1 A bill to be entitled 2 An act relating to abortion; amending s. 390.0111, F.S.; 3 clarifying the requirement that third trimester abortions be performed in a hospital; providing for disciplinary 4 action for violation of specified provisions; requiring an 5 6 ultrasound be performed on any woman obtaining an 7 abortion; specifying who must perform an ultrasound; 8 providing that the ultrasound must be reviewed with the 9 patient prior to the woman giving informed consent; specifying who must review the ultrasound with the 10 patient; providing that the woman must certify in writing 11 that she declined to review the ultrasound and did so of 12 her own free will and without undue influence; providing 13 an exemption to view the ultrasound for women who are the 14 victims of rape, incest, domestic violence, or human 15 16 trafficking or for women who have a serious medical 17 condition necessitating the abortion; revising requirements for written materials; providing ban on 18 19 physicians seeking waivers of patients' rights to file complaints with regulatory bodies or litigate causes of 20 action; requiring a 24-hour waiting period before a 21 physician may perform or induce an abortion on an adult or 22 on certain minor patients; providing for exception in the 23 24 case of a medical emergency; creating s. 390.01112, F.S.; 25 providing for a women's reproductive bill of rights; 26 requiring abortion clinics and physician abortion providers to adopt a public statement of patients' rights 27 and to treat patients in accordance with that statement;

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providing for required provisions in the statement to patients; requiring clinics and physician abortion providers to provide the information in their statement orally and in writing to patients or their court-appointed quardians; requiring that the statements be provided to staff members; requiring staff training; providing for disciplinary action for violation of patients' bill of rights; providing for immunity to persons filing complaints or testifying in proceedings, subject to certain conditions; creating s. 390.01113, F.S.; creating a private civil action against clinics, nurses, or physicians or violation of a patients' rights; providing persons who may file a cause of action; providing venue; providing for actual and punitive damages; providing for recovery of attorney's fees under certain circumstances; providing criteria for recovering attorney's fees; providing that a cause of action under this section is not a claim for medical malpractice; providing basis for punitive damages and exemptions from other provisions of law governing punitive damages; amending s. 390.01114, F.S.; revising provisions relating to parental notice of abortion; providing exceptions; providing for a cause of action under certain circumstances for parents who do not receive notice; providing for damages for cause of action; requiring appointment of a quardian ad litem for a minor petitioning for a waiver of the notice requirements; specifying factors to be considered in determining whether a minor is sufficiently mature to waive the notice

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requirements; revising provisions relating to confidentiality of hearings; creating s. 390.01117, F.S.; providing for a cause of action in negligence for any injury or death a patient suffers as a result of an abortion; providing for who may bring a cause of action; providing for survival and wrongful death damages if the patient dies; providing for venue; providing for actual and punitive damages; providing for attorney's fees to prevailing party under certain circumstances; providing that remedies are in addition to any other remedies provided for in law; providing criteria for award of attorney's fees; providing burden of proof; providing that a cause of action is not strict liability; providing for legal duties and standards of care for clinics, physicians, or nurses; providing that cause of action under this section is not a medical malpractice claim; providing for exceptions from certain laws; providing standard for award of punitive damages; providing for exceptions from certain laws for punitive damage awards; creating s. 390.01118, F.S.; providing for a statute of limitations and repose for specified causes of action; providing for statute of limitations periods of actions that accrue prior to the effective date of s. 390.01118, F.S.; creating s. 390.01119, F.S.; providing for a misdemeanor of the second degree for fraudulently altering, defacing, or falsifying medical records related to an abortion or for causing any of these offenses; providing for professional licensure actions for the same

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violations; amending s. 390.012, F.S.; providing that agency rules promulgated shall prohibit the performance of abortions in the third trimester other than in a hospital; requiring that the agency rules provide that a clinic or abortion provider cannot request a patient to waive her rights to sue or file a complaint with a disciplinary body; deleting references to conform; requiring ultrasounds for all patients; requiring that live ultrasound images be reviewed and explained to the patient; providing that the patient may decline to review ultrasound images; providing that any language of the act that could be construed as infringing upon a court's powers shall be construed as a request for rule change; providing for severability; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

