**South Carolina General Assembly**

126th Session, 2025-2026

**S. 393**

**STATUS INFORMATION**

General Bill

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Summary: Optometrists

**HISTORY OF LEGISLATIVE ACTIONS**

Date Body Action Description with journal page number

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2/26/2025 Senate Referred to Committee on **Medical Affairs** ([Senate Journal‑page 6](h:\sj\20250226.docx))

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**VERSIONS OF THIS BILL**

[02/26/2025](https://www.scstatehouse.gov/sess126_2025-2026/prever/393_20250226.docx)

A bill

TO AMEND THE SOUTH CAROLINA CODE OF LAWS BY ADDING SECTION 40‑37‑35 SO AS TO PROVIDE THE STATE BOARD OF EXAMINERS IN OPTOMETRY MAY ISSUE RESTRICTED VOLUNTEER MEMBER LICENSES TO OPTOMETRISTS FROM OTHER STATES WHO MEET CERTAIN CRITERIA, AND TO PROVIDE REQUIREMENTS FOR THE SUPERVISION, DURATION, AND REGULATION OF SUCH LICENSES, AMONG OTHER THINGS; BY AMENDING SECTION 40‑37‑10, RELATING TO MEMBERSHIP REQUIREMENTS FOR THE SOUTH CAROLINA BOARD OF EXAMINERS IN OPTOMETRY, SO AS TO PROVIDE ADDITIONAL MEMBERSHIP REQUIREMENTS; BY AMENDING SECTION 40‑37‑20, RELATING TO DEFINITIONS CONCERNING THE REGULATION OF OPTOMETRISTS, SO AS TO REVISE THE DEFINITIONS; BY AMENDING SECTION 40‑37‑30, RELATING TO LICENSING REQUIREMENTS FOR THE PRACTICE OF OPTOMETRY, SO AS TO PROVIDE ADDITIONAL ACTIVITIES THAT CONSTITUTE THE PRACTICE OF OPTOMETRY; BY AMENDING SECTION 40‑37‑40, RELATING TO POWERS AND DUTIES OF THE BOARD, SO AS TO PROVIDE THE BOARD SHALL REQUIRE LICENSED OPTOMETRISTS TO MEET EDUCATIONAL AND COMPETENCE REQUIREMENTS ESTABLISHED BY THE BOARD; BY AMENDING SECTION 40‑37‑245, RELATING TO EXAMINATION REQUIREMENTS FOR LICENSURE BY ENDORSEMENT, SO AS TO ALLOW EXAMINATION EQUIVALENTS AS DETERMINED BY THE BOARD; BY AMENDING SECTION 40‑37‑290, RELATING TO THE PURCHASING, PRESCRIBING, AND ADMINISTERING PHARMACEUTICAL AGENTS BY OPTOMETRISTS, SO AS TO REVISE THE REQUIREMENTS AND LIMIT THE PERMISSIBLE USE OF SUCH MEDICATIONS, AMONG OTHER THINGS; BY AMENDING SECTION 40‑37‑310, RELATING TO REFERRALS FOR TREATMENT OF EYE DISEASES, SO AS TO REMOVE PROVISIONS CONCERNING THE TREATMENT OF GLAUCOMA AND PROVISION OF SURGERY; BY AMENDING SECTION 40‑37‑330, RELATING TO USE OF OPTOMETRISTS’ SERVICES AUTHORIZED FOR AGENCY AND SCHOOL‑REQUIRED EXAMINATIONS, SO AS TO PROVIDE OPTOMETRISTS MAY PROVIDE VISION OR EYE CARE SERVICES AT A SCHOOL IF APPROVED BY THE ADMINISTRATION OF THE INDIVIDUAL SCHOOL; BY AMENDING SECTION 40‑37‑420, RELATING TO PRACTICE REQUIREMENTS CONCERNING CERTAIN LICENSEES, SO AS TO DELETE THE EXISTING PROVISIONS, TO PROVIDE PERSONS LICENSED AS OPHTHALMOLOGISTS IN THIS STATE MAY CONTINUE PRACTICING UNDER CERTAIN REQUIREMENTS EXCEPT THAT SUCH PERSONS LICENSED BEFORE JANUARY 1, 2013, MUST FULFILl CREDENTIALING REQUIREMENTS TO PERFORM CERTAIN TREATMENTS; BY AMENDING SECTION 38‑79‑30, RELATING TO PROVISIONS LIMITING LIABILITY FOR VOLUNTEER HEALTHCARE PROVIDERS UNDER MEDICAL MALPRACTICE INSURANCE LAWS, SO AS TO REMOVE A PROVISION CONCERNING NOTICE REQUIREMENTS TO PATIENTS, AND TO INCLUDE OPTOMETRISTS AMONG THE VOLUNTEERS INCLUDED IN THESE PROVISIONS; BY AMENDING SECTION 44‑30‑310, RELATING TO IMMUNITY FROM LIABILITY FOR FREE HEALTHCARE SERVICES, so as to include volunteer optometrists; AND BY REPEALING SECTION 40‑37‑300 RELATING TO ESTABLISHING PHARMACIES OR SELLING PHARMACEUTICAL AGENTS, and DISPENSING CONTACT LENSES.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Chapter 37, Title 40 of the S.C. Code is amended by adding:

Section 40‑37‑35. (A) The State Board of Examiners in Optometry may issue a restricted volunteer license to an optometrist who:

(1) has held a license issued by the board or the corresponding license as a licensee in good standing in another state that is equivalent to a South Carolina license in regard to scope of practice, education, experience, and training as determined by the board;

(2) has passed an examination as prescribed by the board;

(3) has not failed the corresponding clinical examination of the state that issued the license within the past five years;

(4) has not been the subject of disciplinary action in any jurisdiction; and

(5) has at least five years of clinical practice in the field for which he is seeking the license.

(B) A person holding a restricted volunteer license under this section:

(1) only may practice in clinics prescribed by the board in regulation;

(2) only may treat patients who have no insurance or who are not eligible for financial assistance for optometric services; and

(3) may not receive remuneration directly or indirectly for providing optometric services.

(C) An optometrist with a restricted volunteer license issued under this section shall, every thirty days, review the cases of all patients he or she treated during the preceding thirty‑day period with an optometrist who holds an active license issued by the South Carolina State Board of Examiners in Optometry.

(D) A license issued under this section is valid for two years from the date of issue and must be maintained in accordance with continuing education requirements and procedures established by the board in regulation. The license may be renewed pursuant to procedures established by the board in regulation.

(E)(1) An optometrist who holds a restricted volunteer license issued pursuant to this section is subject to the provisions of this chapter and regulations promulgated pursuant to this chapter except as otherwise provided in this section.

(2) An optometrist holding a volunteer license may not hold any other active license issued under this chapter and regulations promulgated pursuant to this chapter.

(3) An optometrist holding a volunteer license may not be eligible for election to the South Carolina Board of Examiners in Optometry.

SECTION 2. Section 40‑37‑10(A) of the S.C. Code is amended to read:

(A) There is created the South Carolina Board of Examiners in Optometry, which consists of seven members. Five members must be licensed optometrists appointed by the Governor upon nomination by all licensed optometrists in this State through an election conducted by the board. The licensed optometrists eligible for election must be in good standing with the South Carolina Board of Examiners in Optometry, must actively be engaged in the delivery of clinical care to patients in South Carolina, must possess proof of proficiency to engage in the full scope of practice of optometry as determined by the board, and must have been engaged in the practice of optometry for at least five years. The Governor may reject any or all of those nominated upon satisfactory showing of the unfitness of those rejected. If the Governor declines to appoint any of the nominees submitted, additional nominees must be submitted in the same manner as the initial nominees. Vacancies must be filled in the manner of the original appointment for the unexpired portion of the term. Two members of the board must be members of the general public who do not derive their income or support from any optical or opticalophthalmic‑related business and who are not related to an optometrist or a person engaged in an opticalophthalmic‑related business. The members from the general public may be nominated by any individual, group, or association and must be appointed by the Governor in accordance with Chapter 1 of ,Title 40.

SECTION 3. Section 40‑37‑20 of the S.C. Code is amended to read:

Section 40‑37‑20. As used in this chapter:

(1) “Board” means the South Carolina Board of Examiners in Optometry;.

(2) “Optometrist” means a person who practices optometry. An optometrist is also known as an optometric physician and a doctor of optometry.

