



227268

LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
02/09/2012	.	
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The Committee on Health Regulation (Gaetz) recommended the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause and insert:

Section 1. Subsections (3), (4), and (5) of section 463.002, Florida Statutes, are amended to read:

463.002 Definitions.—As used in this chapter, the term:

(3) (a) "Licensed practitioner" means a person who is a primary health care provider licensed to engage in the practice of optometry under the authority of this chapter.

(b) A licensed practitioner who is not a certified optometrist shall be required to display at her or his place of



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13 practice a sign which states, "I am a Licensed Practitioner, not
14 a Certified Optometrist, and I am not able to prescribe ~~topical~~
15 ocular pharmaceutical agents."

16 (c) All practitioners initially licensed after July 1,
17 1993, must be certified optometrists.

18 (4) "Certified optometrist" means a licensed practitioner
19 authorized by the board to administer and prescribe ~~topical~~
20 ocular pharmaceutical agents.

21 (5) "Optometry" means the diagnosis of conditions of the
22 human eye and its appendages; the employment of any objective or
23 subjective means or methods, including the administration of
24 ~~topical-ocular~~ pharmaceutical agents, for the purpose of
25 determining the refractive powers of the human eyes, or any
26 visual, muscular, neurological, or anatomic anomalies of the
27 human eyes and their appendages; and the prescribing and
28 employment of lenses, prisms, frames, mountings, contact lenses,
29 orthoptic exercises, light frequencies, and any other means or
30 methods, including ~~topical-ocular~~ pharmaceutical agents, for the
31 correction, remedy, or relief of any insufficiencies or abnormal
32 conditions of the human eyes and their appendages.

33 Section 2. Paragraph (g) of subsection (1) of section
34 463.005, Florida Statutes, is amended to read:

35 463.005 Authority of the board.—

36 (1) The Board of Optometry has authority to adopt rules
37 pursuant to ss. 120.536(1) and 120.54 to implement the
38 provisions of this chapter conferring duties upon it. Such rules
39 shall include, but not be limited to, rules relating to:

40 (g) Administration and prescription of ~~topical~~ ocular
41 pharmaceutical agents.



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42 Section 3. Section 463.0055, Florida Statutes, is amended
43 to read:

44 463.0055 Administration and prescription of ~~topical~~ ocular
45 pharmaceutical agents; committee.-

46 (1) (a) Certified optometrists may administer and prescribe
47 ~~topical-ocular~~ pharmaceutical agents as provided in this section
48 for the diagnosis and treatment of ocular conditions of the
49 human eye and its appendages without the use of surgery or other
50 invasive techniques. However, a licensed practitioner who is not
51 certified may use topically applied anesthetics solely for the
52 purpose of glaucoma examinations, but is otherwise prohibited
53 from administering or prescribing ~~topical-ocular~~ pharmaceutical
54 agents.

55 (b) Before a certified optometrist may administer or
56 prescribe oral ocular pharmaceutical agents, the certified
57 optometrist must complete a course and subsequent examination on
58 general and ocular pharmacology which have a particular emphasis
59 on the ingestion of oral pharmaceutical agents and the side
60 effects of those agents. For certified optometrists licensed
61 before January 1, 1990, the course shall consist of 50 contact
62 hours and 25 of those hours shall be Internet-based. For
63 certified optometrists licensed on or after January 1, 1990, the
64 course shall consist of 20 contact hours and 10 of those hours
65 shall be Internet-based. The first course and examination shall
66 be presented by January 1, 2013, and shall thereafter be
67 administered at least annually. The Florida Medical Association
68 and the Florida Optometric Association shall jointly develop and
69 administer a course and examination for such purpose and jointly
70 determine the site or sites for the course and examination.