- Section 1. Subsections (1) and (3) of section 390.0111, Florida Statutes, are amended, and subsection (12) is added to that section, to read:
 - 390.0111 Termination of pregnancies.--
- (1) TERMINATION IN THIRD TRIMESTER; WHEN ALLOWED.--No termination of pregnancy shall be performed on any human being in the third trimester of pregnancy unless:
 - (a) The abortion is performed in a hospital; and
- (b)1. Two physicians certify in writing to the fact that, to a reasonable degree of medical probability, the termination of pregnancy is necessary to save the life or preserve the

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113 health of the pregnant woman; or

- $\frac{2.(b)}{(b)}$ The physician certifies in writing to the medical necessity for legitimate emergency medical procedures for termination of pregnancy in the third trimester, and another physician is not available for consultation.
- (c) Violation of this subsection by a physician constitutes grounds for disciplinary action under s. 458.331 or s. 459.015.
- (3) CONSENTS REQUIRED.--A termination of pregnancy may not be performed or induced except with the voluntary and informed written consent of the pregnant woman or, in the case of a mental incompetent, the voluntary and informed written consent of her court-appointed guardian.
- (a) Except in the case of a medical emergency, consent to a termination of pregnancy is voluntary and informed only if:
- 1. The physician who is to perform the procedure, or the referring physician, has, at a minimum, orally, in person, informed the woman of:
- a. The nature and risks of undergoing or not undergoing the proposed procedure that a reasonable patient would consider material to making a knowing and willful decision of whether to terminate a pregnancy.
- b. The probable gestational age of the fetus, verified by an ultrasound, at the time the termination of pregnancy is to be performed.
- (I) The ultrasound must be performed by the physician who is to perform the abortion or person having documented evidence that he or she has completed a course in the operation of

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ultrasound equipment as prescribed by rule and who is working in conjunction with the physician.

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The person performing the ultrasound must allow the woman to view the live ultrasound images and a physician, or a registered nurse, licensed practical nurse, advanced registered nurse practitioner, or physician assistant working in conjunction with the physician, must contemporaneously review and explain the live ultrasound images to the woman prior to the woman giving informed consent to having an abortion procedure performed. However, this sub-sub-subparagraph does not apply if, at the time the woman schedules or arrives for her appointment to obtain an abortion, a copy of a restraining order, police report, medical record, or other court order or documentation is presented that evidences that the woman is obtaining the abortion because the woman is a victim of rape, incest, domestic violence, or human trafficking or that the woman has been diagnosed with a condition that, on the basis of a physician's good faith clinical judgment, would create a serious risk of substantial and irreversible impairment of a major bodily function if the woman delayed terminating her pregnancy.

(III) The woman has a right to decline to view the ultrasound images after she is informed of her right to view them. If the woman declines to view the ultrasound images, the woman shall complete a form acknowledging that she was offered an opportunity to view her ultrasound but that she rejected that opportunity. The form must also indicate that the woman's decision not to view the ultrasound was not based on any undue influence from any third party to discourage her from viewing

the images and that she declined to view the images of her own free will.

- c. The medical risks to the woman and fetus of carrying the pregnancy to term.
- 2. Printed materials prepared and provided by the department have been provided to the pregnant woman, if she chooses to view these materials, including:
- a. A description of the fetus, including a description of the various stages of development.
- b. A list of <u>entities</u> agencies that offer alternatives to terminating the pregnancy.
- c. Detailed information on the availability of medical assistance benefits for prenatal care, childbirth, and neonatal care.
- 3. The woman acknowledges in writing, before the termination of pregnancy, that the information required to be provided under this subsection has been provided.

Nothing in this paragraph is intended to prohibit a physician from providing any additional information which the physician deems material to the woman's informed decision to terminate her pregnancy.

