.

Keywords

Ethics, optometry, professionalism

Introduction

One of the criteria separating a profession from an occupation or a trade is the establishment by professional associations of ethical standards as one of their many functions.¹

Ethical theories attempt to articulate and justify principles that can be employed as guides for making moral decisions and setting standards for the evaluation of actions and policies.

In effect, they define what it means to act morally and in doing so stipulate in broad ways the duties or obligations that fall upon us. Ethical standards also offer a means to explain and justify actions. If our actions are guided by a particular standard, our behavior should then align with the expectations of the standard. In such cases, we justify our actions by showing that, according to the standard, we had an obligation to do what we did.

History

In 1908, the American Association of Opticians formed a committee to compose a code of ethics. The code of ethics that they drew up and which was subsequently adopted is as follows:

Each member should fully appreciate the responsibilities assumed by him and endeavor by unceasing study to qualify in the important work of ministering to the visual needs of his fellow men.

He should at all times emphasize the fact that optometry is a purely technical profession based upon a comprehensive knowledge of the mechanism of the human eye, the skillful manipulation of instruments for its adequate examination, and their knowledge of the properties of light and the relative effects thereon of lenses.

He should cultivate those sensibilities which permit the formation of standards for the generous appreciation of the work of others and the criticism of his own.

He should discourage the use of titles calculated to mislead or cause confusion in the public mind.

His methods of publicity should rigidly adhere to a dignified and modest statement of fact.

He should value his services commensurate with his ability, special preparation and skill, always welcoming the opportunity to be generous with his knowledge where it is needed, thereby realizing in fullest measure the true success which lies in the consciousness that the world has profited by his work.²

AOA revised Optometric Oath

As time moved forward, the premise remained the same, but the wording evolved as did the organizations. In 2021, the American Optometric Association revised its Optometric Oath to be the following.

With full deliberation, I freely and solemnly pledge that:

I AFFIRM that the health of my patient will be my first consideration.

I WILL practice the art and science of optometry faithfully and conscientiously, and to the fullest scope of my competence.

I WILL uphold and honorably promote by example and action the highest standards, ethics and ideals of my chosen profession and the honor of the degree, Doctor of Optometry, which has been granted me.

I WILL provide professional care for the diverse populations who seek my services, with concern, with compassion and with due regard for their human rights and dignity.

I WILL work to expand access to quality care and improve health equity for all communities.

I WILL place the treatment of those who seek my care above personal gain and strive to see that none shall lack for proper care.

I WILL hold as privileged and inviolable all information entrusted to me in confidence by my patients.

I WILL advise my patients fully and honestly of all which may serve to restore, maintain or enhance their vision and general health.

I WILL strive continuously to broaden my knowledge and skills so that my patients may benefit from all new and efficacious means to enhance the care of human vision.

I WILL share information cordially and unselfishly with my fellow doctors of optometry and other professionals for the benefit of patients and the advancement of human knowledge and welfare.

I WILL do my utmost to serve my community, my country and humankind as a citizen as well as a doctor of optometry.

I HEREBY commit myself to be steadfast in the performance of this my solemn oath and obligation.³

Discussion

Each sentence in the optometric oath can be used as a guide to behavior. When faced with clinical decisions, the overriding thought should be: *“I AFFIRM that the health of my patient will be my first consideration.”* With this perspective, options begin to sort themselves into the proper order and a practitioner does not lose sight of the bigger picture. The overriding concern is the health of the patient!

“I WILL practice the art and science of optometry faithfully and conscientiously, and to the fullest scope of my competence.” No matter how long the day has been, the practitioner owes it to the patient to be fully present, mentally and physically, when providing care for them. Only by being fully engaged with the patient can the optometrist fully understand the subtleties in clinical findings and patient communication.

“I WILL uphold and honorably promote by example and action the highest standards, ethics and ideals of my chosen profession and the honor of the degree, Doctor of Optometry, which has been granted me.” Through practice and in all activities, optometrists should be a positive example for their staff, their patients, their community, and other health care practitioners. When faced with a decision, a consideration might be, “What would the public, my peers, my family, think

of my choice?" This thought would help prevent you from hastily making a questionable or unethical decision.

"I WILL provide professional care for the diverse populations who seek my services, with concern, with compassion and with due regard for their human rights and dignity." It is important when providing patient care to relate beyond the clinical case and see the whole patient. They are more than just a pair of eyes! Those eyes belong to a human being who is part of a family and a larger community. How does the clinical diagnosis affect all these different groups? Understanding the needs of the person results in better communication and better clinical results.

"I WILL work to expand access to quality care and improve health equity for all communities." While much of our time is spent in providing direct patient care, it is important to remember that the greater community can also benefit from your background and expertise. Public health policies and initiative will benefit from the insights you have. These improve the quality of life for others who may never enter your exam room. Many of these discussions take place at professional meetings and in professional associations. It is important for the optometrist to be involved in those discussions and in those groups.

"I WILL place the treatment of those who seek my care above personal gain and strive to see that none shall lack for proper care." Working to improve public health policies and structures improves access to care. Some patients may offer better reimbursement than others, but all are equal when they come to you for care. As mentioned earlier, seeing them as people and not only as patients, helps you relate to their needs in a better way.