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71 (2) (a) There is ~~hereby~~ created a committee composed of two
72 certified optometrists licensed pursuant to this chapter,
73 appointed by the Board of Optometry, two board-certified
74 ophthalmologists licensed pursuant to chapter 458 or chapter
75 459, appointed by the Board of Medicine, and one additional
76 person with a doctorate degree in pharmacology who is not
77 licensed pursuant to chapter 458, chapter 459, or this chapter,
78 appointed by the State Surgeon General. The committee shall
79 review requests for additions to, deletions from, or
80 modifications of a formulary of topical ocular pharmaceutical
81 agents for administration and prescription by certified
82 optometrists and shall provide to the board advisory opinions
83 and recommendations on such requests. The formulary of topical
84 ocular pharmaceutical agents shall consist of those topical
85 ~~ocular pharmaceutical~~ agents that are appropriate to treat and
86 diagnose ocular diseases and disorders and that ~~which~~ the
87 certified optometrist is qualified to use in the practice of
88 optometry. The board shall establish, add to, delete from, or
89 modify the formulary by rule. Notwithstanding any provision of
90 chapter 120 to the contrary, the formulary rule shall become
91 effective 60 days from the date it is filed with the Secretary
92 of State.

93 (b) The topical formulary may be added to, deleted from, or
94 modified according to the procedure described in paragraph (a).
95 Any person who requests an addition, deletion, or modification
96 of an authorized topical ~~ocular pharmaceutical~~ agent shall have
97 the burden of proof to show cause why such addition, deletion,
98 or modification should be made.

99 (c) The State Surgeon General shall have standing to



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100 challenge any rule or proposed rule of the board pursuant to s.
101 120.56. In addition to challenges for any invalid exercise of
102 delegated legislative authority, the administrative law judge,
103 upon such a challenge by the State Surgeon General, may declare
104 all or part of a rule or proposed rule invalid if it:

105 1. Does not protect the public from any significant and
106 discernible harm or damages;

107 2. Unreasonably restricts competition or the availability
108 of professional services in the state or in a significant part
109 of the state; or

110 3. Unnecessarily increases the cost of professional
111 services without a corresponding or equivalent public benefit.

112

113 However, there shall not be created a presumption of the
114 existence of any of the conditions cited in this subsection in
115 the event that the rule or proposed rule is challenged.

116 (d) Upon adoption of the topical formulary required by this
117 section, and upon each addition, deletion, or modification to
118 the topical formulary, the board shall mail a copy of the
119 amended topical formulary to each certified optometrist and to
120 each pharmacy licensed by the state.

121 (3) In addition to the formulary of topical ocular
122 pharmaceutical agents in subsection (2), there is created a
123 statutory formulary of oral pharmaceutical agents, which include
124 the following agents:

125 (a) The following analgesics, or their generic or
126 therapeutic equivalents, which may not be administered or
127 prescribed for more than 72 hours without consultation with a
128 physician licensed under chapter 458 or chapter 459 who is



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129 skilled in diseases of the eye:
130 1. Tramadol hydrochloride.
131 2. Acetaminophen 300 mg with No. 3 codeine phosphate 30 mg.
132 (b) The following antibiotics, or their generic or
133 therapeutic equivalents:
134 1. Amoxicillin.
135 2. Azithromycin.
136 3. Ciproflaxacin.
137 4. Dicloxacillin.
138 5. Doxycycline.
139 6. Keflex.
140 7. Minocycline.
141 (c) The following antivirals, or their generic or
142 therapeutic equivalents:
143 1. Acyclovir.
144 2. Famciclovir.
145 3. Valacyclovir.
146 (d) The following oral anti-glaucoma agents, or their
147 generic or therapeutic equivalents, which may not be
148 administered or prescribed for more than 72 hours without
149 consultation with a physician licensed under chapter 458 or
150 chapter 459 who is skilled in diseases of the eye:
151 1. Acetazolamide.
152 2. Methazolamide.
153
154 Any oral pharmaceutical agent that is listed in the statutory
155 formulary set forth in this subsection and that is subsequently
156 determined by the United States Food and Drug Administration to
157 be unsafe for administration or prescription shall be considered



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158 to have been deleted from the formulary of oral pharmaceutical
159 agents. The oral pharmaceutical agents on the statutory
160 formulary set forth in this subsection may not otherwise be
161 deleted by the board, the department, or the State Surgeon
162 General.

