By Representatives Sobel, Jones, Peaden, Lynn, Detert, Bush, Barreiro, Cantens, Farkas, Hart and Prieguez

A bill to be entitled 1 2 An act relating to expert witnesses in medical 3 negligence actions; amending s. 766.102, F.S.; providing requirements for expert witness 4 5 testimony in actions based on medical negligence; providing an effective date. 6 7 8 Be It Enacted by the Legislature of the State of Florida: 9 Section 1. Section 766.102, Florida Statutes, 1998 10 11 Supplement, is amended to read: 12 766.102 Medical negligence; standards of recovery.--13 (1) In any action for recovery of damages based on the death or personal injury of any person in which it is alleged 14 that such death or injury resulted from the negligence of a 15 health care provider as defined in s. 408.701(13)s. 16 768.50(2)(b), the claimant shall have the burden of proving by 17 the greater weight of evidence that the alleged actions of the 18 health care provider represented a breach of the prevailing 19 professional standard of care for that health care provider. 20 21 The prevailing professional standard of care for a given 22 health care provider shall be that level of care, skill, and treatment which, in light of all relevant surrounding 23 circumstances, is recognized as acceptable and appropriate by 24 reasonably prudent similar health care providers. 25 26 (2) A person may not give expert testimony concerning 27 the prevailing professional standard of care unless that 28 person is a licensed health care provider and meets the 29 following criteria: 30 If the party against whom or on whose behalf the testimony is offered is a specialist, the expert witness must:

- 1. Specialize in the same specialty as the party against whom or on whose behalf the testimony is offered; or
- 2. Specialize in a similar specialty that includes the performance of the procedure that is the subject of the complaint and have prior experience treating similar patients.
- (b) During the year immediately preceding the date of the occurrence that is the basis for the action, the expert witness must have devoted at least 40 percent of his or her professional time to:
- 1. The active clinical practice of the same health profession as the health care provider against whom or on whose behalf the testimony is offered and, if that health care provider is a specialist, the active clinical practice of the same specialty or a similar specialty that includes the performance of the procedure that is the subject of the action and have prior experience treating similar patients;
- 2. The instruction of students in an accredited health professional school or accredited residency program in the same health profession in which the health care provider against whom or on whose behalf the testimony is offered, and if that health care provider is a specialist, an accredited health professional school or accredited residency or clinical research program in the same specialty; or
- 3. A clinical research program that is affiliated with an accredited medical school or teaching hospital and that is in the same health profession as the health care provider against whom or on whose behalf the testimony is offered and, if that health care provider is a specialist, a clinical research program that is affiliated with an accredited health professional school or accredited residency or clinical research program in the same specialty.

(3) Notwithstanding subsection (2), if the health care provider against whom or on whose behalf the testimony is offered is a general practitioner, the expert witness, during the year immediately preceding the date of the occurrence that is the basis for the action, must have devoted a majority of his or her professional time to:

- (a) Active clinical practice as a general
 practitioner;
- (b) Instruction of students in an accredited health professional school or accredited residency program in the general practice of medicine; or
- (c) A clinical research program that is affiliated with an accredited medical school or teaching hospital and that is in the general practice of medicine.
- (4) Notwithstanding subsection (2), a physician licensed under chapter 458 or chapter 459 who qualifies as an expert under the section and who by reason of active clinical practice or instruction of students has knowledge of the applicable standard of care for nurses, nurse practitioners, certified registered nurse anesthetists, certified registered nurse midwives, physician assistants, or other medical support staff may give expert testimony in a medical malpractice action with respect to the standard of care of such medical support staff.
- (5) In an action alleging medical malpractice, an expert witness may not testify on a contingency fee basis.
- (6) This section does not limit the power of the trial court to disqualify an expert witness on grounds other than the qualifications in this section.
- (7) Notwithstanding subsection (2), in a medical
 malpractice action against a hospital or other health care or

medical facility, a person may give expert testimony on the appropriate standard of care as to administrative and other nonclinical issues if the person has substantial knowledge, by virtue of his or her training and experience, concerning the standard of care among hospitals, or health care or medical facilities of the same type as the hospital, health facility, or medical facility whose actions or inactions are the subject of this testimony and which are located in the same or similar communities at the time of the alleged act giving rise to the cause of action.

