

(2) "REPLACEMENT CONTACT LENS PRESCRIPTION" MEANS A PRESCRIPTION PREPARED BY A LICENSED OPTOMETRIST CONTAINING THE INFORMATION SPECIFIED IN THIS SECTION AND WRITTEN EXPRESSLY FOR THE PURPOSE OF ~~DUPLICATING~~ PROVIDING LENSES WHICH HAVE ALREADY BEEN PROPERLY FITTED.

(3) "IMMEDIATE FOLLOW-UP CARE" IS THAT PERIOD OF CONTACT LENS FITTING TIME REQUIRED TO REACH A CONTACT LENS PRESCRIPTION THAT IS APPROPRIATE TO THE DOCUMENTED CLINICAL NEEDS OF THE PATIENT.

(B) A LICENSED OPTOMETRIST SHALL ENSURE THAT EACH REPLACEMENT CONTACT LENS PRESCRIPTION THAT THE LICENSED OPTOMETRIST PRESCRIBES FOR CONTACT LENSES:

(1) CONTAINS ALL THE INFORMATION NECESSARY FOR THE REPLACEMENT CONTACT LENS PRESCRIPTION TO BE PROPERLY DISPENSED, INCLUDING BUT NOT LIMITED TO THE:

(I) LENS MANUFACTURER;

(II) TYPE OF LENS;

(III) POWER OF THE LENS;

(IV) BASE CURVE;

(V) LENS SIZE;

(VI) NAME OF THE PATIENT;

(VII) DATE THE PRESCRIPTION WAS GIVEN TO THE PATIENT;

(VIII) NAME AND OFFICE LOCATION OF THE LICENSED OPTOMETRIST WHO WRITES THE REPLACEMENT CONTACT LENS PRESCRIPTION; AND

(IX) EXPIRATION DATE OF THE REPLACEMENT CONTACT LENS PRESCRIPTION; AND

(2) IS REDUCED TO WRITING AND PLACED IN THE PATIENT'S PERMANENT FILE.

(C) (1) (I) AFTER A LICENSED OPTOMETRIST RELEASES THE PATIENT FROM IMMEDIATE FOLLOW-UP CARE, THE PATIENT MAY REQUEST THE REPLACEMENT CONTACT LENS PRESCRIPTION FROM THE LICENSED OPTOMETRIST.

(II) IF, AFTER EXAMINATION, THE PATIENT'S PRESCRIPTION HAS NOT CHANGED SINCE THE LAST EXAMINATION, A LICENSED OPTOMETRIST SHALL COMPLY WITH THE PROVISIONS OF PARAGRAPH (2) OF THIS SUBSECTION WITHOUT REQUIRING THE PATIENT TO PURCHASE CONTACT LENSES OR TO UNDERGO IMMEDIATE FOLLOW-UP CARE.