163 (4)~~(3)~~ A certified optometrist shall be issued a prescriber
164 number by the board. Any prescription written by a certified
165 optometrist for a ~~topical-ocular~~ pharmaceutical agent pursuant
166 to this section shall have the prescriber number printed
167 thereon.

168 Section 4. Subsection (3) of section 463.0057, Florida
169 Statutes, is amended to read:

170 463.0057 Optometric faculty certificate.—

171 (3) The holder of a faculty certificate may engage in the
172 practice of optometry as permitted by this section, but may not
173 administer or prescribe ~~topical~~ ocular pharmaceutical agents
174 unless the certificateholder has satisfied the requirements of
175 ss. 463.0055(1)(b) and s. 463.006(1)(b)4. and 5.

176 Section 5. Subsections (2) and (3) of section 463.006,
177 Florida Statutes, are amended to read:

178 463.006 Licensure and certification by examination.—

179 (2) The examination shall consist of the appropriate
180 subjects, including applicable state laws and rules and general
181 and ocular pharmacology with emphasis on the use ~~topical~~
182 ~~application~~ and side effects of ocular pharmaceutical agents.
183 The board may by rule substitute a national examination as part
184 or all of the examination and may by rule offer a practical
185 examination in addition to the written examination.

186 (3) Each applicant who successfully passes the examination



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187 and otherwise meets the requirements of this chapter is entitled
188 to be licensed as a practitioner and to be certified to
189 administer and prescribe ~~topical ocular~~ pharmaceutical agents in
190 the diagnosis and treatment of ocular conditions.

191 Section 6. Subsections (1) and (2) of section 463.0135,
192 Florida Statutes, are amended, and subsection (10) is added to
193 that section, to read:

194 463.0135 Standards of practice.—

195 (1) A licensed practitioner shall provide that degree of
196 care which conforms to that level of care provided by medical
197 practitioners in the same or similar communities. A certified
198 optometrist shall administer and prescribe oral ocular
199 pharmaceutical agents in a manner consistent with applicable
200 preferred practice patterns of the American Academy of
201 Ophthalmology. A licensed practitioner shall advise or assist
202 her or his patient in obtaining further care when the service of
203 another health care practitioner is required.

204 (2) A licensed practitioner diagnosing angle closure,
205 neovascular, infantile, or congenital forms of glaucoma shall
206 promptly and without unreasonable delay refer the patient to a
207 physician skilled in diseases of the eye and licensed under
208 chapter 458 or chapter 459. In addition, a licensed practitioner
209 shall timely refer any patient who experiences progressive
210 glaucoma due to failed pharmaceutical intervention to a
211 physician who is skilled in diseases of the eye and licensed
212 under chapter 458 or chapter 459.

213 (10) Comanagement of postoperative care shall be conducted
214 pursuant to an established protocol that governs the
215 relationship between the operating surgeon and the optometrist.



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216 The patient shall be informed that either physician will be
217 available for emergency care throughout the postoperative
218 period, and the patient shall consent in writing to the
219 comanagement relationship.

220 Section 7. Subsections (3) and (4) of section 463.014,
221 Florida Statutes, are amended to read:

222 463.014 Certain acts prohibited.-

223 (3) Prescribing, ordering, dispensing, administering,
224 supplying, selling, or giving any ~~systemic~~ drugs for the purpose
225 of treating a systemic disease by a licensed practitioner is
226 prohibited. However, a certified optometrist is permitted to use
227 commonly accepted means or methods to immediately address
228 incidents of anaphylaxis.

