

## Re-Opening Guidelines for Scleral Lenses

May 19<sup>th</sup>, 2020

The Scleral Lens Education Society recommends the following guidelines for re-opening as it pertains to scleral lens patient care.

### Physical Distancing

According to the United States Centers for Disease Control and Prevention (CDC), it is recommended that patients and staff maintain six feet of distance between each other when practical.

- Establish an appropriate timeframe between patient appointments to limit the number of patients in the office at one time.
- When possible, limit patient movement throughout the office. Allow for lens settling in the exam room if possible. For prolonged settling times, designate a “clean zone” for patients to use that allows for six feet of physical distance.
- Offer telehealth or phone consultations when appropriate.
- When possible, patients should only be accompanied into the waiting room or exam room by necessary personnel, including:
  - Parent or guardian if under the age of 18
  - Translators
  - Caregivers

### Personal Protective Equipment (PPE)

- All scleral lens practitioners and staff members should adhere to the guidelines set forth by their state governments and respective Boards of Optometry. This should include, but may not require, wearing surgical masks, protective eyewear, and gloves when interacting directly with patients.
- Scleral lens practitioners and staff members should wash hands before and after each patient encounter.
- Any gloves, which are utilized during patient care, should be properly removed and disposed of after each patient encounter.
- It is recommended that patients wear a mask while in the office, but may not be required by state or local government.
- Offices should differentiate clean areas (where PPE is put on) from potentially contaminated area (where PPE is removed), and offices should clean, disinfect and properly maintain reusable equipment and PPE.
- When possible, a barrier shield should be used around testing equipment or the lens application and removal training station.

### Disinfection

#### Diagnostic Lenses

- Wash and clean hands prior to diagnostic lens disinfection and throughout disinfection process as needed. Gloves are also recommended for handling diagnostic lenses if available and sterility maintained.

- Prepare and maintain a clean and disinfected workspace before, during, and after the disinfection process.
- Maintain a log to monitor each use of the diagnostic lens and each disinfection cycle a trial lens receives.
- If diagnostic lenses are used on a possible or confirmed positive COVID case, the lens should be discarded as biohazard waste.
- AOA/AAO in-office disinfection of multi-patient use diagnostic contact lenses protocol:
  - Place diagnostic lens in non-neutralizing case with 3% hydrogen peroxide
  - Disinfect for 3 hours.
  - Rinse well with multipurpose solution (MPS).
  - Dry trial lens gently with lint-free wipe and store dry in corresponding diagnostic lens case.
  - Diagnostic lens case should be handled appropriately to prevent contamination. If needed it can be cleaned with an alcohol pad or replaced.
- Application and Removal (A/R) Plungers or Tools
  - If possible, patients should be instructed to bring their own A/R plungers.
  - If the patient is unable to bring his or her own A/R plungers, the practitioner may choose to either sell or give patient a new set.
  - For new patients who do not have their own set of plungers, or when plungers must be provided by office, disinfection is required after each use.
    - If an autoclave is available, autoclaving can be used.
    - Plungers can be soaked in 3% hydrogen peroxide for 3 hours (must be fully submerged).
    - Rinse thoroughly with sterile saline or MPS and dry with lint free wipe.

### **Scleral Lens Protocols**

- Existing scleral lens patients should apply and remove their own lenses in a designated, disinfected workspace using their own A/R plungers, when possible.
- For new or inexperienced scleral lens patients, the practitioner may apply or remove the lenses but should be wearing the appropriate PPE.
- Scleral lens application and removal training.
  - It is recommended the instructor wear a mask, protective eyewear or face shield and gloves. In lieu of gloves, hands will be washed with soap and water for at least 20 seconds prior to AND after interaction with the patient.
  - If possible, a physical barrier between the patient and the instructor is recommended.
  - New A/R plungers or tools must be used for each training session.
  - The entire station including solutions, mirrors, and table surfaces must be disinfected at the conclusion of each training session.
- All patients will receive a new lens case and educational materials on COVID-19 infection control with scleral lens usage.
- Scleral lens staff should wear masks and gloves when handling diagnostic lenses.
- Disinfection of diagnostic lenses will be performed in accordance with the recommendations of the AOA/AAO.
- Scleral lenses will be shipped direct to the patient when possible.

### **Patient Education**

#### At Home Care

- Always wash and dry hands prior to handling lenses for application, removal, and/or cleaning and disinfection. Repeat hand washing after as well.
  - Wash hands thoroughly with soap for at least 30 seconds.
  - Dry with an unused paper towel and dispose.
- Clean and disinfect your scleral lenses nightly as instructed by your prescribing doctor.
  - If you are unclear of the correct cleaner/disinfectant or are unable to obtain the previously prescribed solutions, contact your provider for further guidance.
- Do not “top off” any solution.
  - Always use fresh solution when placing lenses in contact lens case.
  - Always dispose of the old solutions when lenses are removed.
- Replace lens cases and solution regularly.
  - Lens cases should be replaced every 1-3 months.
    - “PROSE cases” do not need to be replaced monthly but catalyst should be replaced every 2 months.
  - Multi-dose preservative free saline bottles should be replaced every 2 weeks or sooner.
    - Unit-dose preservative free saline should be discarded within 24-hours after opening.
- A/R plungers or tools should be dried thoroughly, wiped with an alcohol pad and left to air dry in a safe, sanitary area after each use.
  - Make sure there is no residual liquid inside the plunger after use.
  - Plungers should be replaced every 6 months.
- DO NOT USE ANY TAP WATER ON YOUR SCLERAL LENSES, CASES, OR A/R TOOLS.

#### Illness or Positive Diagnosis of COVID-19

- If the patient experiences any COVID-19 related symptoms or has tested positive for COVID-19, the following is recommended:
  - Discontinue lens wear until symptoms resolve.
    - Those with medically necessary scleral lenses should contact their prescribing doctor to determine if discontinuing lens wear is appropriate.
    - Regular soft contact lenses should be disposed of safely. Use new lenses once symptoms have ceased.
    - Medically necessary contact lenses (scleral, corneal gas permeable, custom soft, or hybrid lenses) should be disinfected and stored appropriately. Consider getting new lenses; contact your scleral lens practitioner for further instructions.
  - Safely dispose of and replace plungers, cases and other tools.
- ALWAYS FOLLOW THE LENS CARE RECOMMENDATIONS OF YOUR SCLERAL LENS PRACTITIONER.