(b) In the event a medical emergency exists and a physician cannot comply with the requirements for informed consent, a physician may terminate a pregnancy if he or she has obtained at least one corroborative medical opinion attesting to the medical necessity for emergency medical procedures and to the fact that to a reasonable degree of medical certainty the

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continuation of the pregnancy would threaten the life of the pregnant woman. In the event no second physician is available for a corroborating opinion, the physician may proceed but shall document reasons for the medical necessity in the patient's medical records.

- (c) A physician shall not request a patient to waive her ability to either file a complaint with any disciplinary body or to litigate a cause of action based on the care received related to an abortion or a violation of her rights.
- (d) Violation of this subsection by a physician constitutes grounds for disciplinary action under s. 458.331 or s. 459.015. Substantial compliance or reasonable belief that complying with the requirements of informed consent would threaten the life or health of the patient is a defense to any action brought under this paragraph.
- (12) WAITING PERIOD FOR ABORTION. -- No physician shall perform or induce an abortion on a minor patient where notice is not required pursuant to s. 390.01114(3)(b) or on an adult patient unless, at least 24 hours prior thereto, a treating physician has conferred with the patient, or her court-appointed guardian if she is mentally incompetent, pursuant to the requirements set forth in subsection (3). If a medical emergency as defined in s. 390.01114(2)(d) exists, then this subsection shall not apply.
- Section 2. Section 390.01112, Florida Statutes, is created to read:
- 390.01112 Women's reproductive bill of rights.--
- 224 (1) All abortion clinics and physician abortion providers

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shall adopt and make public a statement of the rights of
patients seeking abortions and shall treat such patients in
accordance with the provisions of that statement. The statement
shall assure each patient all of the following:

- (a) That her abortion must be performed by a physician as defined in s. 390.0111.
- (b) That she has the right to know the name, function, and qualifications of each health care provider who is providing medical services to the her. She may request this information from the clinic or physician abortion provider.
- (c) That she is entitled to know the probable gestational age of the fetus at the time the abortion is to be performed.
- (d) That if she is in her third trimester of pregnancy, any abortion must be performed at a hospital.
- (e) That either the patient, or her court appointed guardian if she is mentally incompetent, as set forth in s.

 390.0111(3) is entitled to provide voluntary and informed, written consent, unless a legal exception to obtaining informed consent exists, before an abortion can be performed or induced.
- (f) That if she is a minor, her parent or legal guardian as set forth in s. 390.01114(3) is entitled to receive actual or constructive notice, unless a legal exception to compliance with notice requirements exists, before an abortion can be performed or induced.
- (g) That she is entitled to printed materials containing a description of the fetus, a list of agencies that offer alternatives to terminating the pregnancy, and detailed information on the availability of medical assistance benefits

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for prenatal care, childbirth, and neonatal care.

- (h) That she is entitled to be notified of the medical risks of undergoing or not undergoing the proposed procedure that a reasonable patient would consider material to making a knowing and willful decision of whether to terminate the pregnancy.
- (i) That she is entitled to notification of the medical risks to her and her fetus of carrying the pregnancy to term.
- (j) That the clinic, physician, or physician's office is not allowed to require her to waive her right to either file a complaint with any disciplinary body or to litigate a cause of action based on the care received related to an abortion or a violation of her rights in order to obtain an abortion.
- (k) That she is entitled to have all medical records pertaining to her abortion treatment made, protected, and preserved by the physician abortion provider and clinic, and that copies of her medical records shall be made available to her, a representative of her estate, her court appointed guardian if she is mentally incompetent, or her parent or legal guardian pursuant to s. 390.01114(3)(d), or her legal representative upon request.
- (1) That she is entitled to any and all adequate, necessary, and appropriate health care related to the performance or inducement of an abortion, including any and all adequate, necessary, and appropriate post-abortion recovery and medical care.
- (m) That, if she is in her second trimester of pregnancy, she is entitled to receive care that meets all the quality and

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safety standards set forth in this chapter, including all requirements provided for in s. 390.012(3).