229 (4) Surgery of any kind, including the use of lasers, is
230 expressly prohibited. For purposes of this subsection, the term
231 "surgery" means a procedure using an instrument, including
232 lasers, scalpels, or needles, in which human tissue is cut,
233 burned, or vaporized by incision, injection, ultrasound, laser,
234 or radiation. The term includes procedures using instruments
235 that require closing by suturing, clamping, or another such
236 device. Certified optometrists may remove superficial foreign
237 bodies. For the purposes of this subsection, the term
238 "superficial foreign bodies" means any foreign matter that is
239 embedded in the conjunctiva or cornea but which has not
240 penetrated the globe.

241 Section 8. Section 463.0141, Florida Statutes, is created
242 to read:

243 463.0141 Reports of adverse incidents in the practice of
244 optometry.-



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245 (1) Any adverse incident that occurs on or after January 1,
246 2013, in the practice of optometry must be reported to the
247 department in accordance with this section.

248 (2) The required notification to the department must be
249 submitted in writing by certified mail and postmarked within 15
250 days after the occurrence of the adverse incident.

251 (3) For purposes of notification to the department, the
252 term "adverse incident," as used in this section, means an event
253 that is associated in whole or in part with the prescribing of
254 an oral ocular pharmaceutical agent and that results in one of
255 the following:

256 (a) Any condition that requires the transfer of a patient
257 to a hospital licensed under chapter 395;

258 (b) Any condition that requires the patient to obtain care
259 from a physician licensed under chapter 458 or chapter 459,
260 other than a referral or a consultation required under this
261 chapter;

262 (c) Permanent physical injury to the patient;

263 (d) Partial or complete permanent loss of sight by the
264 patient; or

265 (e) Death of the patient.

266 (4) The department shall review each incident and determine
267 whether it potentially involved conduct by the licensed
268 practitioner which may be subject to disciplinary action, in
269 which case s. 456.073 applies. Disciplinary action, if any,
270 shall be taken by the board.

271 Section 9. Subsection (1) of section 483.035, Florida
272 Statutes, is amended to read:

273 483.035 Clinical laboratories operated by practitioners for



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274 exclusive use; licensure and regulation.—

275 (1) A clinical laboratory operated by one or more
276 practitioners licensed under chapter 458, chapter 459, chapter
277 460, chapter 461, chapter 462, chapter 463, or chapter 466,
278 exclusively in connection with the diagnosis and treatment of
279 their own patients, must be licensed under this part and must
280 comply with the provisions of this part, except that the agency
281 shall adopt rules for staffing, for personnel, including
282 education and training of personnel, for proficiency testing,
283 and for construction standards relating to the licensure and
284 operation of the laboratory based upon and not exceeding the
285 same standards contained in the federal Clinical Laboratory
286 Improvement Amendments of 1988 and the federal regulations
287 adopted thereunder.

288 Section 10. Subsection (7) of section 483.041, Florida
289 Statutes, is amended to read:

290 483.041 Definitions.—As used in this part, the term:

291 (7) "Licensed practitioner" means a physician licensed
292 under chapter 458, chapter 459, chapter 460, ~~or~~ chapter 461, or
293 chapter 463; a dentist licensed under chapter 466; a person
294 licensed under chapter 462; or an advanced registered nurse
295 practitioner licensed under part I of chapter 464; or a duly
296 licensed practitioner from another state licensed under similar
297 statutes who orders examinations on materials or specimens for
298 nonresidents of the State of Florida, but who reside in the same
299 state as the requesting licensed practitioner.

300 Section 11. Subsection (5) of section 483.181, Florida
301 Statutes, is amended to read:

302 483.181 Acceptance, collection, identification, and



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303 examination of specimens.-

304 (5) A clinical laboratory licensed under this part must
305 accept a human specimen submitted for examination by a
306 practitioner licensed under chapter 458, chapter 459, chapter
307 460, chapter 461, chapter 462, chapter 463, s. 464.012, or
308 chapter 466, if the specimen and test are the type performed by
309 the clinical laboratory. A clinical laboratory may only refuse a
310 specimen based upon a history of nonpayment for services by the
311 practitioner. A clinical laboratory shall not charge different
312 prices for tests based upon the chapter under which a
313 practitioner submitting a specimen for testing is licensed.