"I WILL hold as privileged and inviolable all information entrusted to me in confidence by my patients." To provide competent, comprehensive care, we must fully understand all the health information we can obtain. The patient deserves the respect of knowing that none of this protected health information will be shared with anyone not directly involved in caring for them. They have shared the information in a trusting manner and deserve the respect of treating that information as privileged.

"I WILL advise my patients fully and honestly of all which may serve to restore, maintain or enhance their vision and general health." Treatment plans presented to the patient should offer the best option first but allow for the patient to make an informed decision as to what they believe is in their best interest by advising the patient "fully and honestly of all which may serve to restore, maintain or enhance their vision and general health."

"I WILL strive continuously to broaden my knowledge and skills so that my patients may benefit from all new and efficacious means to enhance the care of human vision." As the science of eye care continues to progress, it is the ethical responsibility of the practitioner to keep up and continue to learn. This is often done through reading peer reviewed journals such as this one or *Optometric Clinical Practice*⁴, among many others. It is also done through interactions and presentations at professional meetings such as the European Academy of Optometry and Optics where peer support and encouragement aids your professional growth.

"I WILL share information cordially and unselfishly with my fellow doctors of optometry and other professionals for the benefit of patients and the advancement of human knowledge and welfare." When one learns of advances in the science of patient care, they are willing to share that with other practitioners so that all may benefit from this information. In sharing the care of a patient with another healthcare practitioner, all pertinent information is communicated so that both practitioners have all the data to make the best decision.

"I WILL do my utmost to serve my community, my country and humankind as a citizen as well as a doctor of optometry." The practitioner must be actively involved in their profession. They need to contribute to the science and participate in the discussions about ways to improve patient care in their community. Almost twenty years ago David Heath, President Emeritus of the State University of New York College of Optometry, wrote "One of the strongest indicators of a profession's maturity and vitality is the degree to which it creates and disseminates knowledge for the benefit of society."⁵ In short, they have an obligation to leave their profession in a better place at the end of their career than it was when they entered it.

Conclusion

Each of these lines in the Optometric Oath serve to remind the optometrist of what is important. They remind the practitioner of the priorities in seeing patients. Students in schools of optometry are administered the oath numerous times before they graduate. It puts other things they learn throughout the curriculum into perspective.

Ethical considerations make us pause and ask, "Why?" "Why do we do things the way we do?" "Is this the best way?" Mulling over these issues while not immersed in addressing them is what the German philosopher Josef Peiper extolled as important to society.⁶ To encourage thinking about some of the more nuanced areas in practice, the American Optometric Association has an Ethics and Values Committee. This committee has published case reports and papers which address some of the concerns a practitioner may have that range from disclosing mistakes to how practitioner burnout may impact patient care. These case reports can be read as part of a provider's professional education to reflect on how to handle a similar situation in their practice.⁷ In a similar vein, the American Medical Association Journal of Ethics has an editorial mission "to help ... all health care professionals make sound ethical decisions in service to patients and society. Founded in 1999, the *AMA Journal of Ethics* explores ethical questions and challenges that students and clinicians confront in their educational and practice careers."⁸

The formation of professional associations and the establishment of ethical standards are two of the items mentioned as contributing to the growth of the optometric profession in the United States.⁹ They set a standard to which the professional could look for guidance and to which others, such as patients, legislators, insurers, etc., could look for confirmation of appropriate skills and behavior. They demonstrate that the profession exists to benefit society.

The need for ethical behavior is probably summed up in the final line of the Optometric Oath. This line indicates a professional's commitment to what they do. That commitment is what drives the profession forward and makes it and the society it serves better. *"I HEREBY commit myself to be steadfast in the performance of this my solemn oath and obligation."* Each professional is responsible for the soul of his or her profession! For that to have meaning optometrists must not only understand the ethics of a situation but must also have the integrity to behave in an ethical manner. For example, it is not sufficient for a student to know that cheating is wrong if they still cheat when it is in their best interest. It is not enough to know that a practitioner should act in the patient's best interest if they do not do so when it best serves themselves. **You** are responsible for the soul of your profession and have the power to make it one of which you can be proud!

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References

- 1 Goss, D. A. (2022). From Spectacle Making Trade to Scholarly Profession. Pacific University Press. Forest Grove, Oregon, pp. 35-36.
- 2 Koetting, R. A. (1997). The American Optometric Association: A History. St. Louis, MO: American Optometric Association, pp. 11-12.
- 3 American Optometric Association (2021). <https://www.aoa.org/about-the-aoa/ethics-and-values?sso=y>. Referencing: March 9, 2025.
- 4 Optometric Clinical Practice (2020.) https://athenaeum.uiw.edu/optometric_clinical_practice/vol1/iss1/1/. Referencing: March 9, 2025
- 5 Heath, D. A. (2006). On knowledge management. Optometry, 77, 369-370.
- 6 Pieper, J. (1952). Leisure: The Basis of Culture. Pantheon Books, New York, New York.
- 7 American Optometric Association (2025). <https://eyelearn.aoa.org/learn/catalog/view/9>. Referencing: March 9, 2025.
- 8 American Medical Association (1999) <https://journalofethics.ama-assn.org/home>. Referencing: March 9, 2025.
- 9 Goss, D. A. (2022). From Spectacle Making Trade to Scholarly Profession. Pacific University Press. Forest Grove, Oregon. pp. 61.