- (n) That she, or her court-appointed guardian if she is mentally incompetent, has the right to refuse medication or treatment and to be informed of the consequences of such decisions. When the medication or treatment is refused, the abortion clinic or physician must notify the patient or her court-appointed guardian of the consequences of such decisions and must document the decision in the patient's medical record. The abortion clinic or physician must continue to provide other services that the patient or her court-appointed guardian agrees to in accordance with the patient's care or treatment needs.
- (o) That she is entitled to have privacy in her treatment and care, and that, except as provided herein or elsewhere in law, her medical records shall remain confidential pursuant to all applicable state and federal laws.
- (p) That she has the right to a prompt and reasonable response to any question she may have regarding her care or treatment.
- (q) That she has the right to be treated courteously, fairly, and with the fullest measure of dignity at all times and upon all occasions.
- (2) All clinics and physician abortion providers shall orally inform patients seeking abortions of their rights as set forth herein and shall provide a copy of the statement as provided in subsection (1) to each patient, or her courtappointed guardian if the patient is mentally incompetent, before performing an abortion. The statement shall itemize each

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of the rights set forth in subsection (1) separately, including each entitlement in s. 390.012 available to a patient obtaining a second trimester abortion. The clinic or physician practicing in a doctor's office shall provide a copy of the patients' bill of reproductive rights to each staff member of the clinic or physician's office. Each clinic or physician shall prepare a written plan and provide appropriate staff training to implement the provisions of this section. The written statement of rights must include a statement that a patient may file a complaint with the agency or department. The statement must be in boldfaced, 14-point type and shall include the address and telephone number of the agency or department.

- (3) Any violation of a patient's rights as set forth in this section by a clinic shall constitute grounds for action by the agency under the provisions of ss. 390.012, 408.813, 408.814, and 408.815. Any violation of a patient's rights as set forth in this section by a physician shall constitute grounds for disciplinary action under s. 458.331 or s. 459.015.
- (4) Any person who submits or reports a complaint concerning a suspected violation of the patient's rights or concerning services or conditions in a clinic or physician's office or who testifies in any administrative or judicial proceeding arising from such complaint shall have immunity from any criminal or civil liability therefor, unless that person has committed perjury in his or her testimony or acted in bad faith or with malicious purpose or if the court finds that there was a complete absence of a justiciable issue of either law or fact raised by the losing party.

Section 3. Section 390.01113, Florida Statutes, is created to read:

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390.01113 Civil action for violations of patients' rights; relief.--

- (1) Any patient whose rights as specified in s. 390.01112 are violated has a cause of action against any physician, nurse, or clinic for violation of her rights. The action may be brought by the patient, her parent or legal guardian if the patient is a minor, her court-appointed guardian if the patient is mentally incompetent, or a personal representative of the estate of the patient to enforce the right.
- The action may be brought in any court of competent jurisdiction to enforce such rights and to recover actual damages, and punitive damages when malicious, wanton, or willful disregard of the rights of others can be shown. Any plaintiff who prevails in any such action for any amount is entitled to recover reasonable attorney's fees, costs of the action, and damages, unless the court finds that the plaintiff has acted in bad faith or with malicious purpose or that there was a complete absence of a justiciable issue of either law or fact. A prevailing defendant is entitled to recover reasonable attorney's fees under s. 57.105 only if the court determines that the plaintiff's claim involved a complete absence of justiciable law or fact. The remedies provided in this section are in addition to other legal and administrative remedies available to a patient, her estate, or to the agency or department.
 - (3) Attorney's fees shall be based on the following

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	CS/HB 1497, Engrossed 2
365	criteria:
366	(a) The time and labor required.
367	(b) The novelty and difficulty of the questions.
368	(c) The skill requisite to perform the legal service
369	properly.
370	(d) The preclusions of other employment by the attorney
371	due to the acceptance of the case.
372	(e) The customary fee.
373	(f) Whether the fee is fixed or contingent.
374	(g) The amount involved or the results obtained.
375	(h) The experience, reputation, and ability of the
376	attorneys.
377	(i) The costs expended to prosecute the claim.
378	(j) The type of fee arrangement between the attorney and
379	the client.
380	(k) Whether the relevant market requires a contingency fee
381	multiplier to obtain competent counsel.
382	(1) Whether the attorney was able to mitigate the risk of
383	nonpayment in any way.
384	(4) Any action brought under this section is not a claim
385	for medical malpractice, and chapter 766 does not apply. The
386	provisions of s. 768.21(8) do not apply to a claim alleging
387	death of the patient.
388	(5) For purposes of this section, punitive damages may be
389	awarded for conduct that is willful, wanton, gross or flagrant,
390	reckless, or consciously indifferent to the rights of the