314 Section 12. Subsection (4) of section 766.102, Florida
315 Statutes, is amended to read:

316 766.102 Medical negligence; standards of recovery; expert
317 witness.-

318 (4) (a) The Legislature is cognizant of the changing trends
319 and techniques for the delivery of health care in this state and
320 the discretion that is inherent in the diagnosis, care, and
321 treatment of patients by different health care providers. The
322 failure of a health care provider to order, perform, or
323 administer supplemental diagnostic tests is shall not be
324 actionable if the health care provider acted in good faith and
325 with due regard for the prevailing professional standard of
326 care.

327 (b) The claimant has the burden of proving by clear and
328 convincing evidence that the alleged actions of the health care
329 provider represent a breach of the prevailing professional
330 standard of care in an action for damages based on death or
331 personal injury which alleges that the death or injury resulted



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332 from the failure of a health care provider to order, perform, or
333 administer supplemental diagnostic tests.

334 Section 13. Paragraph (b) of subsection (6) of section
335 766.106, Florida Statutes, is amended to read:

336 766.106 Notice before filing action for medical negligence;
337 presuit screening period; offers for admission of liability and
338 for arbitration; informal discovery; review.-

339 (6) INFORMAL DISCOVERY.-

340 (b) Informal discovery may be used by a party to obtain
341 unsworn statements, the production of documents or things, ~~and~~
342 physical and mental examinations, and ex parte interviews, as
343 follows:

344 1. Unsworn statements.-Any party may require other parties
345 to appear for the taking of an unsworn statement. Such
346 statements may be used only for the purpose of presuit screening
347 and are not discoverable or admissible in any civil action for
348 any purpose by any party. A party desiring to take the unsworn
349 statement of any party must give reasonable notice in writing to
350 all parties. The notice must state the time and place for taking
351 the statement and the name and address of the party to be
352 examined. Unless otherwise impractical, the examination of any
353 party must be done at the same time by all other parties. Any
354 party may be represented by counsel at the taking of an unsworn
355 statement. An unsworn statement may be recorded electronically,
356 stenographically, or on videotape. The taking of unsworn
357 statements is subject to the provisions of the Florida Rules of
358 Civil Procedure and may be terminated for abuses.

359 2. Documents or things.-Any party may request discovery of
360 documents or things. The documents or things must be produced,



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361 at the expense of the requesting party, within 20 days after the
362 date of receipt of the request. A party is required to produce
363 discoverable documents or things within that party's possession
364 or control. Medical records shall be produced as provided in s.
365 766.204.

366 3. Physical and mental examinations.—A prospective
367 defendant may require an injured claimant to appear for
368 examination by an appropriate health care provider. The
369 prospective defendant shall give reasonable notice in writing to
370 all parties as to the time and place for examination. Unless
371 otherwise impractical, a claimant is required to submit to only
372 one examination on behalf of all potential defendants. The
373 practicality of a single examination must be determined by the
374 nature of the claimant's condition, as it relates to the
375 liability of each prospective defendant. Such examination report
376 is available to the parties and their attorneys upon payment of
377 the reasonable cost of reproduction and may be used only for the
378 purpose of presuit screening. Otherwise, such examination report
379 is confidential and exempt from the provisions of s. 119.07(1)
380 and s. 24(a), Art. I of the State Constitution.

381 4. Written questions.—Any party may request answers to
382 written questions, the number of which may not exceed 30,
383 including subparts. A response must be made within 20 days after
384 receipt of the questions.

