Florida Senate - 2000

By Senator Sebesta

20-197-00 A bill to be entitled 1 2 An act relating to expert witness testimony; amending s. 766.102, F.S.; mandating certain 3 4 qualifications for certain witnesses in medical 5 negligence cases; providing exceptions; 6 prohibiting certain contingency fees for 7 certain expert witnesses; providing for a similar health care provider with regard to 8 9 expert witness qualifications; amending s. 766.202, F.S.; redefining the term "medical 10 expert"; providing for application; providing 11 12 an effective date. 13 14 Be It Enacted by the Legislature of the State of Florida: 15 Section 1. Section 766.102, Florida Statutes, is 16 17 amended to read: 766.102 Medical negligence; standards of recovery.--18 19 (1) In any action for recovery of damages based on the 20 death or personal injury of any person in which it is alleged 21 that such death or injury resulted from the negligence of a 22 health care provider as defined in s. 768.50(2)(b), the claimant shall have the burden of proving by the greater 23 weight of evidence that the alleged actions of the health care 24 25 provider represented a breach of the prevailing professional standard of care for that health care provider. The 26 27 prevailing professional standard of care for a given health 28 care provider shall be that level of care, skill, and treatment which, in light of all relevant surrounding 29 30 circumstances, is recognized as acceptable and appropriate by 31 reasonably prudent similar health care providers.

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| 1 | (2) A person may not give expert testimony concerning |
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| 2 | the prevailing professional standard of care unless that |
| 3 | person is a licensed health care provider and meets the |
| 4 | following criteria: |
| 5 | (a) If the party against whom or on whose behalf the |
| 6 | testimony is offered is a specialist, the expert witness must: |
| 7 | 1. Specialize in the same specialty as the party |
| 8 | against whom or on whose behalf the testimony is offered; or |
| 9 | 2. Specialize in a similar specialty that includes the |
| 10 | evaluation, diagnosis, or treatment of the medical condition |
| 11 | that is the subject of the complaint and have prior experience |
| 12 | treating similar patients. |
| 13 | (b) During the 5 years immediately preceding the date |
| 14 | of the occurrence that is the basis for the action, the expert |
| 15 | witness must have devoted professional time to: |
| 16 | 1. The active clinical practice of the same health |
| 17 | profession as the health care provider against whom or on |
| 18 | whose behalf the testimony is offered and, if that health care |
| 19 | provider is a specialist, the active clinical practice of the |
| 20 | same specialty or a similar specialty that includes the |
| 21 | evaluation, diagnosis, or treatment of the medical condition |
| 22 | or procedure that is the subject of the action and must have |
| 23 | prior experience treating similar patients; |
| 24 | 2. The instruction of students in an accredited health |
| 25 | professional school or accredited residency program in the |
| 26 | same health profession as the health care provider against |
| 27 | whom or on whose behalf the testimony is offered, and if that |
| 28 | health care provider is a specialist, an accredited health |
| 29 | professional school or accredited residency or clinical |
| 30 | research program in the same or similar specialty; or |
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| 1 | 3. A clinical research program that is affiliated with |
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| 2 | an accredited medical school or teaching hospital and that is |
| 3 | in the same health profession as the health care provider |
| 4 | against whom or on whose behalf the testimony is offered and, |
| 5 | if that health care provider is a specialist, a clinical |
| б | research program that is affiliated with an accredited health |
| 7 | professional school or accredited residency or clinical |
| 8 | research program in the same or similar specialty. |
| 9 | |
| 10 | The number of years devoted to professional time may be spent |
| 11 | exclusively in any one of the above three areas or |
| 12 | cumulatively in any combination of the three areas. |
| 13 | (3) Notwithstanding subsection (2), if the health care |
| 14 | provider against whom or on whose behalf the testimony is |
| 15 | offered is a general practitioner, the expert witness, during |
| 16 | the 5 years immediately preceding the date of the occurrence |
| 17 | that is the basis for the action, must have devoted his or her |
| 18 | professional time to: |
| 19 | (a) Active clinical practice as a general |
| 20 | practitioner; |
| 21 | (b) Instruction of students in an accredited health |
| 22 | professional school or accredited residency program in the |
| 23 | general practice of medicine; or |
| 24 | (c) A clinical research program that is affiliated |
| 25 | with an accredited medical school or teaching hospital and |
| 26 | that is in the general practice of medicine. |
| 27 | (4) Notwithstanding subsection (2) , a physician |
| 28 | licensed under chapter 458 or chapter 459 who qualifies as an |
| 29 | expert under the section and who by reason of active clinical |
| 30 | practice or instruction of students has knowledge of the |
| 31 | applicable standard of care for nurses, nurse practitioners, |
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SB 808

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1 certified registered nurse anesthetists, certified registered nurse midwives, physician assistants, or other medical support 2 3 staff may give expert testimony in a medical negligence action with respect to the standard of care of such medical support 4 5 staff. б (5) In an action alleging medical negligence, an 7 expert witness may not testify on a contingency fee basis. 8 (6) Notwithstanding subsection (2), in a medical 9 negligence action against a hospital or other health care or 10 medical facility, a person may give expert testimony on the 11 appropriate standard of care as to administrative and other nonclinical issues if the person has substantial knowledge, by 12 virtue of his or her training and experience, concerning the 13 standard of care among hospitals, or health care or medical 14 facilities of the same type as the hospital, health facility, 15 or medical facility whose actions or inactions are the subject 16 17 of this testimony and which are located in the same or similar 18 communities at the time of the alleged act giving rise to the 19 cause of action. 20 (2)(a) If the health care provider whose negligence is 21 claimed to have created the cause of action is not certified by the appropriate American board as being a specialist, is 22 not trained and experienced in a medical specialty, or does 23 24 not hold himself or herself out as a specialist, a "similar 25 health care provider" is one who: 1. Is licensed by the appropriate regulatory agency of 26 27 this state; 28 2. Is trained and experienced in the same discipline 29 or school of practice; and 30 3. Practices in the same or similar medical community. 31