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patient. Sections 768.72, 768.725, and 768.73 do not apply to

CODING: Words stricken are deletions; words underlined are additions.

any civil action filed under this section.

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Section 4. Subsection (3) and paragraphs (a), (c), and (e) of subsection (4) of section 390.01114, Florida Statutes, are amended to read:

390.01114 Parental Notice of Abortion Act.--

(3) NOTIFICATION REQUIRED. --

- (a) 1.a. Actual notice shall be provided by the physician performing or inducing the termination of pregnancy before the performance or inducement of the termination of the pregnancy of a minor. The notice may be given by a referring physician. The physician who performs or induces the termination of pregnancy must receive the written statement of the referring physician certifying that the referring physician has given notice. If actual notice is provided by telephone, the physician must actually speak with the parent or guardian and must record in the minor's medical file the name of the parent or guardian provided notice, the phone number dialed, and the date and time of the call.
- <u>b.</u> If actual notice is not possible after a reasonable effort has been made, the physician performing or inducing the termination of pregnancy or the referring physician must give constructive notice. <u>If constructive notice is given, the physician must document that notice by placing copies of any document related to the constructive notice, including, but not limited to, a copy of the letter and the return receipt, in the minor's medical file.</u>
- 2. Notice given under this subsection by the physician performing or inducing the termination of pregnancy must include the name and address of the facility providing the termination

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of pregnancy and the name of the physician providing notice. Notice given under this subsection by a referring physician must include the name and address of the facility where he or she is referring the minor and the name of the physician providing notice. If actual notice is provided by telephone, the physician must actually speak with the parent or guardian, and must record in the minor's medical file the name of the parent or guardian provided notice, the phone number dialed, and the date and time of the call. If constructive notice is given, the physician must document that notice by placing copies of any document related to the constructive notice, including, but not limited to, a copy of the letter and the return receipt, in the minor's medical file.

(b) Notice is not required if:

- 1. In the physician's good faith clinical judgment, a medical emergency exists and there is insufficient time for the attending physician to comply with the notification requirements. If a medical emergency exists, the physician may proceed but must document reasons for the medical necessity in the patient's medical records;
- 2. Notice is waived in writing by the person who is entitled to notice;
- 3. Notice is waived by the minor who is or has been married or has had the disability of nonage removed under s. 743.015 or a similar statute of another state;
- 4. Notice is waived by the patient because the patient has a minor child dependent on her; or
 - 5. Notice is waived under subsection (4).

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(c) Violation of this subsection by a physician constitutes grounds for disciplinary action under s. 458.331 or s. 459.015.

- (d) Any parent or legal guardian of a minor upon whom a termination of pregnancy has been performed or induced who does not receive actual or constructive notice from the physician performing or inducing the termination of pregnancy, where an exception to notice pursuant to paragraph (b) does not exist, may, in a civil action, obtain appropriate relief, unless the pregnancy resulted from the parent or legal guardian's criminal conduct.
- (e) In a civil action under paragraph (d), appropriate relief includes:
- 1. Monetary damages for all injuries, psychological and physical, occasioned by the violation of paragraph(a); and
 - 2. Damages equal to three times the cost of the abortion.
- (f) The damages provided for in paragraph (e) are in addition to any other legal or administrative remedies that may be available to the plaintiff or department.
 - (4) PROCEDURE FOR JUDICIAL WAIVER OF NOTICE. --
- (a) A minor may petition any circuit court in a judicial circuit within the jurisdiction of the District Court of Appeal in which she resides for a waiver of the notice requirements of subsection (3) and may participate in proceedings on her own behalf. The petition may be filed under a pseudonym or through the use of initials, as provided by court rule. The petition must include a statement that the petitioner is pregnant and notice has not been waived. The court shall advise the minor

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that she has a right to court-appointed counsel and shall provide her with counsel upon her request at no cost to the minor. The court shall appoint a guardian ad litem for the minor.