385 5. Unsworn statements of treating health care providers.—A
386 prospective defendant or his or her legal representative may
387 also take unsworn statements of the claimant's treating health
388 care providers. The statements must be limited to those areas
389 that are potentially relevant to the claim of personal injury or



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390 wrongful death. Subject to the procedural requirements of
391 subparagraph 1., a prospective defendant may take unsworn
392 statements from a claimant's treating physicians. Reasonable
393 notice and opportunity to be heard must be given to the claimant
394 or the claimant's legal representative before taking unsworn
395 statements. The claimant or claimant's legal representative has
396 the right to attend the taking of such unsworn statements.

397 6. Ex parte interviews of treating health care providers.—A
398 prospective defendant or his or her legal representative may
399 interview the claimant's treating health care providers without
400 the presence of the claimant or the claimant's legal
401 representative. If a prospective defendant or his or her legal
402 representative intends to interview a claimant's health care
403 providers, the prospective defendant must provide the claimant
404 with notice of such interview at least 10 days before the date
405 of the interview.

406 Section 14. Section 766.1091, Florida Statutes, is created
407 to read:

408 766.1091 Voluntary binding arbitration; damages.—

409 (1) A health care provider licensed under chapter 458,
410 chapter 459, chapter 463, or chapter 466; any entity owned in
411 whole or in part by a health care provider licensed under
412 chapter 458, chapter 459, chapter 463, or chapter 466; or any
413 health care clinic licensed under part X of chapter 400, and a
414 patient or prospective patient, may agree in writing to submit
415 to arbitration any claim for medical negligence which may
416 currently exist or may accrue in the future and would otherwise
417 be brought pursuant to this chapter. Any arbitration agreement
418 entered into pursuant to this section shall be governed by



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419 chapter 682.

420 (2) Any arbitration agreement entered into pursuant to
421 subsection (1) may contain a provision that limits the available
422 damages in an arbitration award.

423 Section 15. Subsection (21) of section 893.02, Florida
424 Statutes, is amended to read:

425 893.02 Definitions.—The following words and phrases as used
426 in this chapter shall have the following meanings, unless the
427 context otherwise requires:

428 (21) "Practitioner" means a physician licensed pursuant to
429 chapter 458, a dentist licensed pursuant to chapter 466, a
430 veterinarian licensed pursuant to chapter 474, an osteopathic
431 physician licensed pursuant to chapter 459, a naturopath
432 licensed pursuant to chapter 462, a certified optometrist
433 licensed under chapter 463, or a podiatric physician licensed
434 pursuant to chapter 461, provided such practitioner holds a
435 valid federal controlled substance registry number.

436 Section 16. Subsection (1) of section 893.05, Florida
437 Statutes, is amended to read:

438 893.05 Practitioners and persons administering controlled
439 substances in their absence.—

440 (1) A practitioner, in good faith and in the course of his
441 or her professional practice only, may prescribe, administer,
442 dispense, mix, or otherwise prepare a controlled substance, or
443 the practitioner may cause the same to be administered by a
444 licensed nurse or an intern practitioner under his or her
445 direction and supervision only. A veterinarian may so prescribe,
446 administer, dispense, mix, or prepare a controlled substance for
447 use on animals only, and may cause it to be administered by an



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448 assistant or orderly under the veterinarian's direction and
449 supervision only. A certified optometrist licensed under chapter
450 463 may not administer or prescribe pharmaceutical agents in
451 Schedule I or Schedule II of the Florida Comprehensive Drug
452 Abuse Prevention and Control Act.

453 Section 17. This act shall take effect July 1, 2012.

454
455 ===== T I T L E A M E N D M E N T =====

456 And the title is amended as follows:

457 Delete everything before the enacting clause
458 and insert:

459 A bill to be entitled
460 An act relating to health care; amending s. 463.002,
461 F.S.; conforming provisions to changes made by the
462 act; amending s. 463.005, F.S.; authorizing the Board
463 of Optometry to adopt rules for the administration and
464 prescription of ocular pharmaceutical agents; amending
465 s. 463.0055, F.S.; authorizing certified optometrists
466 to administer and prescribe pharmaceutical agents
467 under certain circumstances; requiring that a
468 certified optometrist complete a course and subsequent
469 examination on general and ocular pharmacology;
470 providing requirements for the course; requiring that
471 the Florida Medical Association and the Florida
472 Optometric Association jointly develop and administer
473 the course and examination; revising qualifications of
474 certain members of the formulary committee; providing
475 for a formulary of topical ocular pharmaceutical
476 agents which the committee may modify; specifying the