(3) “Practice of optometry” means the examination, evaluation, diagnosis, treatment, and management of disorders or conditions of the eye and its adjacent and associated structures and their impact on the human body provided by an optometrist within the scope of his or her education, training, and experience and in accordance with this chapter, the ethics of the profession, and applicable law. The practice of optometry also includes the use of medically recognized and appropriate devices, procedures, and technologies used to evaluate, diagnose, treat, and manage the health and visual efficiency of the human eye and its adjacent and associated structures, including the defects of vision and powers necessary to correct them in order to relieve conditions of the vision system, and ocular abnormalities, including diseases, disorders, and dystrophies. This includes, but is not limited to:

(a) prescribing, selling, and adapting lenses, contact lenses, spectacles, eyeglasses, prisms, and ocular devices;

(b) employing vision therapy or orthoptics, sports vision therapy, neuro‑optometric rehabilitation, and low vision rehabilitation;

(c) prescribing or using diagnostic and therapeutic pharmaceutical agents delivered by any route of administration;

(d) performing ophthalmic surgery, as authorized in this section; and

(e) performing in‑office diagnostic testing or ordering appropriate diagnostic lab or imaging tests for conditions that may cause ocular abnormalities.

(4) “Ophthalmic surgery” means a procedure upon the human eye and adjacent and associated structures in which in vivo tissue is injected, cut, burned, frozen, sutured, epilated, vaporized, coagulated, or photodisrupted by the use of surgical instrumentation such as, but not limited to, a scalpel, cryoprobe, laser, electric cautery, or ionizing radiation. Surgical procedures not involving the eye and its adjacent and associated structures are not part of the practice of optometry. The practice of optometry includes the correction and relief of ocular abnormalities by ophthalmic surgical procedures, subject to the exclusions below. The following procedures are excluded from the scope of practice of optometry, except for the preoperative and postoperative care in connection with these procedures:

(a) retinal laser procedures;

(b) penetrating keratoplasty or corneal transplant of any kind;

(c) injection into the vitreous of the eye to treat any macular or retinal disease;

(d) the administration of general, regional, or MAC anesthesia;

(e) LASIK;

(f) corneal implants;

(g) surgery related to removal of the eye from a living human being;

(h) surgery requiring full thickness incision or excision of the cornea or sclera;

(i) surgery requiring incision of the iris and ciliary body, including iris diathermy or cryotherapy;

(j) vitrectomy;

(k) retinal surgery;

(l) surgical extraction of the intraocular or crystalline lens;

(m) surgical implantation of an intraocular lens;

(n) incisional or excisional surgery of the extraocular muscles;

(o) surgery of the eyelid for confirmed malignancies or for incisional mechanical repair;

(p) surgery of the bony orbit, including orbital implants;

(q) incisional or excisional surgery of the lacrimal system; and

(r) surgery requiring full thickness conjunctivoplasty with graft or flap.

(2)(5) “Contact lens” means any device placed in contact with the eye for the purpose of correcting vision, therapy, medicinal delivery, or cosmetic alteration;.

(6) “Vision therapy” means a sequence of neurosensory and neuromuscular activities individually prescribed and monitored by a doctor to develop, rehabilitate and enhance visual skills and processing based on the results of a comprehensive eye examination or consultation. The use of lenses, prisms, filters, occluders, specialized instruments, and computer programs is an integral part of vision therapy. Vision therapy is used to treat ocular motility dysfunctions, non‑strabismic binocular disorders, strabismus, amblyopia, accommodative disorders, visual information processing disorders, and visual sequelae of acquired brain injury.

(3)(7) “Direct supervision” means supervision provided by a licensed optometrist who must:

(a) be present in the department or facility where the supervisee is performing services;

(b) be immediately available to assist the supervisee in the services being performed; and

(c) maintain continued involvement in appropriate aspects of each treatment;.

(4)(8) “Optical supplies” include, but are not limited to, contact lenses, ophthalmic lenses, ophthalmic frames, and low vision aids;.