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1 (b) If the health care provider whose negligence is 2 claimed to have created the cause of action is certified by 3 the appropriate American board as a specialist, is trained and experienced in a medical specialty, or holds himself or 4 5 herself out as a specialist, a "similar health care provider" 6 is one who: 7 1. Is trained and experienced in the same specialty; 8 and 9 2. Is certified by the appropriate American board in 10 the same specialty. 11 However, if any health care provider described in this 12 paragraph is providing treatment or diagnosis for a condition 13 which is not within his or her specialty, a specialist trained 14 in the treatment or diagnosis for that condition shall be 15 considered a "similar health care provider." 16 17 (c) The purpose of this subsection is to establish a relative standard of care for various categories and 18 19 classifications of health care providers. Any health care 20 provider may testify as an expert in any action if he or she: 21 1. Is a similar health care provider pursuant to 22 paragraph (a) or paragraph (b); or 23 2. Is not a similar health care provider pursuant to 24 paragraph (a) or paragraph (b) but, to the satisfaction of the 25 court, possesses sufficient training, experience, and knowledge as a result of practice or teaching in the specialty 26 27 of the defendant or practice or teaching in a related field of medicine, so as to be able to provide such expert testimony as 28 29 to the prevailing professional standard of care in a given 30 field of medicine. Such training, experience, or knowledge 31 must be as a result of the active involvement in the practice 5

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1 2 or teaching of medicine within the 5-year period before the incident giving rise to the claim.

3 (7)(3)(a) If the injury is claimed to have resulted from the negligent affirmative medical intervention of the 4 5 health care provider, the claimant must, in order to prove a б breach of the prevailing professional standard of care, show 7 that the injury was not within the necessary or reasonably foreseeable results of the surgical, medicinal, or diagnostic 8 9 procedure constituting the medical intervention, if the 10 intervention from which the injury is alleged to have resulted 11 was carried out in accordance with the prevailing professional standard of care by a reasonably prudent similar health care 12 13 provider.

(b) 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.

(8) (4) The existence of a medical injury shall not 18 19 create any inference or presumption of negligence against a health care provider, and the claimant must maintain the 20 burden of proving that an injury was proximately caused by a 21 breach of the prevailing professional standard of care by the 22 health care provider. However, the discovery of the presence 23 24 of a foreign body, such as a sponge, clamp, forceps, surgical 25 needle, or other paraphernalia commonly used in surgical, examination, or diagnostic procedures, shall be prima facie 26 27 evidence of negligence on the part of the health care 28 provider.

29 (9)(5) The Legislature is cognizant of the changing 30 trends and techniques for the delivery of health care in this 31 state and the discretion that is inherent in the diagnosis,

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providers.

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care, and treatment of patients by different health care The failure of a health care provider to order,

3 perform, or administer supplemental diagnostic tests shall not be actionable if the health care provider acted in good faith 4 5 and with due regard for the prevailing professional standard б of care.

7 $(10)\frac{(6)}{(6)}(a)$ In any action for damages involving a claim 8 of negligence against a physician licensed under chapter 458, 9 osteopathic physician licensed under chapter 459, podiatric 10 physician licensed under chapter 461, or chiropractic 11 physician licensed under chapter 460 providing emergency medical services in a hospital emergency department, the court 12 shall admit expert medical testimony only from physicians, 13 osteopathic physicians, podiatric physicians, and chiropractic 14 physicians who have had substantial professional experience 15 within the preceding 5 years while assigned to provide 16 17 emergency medical services in a hospital emergency department. (b) For the purposes of this subsection: 18 19 1. The term "emergency medical services" means those medical services required for the immediate diagnosis and 20 21 treatment of medical conditions which, if not immediately diagnosed and treated, could lead to serious physical or 22 mental disability or death. 23 24 2. "Substantial professional experience" shall be 25 determined by the custom and practice of the manner in which emergency medical coverage is provided in hospital emergency 26

27 departments in the same or similar localities where the 28 alleged negligence occurred.

29 (11) However, if any health care provider described in 30 subsection (2), subsection (3), or subsection (4) is providing 31 treatment or diagnosis for a condition that is not within his

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1 or her specialty, a specialist trained in the treatment or 2 diagnosis for that condition shall be considered a "similar 3 health care provider." 4 Section 2. Subsection (5) of section 766.602, Florida 5 Statutes, is amended to read: б 766.202 Definitions.--As used in ss. 766.201-766.212, 7 the term: "Medical expert" means a person duly and regularly 8 (5) 9 engaged in the practice of his or her profession who holds a 10 health care professional degree from a university or college and who meets the requirements of an expert witness under s. 11 766.102 and has had special professional training and 12 experience or one possessed of special health care knowledge 13 14 or skill about the subject upon which he or she is called to 15 testify or provide an opinion. 16 Section 3. This act shall take effect July 1, 2000, 17 and shall apply to any action filed on or after that date. 18 19 20 SENATE SUMMARY Mandates specified qualifications for a person who gives expert testimony relating to the prevailing professional standard of care in medical negligence cases. Provides an 21 22 exception for a person who has substantial knowledge because of experience or training under certain circumstances. Specifies who is a similar health care 23 provider with regard to expert witness qualifications. Defines the term "medical expert." 24 25 26 27 28 29 30 31 8

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