

**TEXAS OPTOMETRY BOARD**  
333 GUADALUPE STREET SUITE 2-420  
AUSTIN, TX 78701  
(512) 305-8500 Fax: (512) 305-8501

Continuing Education To Be Considered For Board Approval

**CHECK LIST** (Criteria for course approval: Board Rules 275.1 and 275.2)

Name of Sponsor/Provider: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Phone: \_\_\_\_\_

Name of Speaker(s) \_\_\_\_\_

\_\_\_\_\_

Check all that apply:

- |  |   |
|--|---|
| <input type="checkbox"/> Optometric Organization | <input type="checkbox"/> Contact Lens or Optical Manufacturer           |
| <input type="checkbox"/> College of Optometry    | <input type="checkbox"/> University or Accredited Non-Optometric School |
| <input type="checkbox"/> Individual Provider     | <input type="checkbox"/> COPE Approved. COPE Number: _____              |

Title of Seminar/Course: \_\_\_\_\_

Scheduled Date: \_\_\_\_\_

Course Location (city & state): \_\_\_\_\_

C.E. Hours Requested

General Hours: \_\_\_\_\_ hours

Diagnostic/Therapeutic Hours: \_\_\_\_\_ hours

Professional Responsibility Hours: \_\_\_\_\_ hours (college of optometry only)

Name of Education Chairman: \_\_\_\_\_

The Texas Optometry Act requires that each active optometrist take courses that relate to the use and application of scientific, technical, and clinical advances in subjects relating to the practice of optometry or therapeutic optometry regularly taught in recognized optometric universities and schools, including vision care, vision therapy, and visual training. Only courses approved by the Board may be used to obtain the required continuing education.

Please answer these questions "yes" or "no:"

- \_\_\_\_\_ Is the seminar or course available to all Texas licensees? (If limited for space purposes, criteria of city, county or area may be used). Circle criteria used.
- \_\_\_\_\_ If a fee is charged, is the fee for the course considered reasonable and nondiscriminatory?
- \_\_\_\_\_ Are subjects directly related to optometry?
- \_\_\_\_\_ Have you submitted summaries of courses and resumes of the speakers?
- \_\_\_\_\_ If you are an individual provider, have you supplied a synopsis of the lecture material, and a resume?

The Continuing Education Committee is considering proposing standards that may be similar to that adopted by the Council on Optometric Practitioner Education (COPE), regarding Commercial Support of Continuing Education. Please answer the following questions to provide the CE Committee with information to assist with this consideration.

- \_\_\_\_\_ Is a fee charged to attend the course? If the answer is "no," please answer "yes" or "no" to the following questions:
  - \_\_\_\_\_ Is the course designed or intended to market, promote, or endorse a product or service?
  - \_\_\_\_\_ Is the course taught by a presenter directly paid to present the course by an organization that sells, manufactures or markets drugs, equipment or medical devices?
  - \_\_\_\_\_ Is the course designed or intended primarily to solicit referrals from attendees?
  - \_\_\_\_\_ Is a complimentary meal provided with the course?
  - \_\_\_\_\_ Is the monetary value of the course more than \$100?