(5) “Basic certified optometrist” means an optometrist without education or training in the use of pharmaceutical agents and licensed to practice optometry without the use of pharmaceutical agents;

(6) “Diagnostic certified optometrist” means an optometrist educated and trained in the use of pharmaceutical agents for diagnostic purposes only and licensed to practice optometry in conjunction with the use of pharmaceutical agents for diagnostic purposes only;

(7) “Therapeutic certified optometrist” means an optometrist educated and trained in the use of pharmacological agents for diagnostic and therapeutic purposes and licensed to practice optometry with the use of pharmacological agents for diagnostic and therapeutic purposes.

(8)(9) “Operator” means the licensed optometrist, optometric practice, or organization engaged in providing optometric services directly or through persons authorized by law to provide the services.

(10) “Vision screening” means a test or tests used for the intent of detecting potential abnormalities of vision. Vision screenings are also known as vision tests or eye tests. Vision screenings are not synonymous with an eye exam as defined in Section 40‑24‑10. Vision screenings do not result in a diagnosis, treatment, prescription for medication, or prescription for any adapting lenses, contact lenses, spectacles, eyeglasses, prism, or ocular devices. Abnormal findings resulting from a vision screening should result in a referral to a licensed optometrist or a physician licensed pursuant to Chapter 47, Title 40.

(9)(11) “Community foundation” means an organization, lawfully organized and in good standing, that typically focuses on supporting a geographical area by addressing community needs and supporting local nonprofits.

SECTION 4. Section 40‑37‑30(B) of the S.C. Code is amended to read:

(B) A person is deemed to be practicing optometry within the meaning of this chapter if the person:

(1) displays a sign or in any way advertises as an optometrist;

(2) employs any means for the measurement of the powers of vision or the adaptation of lenses for the aid of vision;

(3) uses lenses in the testing of the eye in the sale of spectacles, eyeglasses, or lenses other than lenses actually sold;

(4) examines the human eye by the employment of any subjective or objective physical means to ascertain the presence of defects or abnormal conditions for the purpose of relieving them by the use of lenses, prisms, or other physical or mechanical means;

(5) assesses, diagnoses, treats, or prescribes treatment for conditions of the visual system or manages a patient with vision therapy, visual training, visual rehabilitation, orthoptics or eye exercises or who holds himself out as being able to do so for the rehabilitation and/or treatment of physical, physiological, sensorimotor, neuromuscular or perceptual anomalies of the eyes or vision system or who prescribes or utilizes lenses, prisms, filters, occlusion or other devices for the enhancement, rehabilitation and/or treatment of the visual system or prevention of visual dysfunctions, except under the supervision and management of a licensed optometrist;

(5)(6) practices orthoptics or prescribes contact lenses; or

(6)(7) utilizes pharmaceutical agents for diagnostic and/or therapeutic purposes in the practice of optometry in accordance with this chapter.

SECTION 5. Section 40‑37‑40(A) of the S.C. Code is amended to read:

(A) The board shall:

(1) determine the eligibility of applicants for examination and licensure as optometrists;

(2) prescribe the subjects, character, and manner of licensing examinations;

(3) adopt a code of professional ethics appropriate to the profession of optometry;

(4) evaluate and set criteria for continuing education course hours and programs;

(5) conduct hearings on alleged violations by licensees of this chapter or regulations promulgated under this chapter;

(6) discipline persons licensed under this chapter; and

(7) promulgate regulations in accordance with the South Carolina Administrative Procedures Act; and

(8) require that any licensed optometrist licensed to practice pursuant to this chapter meets the educational and competence criteria established by the board. Evidence of proof of competency shall be determined by the board.

SECTION 6. Section 40‑37‑245(3) of the S.C. Code is amended to read:

(3) satisfactorily passed all required examinations recognized or conducted by the board including, but not limited to, the examination of the National Board of Examiners in Optometry or equivalent as determined by the Board of Examiners;

SECTION 7. Section 40‑37‑290 of the S.C. Code is amended to read:

Section 40‑37‑290. Notwithstanding any other provision of law, an optometrist may purchase, possess, administer, supply, and prescribe, dispense, and sell pharmaceutical agents, including oral and topically applied medications other than Schedule I and II controlled substances as defined in Section 44‑53‑110 except controlled substances that have been reclassified from Schedule III to Schedule II effective on or after October 6, 2014, may continue to be purchased, possessed, administered, supplied, and prescribed, and dispensed by an optometrist, for diagnostic and therapeutic purposes in the practice of optometry. An optometrist only may purchase, possess, administer, prescribe, dispense, and sell these medications for vision correction and the treatment of ocular and ocular adnexal eye disease., except that:

