

OSA Recertification

OSA certificants are required to submit a log of 30 surgical cases at the same time their core level is due for recertification. The surgical log is printable at www.jcahpo.org on the Recertification page. For more information about the case log requirement, please refer to page 32. You also have the option of submitting 10 surgical CE credits to substitute for up to 10 surgical cases. JCAHPO approved or AMA CME are acceptable.

Because the OSA sub-specialty is linked to your core level of certification, your first recertification cycle may be shorter than the standard 36 months (three years). Once these two cycles are synchronized, you will be due to apply for recertification in both areas every 36 months.

For example - David is currently a COT who passed the OSA examination on June 15, 2015. His current COT certificate is valid from January 2014 through January 2017. His new OSA certificate will be dated June 2015 through January 2017. After recertifying, his certification cycle for both areas will be January 2017 through January 2020.

Denial of Recertification

If, during the process of applying for recertification, allegations of a violation of the JCAHPO Standards, Procedures, and Sanctions Pertaining to Certification and Recertification are investigated and proven true, this may result in the denial of recertification, either on a temporary or permanent basis, depending on the circumstances. Certificants are expected to fully cooperate with the investigation.

Recertification Appeal Procedures

Any candidate may appeal determinations related to denial of recertification. The appeal must be in writing and received within 30 days of being notified of denial. The appeal should be addressed to the Secretary of Certification and include: a detailed written explanation of the grounds for your appeal, any evidence or documentation to support the reason a decision should be overturned, and the appeal fee. The burden of proof is the responsibility of the applicant.

JCAHPO's Secretary of Certification will submit the appeal to the members of the Appeal Committee for review, and a written notification of the Committee's decision will be mailed in 4 to 6 weeks. If the initial appeal is denied, you may appeal to the JCAHPO Certification Committee within 30 days. The Certification Committee's decision will be final and binding.

Special Consideration for Hardship

Individuals who are unable to complete the recertification requirements due to hardship have an opportunity to request a review of their case. A written request must be submitted to the Secretary of Certification. The request must be postmarked within 30 days of recertification deadline and include detailed supporting documentation regarding the hardship. Examples of hardship include health, natural disasters, and extended active duty with the military.



"Many uncertified AOP have said JCAHPO certification does not make someone an ophthalmic technician. I tell them that may be true. However, JCAHPO certification is proof that you ARE an ophthalmic technician. Prove it to yourself and get certified."

- Sergina Flaherty, COMT, OSC

Content Areas

1. Pre-Operative Preparation of the Patient – 5%

- a. Consent
- b. Intraoperative monitoring

2. Instruments – 25%

- a. Identification
- b. Selection/setup
- c. Maintenance
- d. Sterilization
- e. Sutures/supplies
- f. Function

3. Aseptic Technique – 20%

- a. Scrubbing/gowning/gloving/prepping
- b. Circulating
- c. General Knowledge
- d. Assisting

4. Ophthalmic Anesthesia – 5%

- a. General anesthesia
- b. Local anesthesia
- c. Topical anesthesia

5. Surgical Procedures – 27%

- a. Cataract surgery
- b. Corneal surgery
- c. Glaucoma surgery
- d. Strabismus surgery
- e. Oculo-plastics surgery
- f. Orbital surgery
- g. Lacrimal surgery
- h. Refractive surgery
- i. Retinal surgery
- j. Laser surgery
- k. Other

6. Surgical Complications – 3%

7. Ophthalmic Surgical Pharmacology – 10%

- a. Miotics
- b. Viscoelastics
- c. Enzymes
- d. Mydriatics
- e. Osmotic 9
- f. Narcotics
- g. Other

8. Minor Surgery – 5%

- a. Assisting the surgeon
- b. Instructing the patient

Case Requirements for Ophthalmic Surgical Assisting Recertification

The case requirement is divided into two groups: Categories A and B. Certificants may choose to earn 100 percent of their case requirement from Category A or may choose to earn at least 90 percent of the case log from Category A and the remaining cases from Category B.

Category A (at least 90% or 27 cases)	Retina	<ul style="list-style-type: none"> ♦ Scleral Buckle ♦ Vitrectomy ♦ Membrane removal ♦ Endo laser
	Lens	<ul style="list-style-type: none"> ♦ Cataract extraction +/- IOL ♦ Secondary IOL ♦ IOL exchange ♦ Implantable Contact Lens (ICL)
	Strabismus	<ul style="list-style-type: none"> ♦ Muscle procedure
	Cornea	<ul style="list-style-type: none"> ♦ Penetrating Keratoplasty (PKP) ♦ Lamellar/patch graft ♦ Pterygium with or without conjunctival transplant ♦ Conjunctival autograft ♦ DSAEK (Endothelial Keratoplasty)
	Oculo-Plastics	<ul style="list-style-type: none"> ♦ Dacryocystorhinostomy (DCR) ♦ Levator procedures ♦ Ptosis repair ♦ Orbital decompression ♦ Ectropion & Entropion repair ♦ Lid laceration ♦ Full thickness or partial thickness lid tumor ♦ Endoscopic brow lift ♦ Blepharoplasty ♦ Conjunctivoplasty ♦ Conjunctival tumors
	Glaucoma	<ul style="list-style-type: none"> ♦ Trabeculectomy ♦ Seton procedures
	Other	<ul style="list-style-type: none"> ♦ Scleral patch
Category B (no more than 10% or 3 cases)	Lens	<ul style="list-style-type: none"> ♦ Resposition IOL
	Strabismus	<ul style="list-style-type: none"> ♦ Botulinum toxin injection
	Cornea	<ul style="list-style-type: none"> ♦ Radial Keratotomy (RK) ♦ Automated lamellar keratoplasty (ALK) ♦ Lasik ♦ AK ♦ Excimer laser surgeries (e.g., PRK, PTK) ♦ Conductive Keratoplasty
	Oculo-Plastics	<ul style="list-style-type: none"> ♦ Tarsorrhaphy ♦ Canthal plication ♦ Chalazion ♦ Trichiasis ♦ Temporal artery biopsy ♦ Nasolacrimal duct (NLD) probing
	Retina	<ul style="list-style-type: none"> ♦ Intravitreal injections