



UNITED STATES OFFICE OF PERSONNEL MANAGEMENT

Washington, DC 20415

The Director

Wednesday, January 21, 2004

MEMORANDUM FOR: Human Resources Directors

FROM: LEAH M. MEISEL
DEPUTY ASSOCIATE DIRECTOR FOR TALENT AND CAPACITY
POLICY

Subject: Employment of Individuals Who Have Undergone Vision Correction
Procedures

The purpose of this memo is to update and clarify information about employing individuals who have undergone vision correction procedures (e.g., Radial Keratotomy (RK), Automated Lamellar Keratoplasty (ALK), Photorefractive Keratectomy (PRK), and Laser in Situ Keratomileusis (LASIK)). Due to advances in refractive surgery, initial concerns regarding the potential adverse effects of refractive surgery have proven to be statistically insignificant. Such surgery generally produces markedly improved distant vision with minimal complications.

Therefore, you should not automatically disqualify individuals for law enforcement or other safety sensitive/critical work, nor place them on restrictive duty status, simply because they have undergone refractive eye surgery. Instead, you should evaluate, on a case-by-case basis, whether or not the individual has any postoperative complications that may adversely affect safe and efficient job performance.

If the individual has no current postoperative complications, and is able to perform the work safely and efficiently, then the individual should be allowed to resume or be considered for full and non-restricted law enforcement or other safety sensitive/critical work.

We recommend a complete eye examination, performed by either a licensed ophthalmologist or a State licensed and certified optometrist, to identify postoperative complications and aftereffects, including:

- Risk of corneal rupture due to blunt force trauma (with respect to the structural integrity and weakening of the cornea, the level of acceptable risk may be directly related to the number and depth of corneal incisions required to achieve myopic correction);
- Contrast sensitivity;
- Impaired vision with glare;
- Loss of visual acuity since the vision correction surgery was performed; or
- Corneal scarring and infection, etc.

Some postoperative complications are not easily quantifiable using present day technology. To supplement the eye examination, we recommend you consider developing and administering a

brief self-report vision questionnaire that identifies if the individual has experienced any visual changes since their eye surgery. You may want to include questions that yield information about whether the individual has experienced:

- Increased difficulty driving at night;
- Increased difficulty seeing at night;
- Difficulty with focusing on lights at night (which the individual may see as a starburst);
- Difficulty seeing at night due to bright lights;
- Seeing bands of light at night like a halo;
- A need for glasses to drive at night only;
- Increased difficulty distinguishing objects at a distance with similar color or shape, etc.

Please refer to 5 CFR 339, Medical Qualification Determinations, for more information. If you have questions, please contact J. C. Phillip Spottswood, Medical Policy Program Specialist, Recruiting, Examining, and Assessment Group, (202) 606-1389; jcspotsw@opm.gov.