(1) when prescribing oral and topically applied medications, an optometrist is limited to these oral pharmaceutical agents: antihistamines, antimicrobial, antiglaucoma, over‑the‑counter drugs, and analgesics for the treatment of ocular and ocular adnexal eye disease. An optometrist may only prescribe these medications for the treatment of ocular and ocular adnexal eye disease;

(2) when prescribing medications for the treatment of ocular and ocular adnexal disease, documentation in the patient's chart and appropriate consultations and referrals must be in accordance with the standard of care provided for in Section 40‑37‑310(E);

(3) when prescribing analgesics, the prescription must be limited to a seven‑day supply;

(4) when prescribing topical steroids, if after twenty‑one days of treatment it is necessary to continue this medication, the optometrist shall communicate and collaborate with an ophthalmologist;

(5) no medications may be given by injection or intravenously.

SECTION 8. Section 40‑37‑310 of the S.C. Code is amended to read:

Section 40‑37‑310. (A) In the diagnosis and treatment of ocular and ocular adnexal eye disease, documentation in the patient's chart and appropriate consultations and referrals must be in keeping with the standards of care provided for in this section.

(B) In the diagnosis or treatment of eye disease, an optometrist, using judgment and that degree of skill, care, knowledge, and attention ordinarily possessed and exercised by optometrists in good standing under like circumstances, shall refer a patient to an appropriate medical or osteopathic doctor including, but not limited to, corneal, glaucoma, or retinal ophthalmological specialists when additional evaluation or treatment is necessary. However, an optometrist may refer a patient to another optometrist when additional evaluation or treatment is necessary or to a medical or osteopathic doctor as provided for in this section, and an optometrist may refer a patient to another optometrist for the purpose of fitting or dispensing eye glasses, contact lenses, or low vision aids. The South Carolina Board of Examiners in Optometry shall promulgate regulations for the maintenance of records of referrals by optometrists in accordance with this section.

(C) Notwithstanding subsection (B), in treating and managing glaucoma an optometrist must strive to achieve a stable range of intraocular pressures considered unlikely to cause further optic nerve damage in that patient. Once this range of pressures is selected based on conditions presented by the patient, the optometrist must enter this range in the patient's chart. If no measurable progress is achieved in realizing the selected range of pressures within sixty days of initiating treatment, the optometrist shall refer the patient to an ophthalmologist. However, when treating acute angle closure glaucoma, an optometrist immediately shall initiate treatment, after which, the optometrist shall make an appropriate referral to an ophthalmologist.

(D)(C) An optometrist may perform ophthalmic surgery, as defined in this chapter.is prohibited from performing surgery. For purposes of this section surgery includes, but is not limited to, an invasive procedure using instruments that require closure by suturing, clamping, or other similar devices or a procedure in which the presence or assistance of a nurse anesthetist or an anesthesiologist is required. An optometrist is also prohibited from performing laser surgery. However, nothing in this section or any other provision of law may be construed to prohibit an optometrist from removing superficial ocular and ocular adnexal foreign bodies; removal of other foreign bodies must be referred to an ophthalmologist.

(E)(D) An optometrist must be held to the same standard of care as persons licensed under Chapter 47, Title 40, Physicians, Surgeons, and Osteopaths, and shall maintain a minimum of one million dollars in malpractice insurance coverage.

SECTION 9. Section 40‑37‑330 of the S.C. Code is amended by adding:

(F) Nothing in this section may prohibit an optometrist from providing vision or eye care services at a school so long as approved by the individual school administration.