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477 agents that make up the statutory formulary of oral
478 pharmaceutical agents; authorizing the deletion of an
479 oral pharmaceutical agent listed in the statutory
480 formulary under certain circumstances; prohibiting the
481 board, the Department of Health, or the State Surgeon
482 General from deleting an oral pharmaceutical agent
483 listed in the statutory formulary; amending ss.
484 463.0057 and 463.006, F.S.; conforming provisions to
485 changes made by the act; amending s. 463.0135, F.S.;
486 requiring that a certified optometrist administer and
487 prescribe oral ocular pharmaceutical agents in a
488 certain manner; requiring that a licensed practitioner
489 who diagnoses a patient who has a neovascular form of
490 glaucoma or progressive glaucoma immediately refer the
491 patient to a physician who is skilled in the diseases
492 of the eye; requiring that comanagement of
493 postoperative care be conducted pursuant to an
494 established protocol; requiring that the patient be
495 informed that a physician will be available for
496 emergency care throughout the postoperative period;
497 requiring that the patient consent in writing to the
498 comanagement relationship; amending s. 463.014, F.S.;
499 revising certain prohibited acts regarding an
500 optometrist conducting surgery and dispensing,
501 administering, ordering, supplying, or selling certain
502 drugs; creating s. 463.0141, F.S.; requiring that
503 adverse incidents in the practice of optometry be
504 reported to the Department of Health; providing
505 requirements for notifying the department of an



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506 adverse incident; providing a definition; requiring
507 that the department review each incident and determine
508 whether it involved conduct that is subject to
509 disciplinary action; requiring that the Board of
510 Optometry take disciplinary action if necessary;
511 amending s. 483.035, F.S., relating to licensure and
512 regulation of clinical laboratories operated by
513 practitioners for exclusive use; providing
514 applicability to clinical laboratories operated by
515 practitioners licensed to practice optometry; amending
516 s. 483.041, F.S.; revising the definition of the term
517 "licensed practitioner" to include a practitioner
518 licensed under ch. 463, F.S.; amending s. 483.181,
519 F.S.; requiring clinical laboratories to accept human
520 specimens submitted by practitioners licensed to
521 practice under ch. 463, F.S.; amending s. 766.102,
522 F.S.; providing that the claimant has the burden of
523 proving by clear and convincing evidence that the
524 actions of a health care provider represented a breach
525 of the prevailing professional standard of care in an
526 action for damages based on death or personal injury
527 which alleges that the death or injury resulted from
528 the failure of a health care provider to order,
529 perform, or administer supplemental diagnostic tests;
530 amending s. 766.106, F.S.; authorizing a prospective
531 defendant to obtain informal discovery by conducting
532 ex parte interviews of treating health care providers;
533 requiring advance notice to the claimant of an ex
534 parte interview; creating s. 766.1091, F.S.;



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535 authorizing a health care provider or health care
536 clinic and a patient or prospective patient to agree
537 to submit a current or future claim of medical
538 negligence to arbitration; requiring that the
539 arbitration agreement be governed by ch. 682, F.S.;
540 authorizing the arbitration agreement to contain a
541 provision that limits an award of damages; amending s.
542 893.02, F.S.; revising the definition of the term
543 "practitioner" to include certified optometrists for
544 purposes of the Florida Comprehensive Drug Abuse
545 Prevention and Control Act; amending s. 893.05, F.S.;
546 prohibiting certified optometrists from administering
547 and prescribing certain controlled substances;
548 providing an effective date.