(2)(a) If the health care provider whose negligence is claimed to have created the cause of action is not certified by the appropriate American board as being a specialist, is not trained and experienced in a medical specialty, or does not hold himself or herself out as a specialist, a "similar health care provider" is one who:

- 1. Is licensed by the appropriate regulatory agency of this state;
- 2. Is trained and experienced in the same discipline or school of practice; and
 - 3. Practices in the same or similar medical community.
- (b) If the health care provider whose negligence is claimed to have created the cause of action is certified by the appropriate American board as a specialist, is trained and experienced in a medical specialty, or holds himself or herself out as a specialist, a "similar health care provider" is one who:
- 28 1. Is trained and experienced in the same specialty;
 29 and
- 2. Is certified by the appropriate American board in the same specialty.

5

6

However, if any health care provider described in this paragraph is providing treatment or diagnosis for a condition which is not within his or her specialty, a specialist trained in the treatment or diagnosis for that condition shall be considered a "similar health care provider."

7 8 9

(c) The purpose of this subsection is to establish a relative standard of care for various categories and classifications of health care providers. Any health care provider may testify as an expert in any action if he or she:

10 11

1. Is a similar health care provider pursuant to paragraph (a) or paragraph (b); or

12 13

14

15

16

17

18

19 20

21

2. Is not a similar health care provider pursuant to paragraph (a) or paragraph (b) but, to the satisfaction of the court, possesses sufficient training, experience, and knowledge as a result of practice or teaching in the specialty of the defendant or practice or teaching in a related field of medicine, so as to be able to provide such expert testimony as to the prevailing professional standard of care in a given field of medicine. Such training, experience, or knowledge must be as a result of the active involvement in the practice or teaching of medicine within the 5-year period before the incident giving rise to the claim.

22 23

24

25 26

27

28

29

30

 $(8)\frac{(3)}{(3)}$ (a) If the injury is claimed to have resulted from the negligent affirmative medical intervention of the health care provider, the claimant must, in order to prove a breach of the prevailing professional standard of care, show that the injury was not within the necessary or reasonably foreseeable results of the surgical, medicinal, or diagnostic procedure constituting the medical intervention, if the 31 intervention from which the injury is alleged to have resulted

3

4 5

6 7

8

9

10 11

12 13

14

15 16

17

18

19 20

21 22

23

24

25 26

27

28

29

30

was carried out in accordance with the prevailing professional standard of care by a reasonably prudent similar health care provider.

The provisions of this subsection shall apply only when the medical intervention was undertaken with the informed consent of the patient in compliance with the provisions of s. 766.103.

(9) (4) The existence of a medical injury shall not create any inference or presumption of negligence against a health care provider, and the claimant must maintain the burden of proving that an injury was proximately caused by a breach of the prevailing professional standard of care by the health care provider. However, the discovery of the presence of a foreign body, such as a sponge, clamp, forceps, surgical needle, or other paraphernalia commonly used in surgical, examination, or diagnostic procedures, shall be prima facie evidence of negligence on the part of the health care provider.

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

 $(11)(a)\frac{(6)(a)}{(a)}$ In any action for damages involving a claim of negligence against a physician licensed under chapter 458, osteopathic physician licensed under chapter 459, 31 podiatric physician licensed under chapter 461, or

chiropractic physician licensed under chapter 460 providing emergency medical services in a hospital emergency department, the court shall admit expert medical testimony only from physicians, osteopathic physicians, podiatric physicians, and chiropractic physicians who have had substantial professional experience within the preceding 5 years while assigned to provide emergency medical services in a hospital emergency department.

- (b) For the purposes of this subsection:
- 1. The term "emergency medical services" means those medical services required for the immediate diagnosis and treatment of medical conditions which, if not immediately diagnosed and treated, could lead to serious physical or mental disability or death.
- 2. "Substantial professional experience" shall be determined by the custom and practice of the manner in which emergency medical coverage is provided in hospital emergency departments in the same or similar localities where the alleged negligence occurred.

Section 2. This act shall take effect upon becoming a law.

Establishes qualification requirements for persons who testify as expert witnesses in actions based on medical negligence. (See bill for details.)