SECTION 10. Section 40‑37‑420 of the S.C. Code is amended to read:

Section 40‑37‑420. (A) An optometrist licensed for basic practice of optometry as of July 1, 2005, may continue to practice under the conditions provided for in this section, and regulations promulgated under this chapter, as of July 1, 2005, until September 30, 2008. A basic certified optometrist may:

(1) employ any means, other than the use of drugs, for the measurement of the powers of vision or the adaptation of lenses for the aid of vision;

(2) in the sale of spectacles, eyeglasses, or lenses, use lenses in the testing of the eye therefor other than lenses actually sold;

(3) examine the human eye by the employment of any subjective or objective physical means, without the use of drugs, to ascertain the presence of defects or abnormal conditions for the purpose of relieving them by the use of lenses, prisms, or other physical or mechanical means;

(4) practice orthoptics or prescribe or fit contact lenses;

(B)(1) An optometrist licensed for diagnostic practice of optometry as of July 1, 2005, may continue to practice under the conditions provided for in this section, and regulations promulgated under this chapter, as of July 1, 2005, until September 30, 2008, if the optometrist has:

(a) complied with the educational requirements promulgated by the board; and

(b) passed a pharmaceutical agent examination which must be approved by the board.

(2) Notwithstanding any other provision of law, a diagnostically certified optometrist may purchase, possess, and administer pharmaceutical agents including pharmaceutical agents for topical application, other than controlled substances as defined in Section 44‑53‑110, for diagnostic purposes in the practice of optometry. For the purposes of this subsection, “pharmaceutical agent” means: anesthetics, mydriatics, cycloplegics, miotics, dyes, and over‑the‑counter drugs. Miotics may be used only pursuant to the following restrictions:

(a) miotics may not be used for treatment purposes;

(b) miotics may be used only for emergency purposes involving the buildup of pressure within the eyeball and immediately upon this emergency use, the optometrist shall refer the patient to an ophthalmologist and file with the South Carolina Board of Examiners in Optometry a written report of the incident in the manner prescribed by the board by regulation; and the South Carolina Board of Examiners in Optometry shall ensure that the quality and quantity of miotics possessed by a diagnostically certified optometrist is consistent with the use of miotics only for emergency purposes involving the buildup of pressure within the eyeball.

(C) After September 30, 2008, no person may practice as an optometrist in this State if the person has not met all requirements of this chapter in effect at that time and as may be amended in the future. A basic and diagnostically licensed optometrist who wishes to be recertified after September 30, 2008, shall conform to the licensing requirements for a therapeutically‑certified optometrist as provided for in regulation.

(D) A licensee under this chapter must indicate his or her category of licensure following his or her name or signature on all professional documents.An optometrist licensed to practice optometry prior to January 1, 2026, may continue to practice under the condition provided for in this section, and regulations promulgated under this chapter. However, an optometrist licensed to practice optometry prior to January 1, 2013, who provides correction and relief of ocular abnormalities by surgical procedures involving surgical adnexa and laser procedures in accordance with this chapter and section 40‑37‑20 shall fulfill credentialing requirements as established by the board.

SECTION 11. Section 38‑79‑30(C) of the S.C. Code is amended to read:

(C) For purposes of this section, a health care healthcare provider includes a dentist maintaining a restricted volunteer license pursuant to Section 40‑15‑177, a practitioner maintaining a special volunteer license pursuant to Section 40‑47‑34, an optometrist who maintains a special volunteer license pursuant to Section 40‑37‑35, and a chiropractor maintaining a special volunteer license pursuant to Section 40‑9‑85.

SECTION 12. Section 44‑30‑310 of the S.C. Code is amended to read:

Section 44‑30‑310. If a health care provider, licensed pursuant to the laws of this State, informs his or her patient in writing, which may include use of an electronic medical record device, before treatment that the treatment to be rendered by the health carehealthcare provider will be provided free of charge, the health carehealthcare provider is not liable for any civil damages for any personal injury as a result of any act or omission by the health carehealthcare provider rendering treatment free of charge or failure to act to provide or arrange for further treatment, except acts or omission amounting to gross negligence or wilful or wanton misconduct. For purposes of this section, a health carehealthcare provider includes a dentist maintaining a restricted volunteer license pursuant to Section 40‑15‑177, a practitioner maintaining a special volunteer license pursuant to Section 40‑47‑34, an optometrist who maintains a special volunteer license pursuant to Section 40‑37‑35, and a chiropractor maintaining a special volunteer license pursuant to Section 40‑9‑85.

SECTION 13. Section 40‑37‑300 of the S.C. Code is repealed.

SECTION 14. This act takes effect upon approval by the Governor.

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