- (c) If the court finds, by clear and convincing evidence, that the minor is sufficiently mature to decide whether to terminate her pregnancy, the court shall issue an order authorizing the minor to consent to the performance or inducement of a termination of pregnancy without the notification of a parent or guardian.
- 1. Factors a court shall consider when determining whether a child is sufficiently mature include, but are not limited to, the following:
- <u>a. Whether the minor is mature enough to make her abortion</u> decision, as evidenced by:
 - (I) The minor's age.

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- (II) The minor's credibility and demeanor as a witness.
- (III) The minor's ability to accept responsibility; and
- b. Whether the minor is well informed enough to make the decision on her own, as evidenced by the minor's:
 - (I) Overall intelligence.
 - (II) Emotional development.
- (III) Ability to assess both the immediate and long range consequences of her choices.
- (IV) Ability to understand and explain the medical consequences of terminating her pregnancy and to apply that understanding to her decision.
 - 2. The court should also take into consideration whether

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there has been any undue influence by another on the minor's decision to have an abortion.

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If the court does not make the finding specified in this paragraph or paragraph (d), it must dismiss the petition.

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A court that conducts proceedings under this section shall:

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1. Provide for a written transcript of all testimony and proceedings.

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Issue a written final order containing all factual findings and legal conclusions, including factual findings and legal conclusions as to whether the petitioner is sufficiently mature based on the factors set forth in subparagraph(c)1.

3. Order that a confidential record be maintained as

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required under s. 390.01116. All hearings under this section, 519 including appeals, shall remain confidential and closed to the public, as provided by court rule A court that conducts

proceedings under this section shall provide for a written

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transcript of all testimony and proceedings and issue written and specific factual findings and legal conclusions supporting

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its decision and shall order that a confidential record be

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court shall hear evidence relating to the emotional development,

maintained, as required under s. 390.01116. At the hearing, the

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other relevant evidence. All hearings under this section,

maturity, intellect, and understanding of the minor, and all

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including appeals, shall remain confidential and closed to the public, as provided by court rule.

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Section 5. Section 390.01117, Florida Statutes, is created

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533 to read:

390.01117 Civil action for negligence; remedies.--

- (1) Any patient who suffers injury or death as a result of an abortion shall have a cause of action for negligence. The action may be brought by the patient, her parent or legal guardian if the patient is a minor, her court-appointed guardian if the patient is mentally incompetent, or a personal representative of the estate of the patient regardless of the cause of death to enforce the right. If the claim involves negligence or injury to the patient that resulted in her death, then the plaintiff shall be entitled to recover both survival damages pursuant to s. 46.021 and wrongful death damages pursuant to s. 768.21. If the action alleges a claim for injury to the patient that did not cause her death, the personal representative of the estate may recover damages for negligence that caused injury to the patient.
- (2) The action may be brought in any court of competent jurisdiction to enforce such rights and to recover actual damages, and punitive damages when malicious, wanton, or willful disregard of the rights of others can be shown. Any plaintiff who prevails in any such action for any amount is entitled to recover reasonable attorney's fees, costs of the action, and damages, unless the court finds that the plaintiff has acted in bad faith or with malicious purpose or that there was a complete absence of a justiciable issue of either law or fact. A prevailing defendant is entitled to recover reasonable attorney's fees under s. 57.105 only if the court determines that the plaintiff's claim involved a complete absence of

561	justiciable law or fact. The remedies provided in this section
562	are in addition to other legal and administrative remedies
563	available to a patient, her estate, or to the agency or
564	department.
565	(3) Attorney's fees shall be based on the following
566	criteria:
567	(a) The time and labor required.

- The time and labor required.
- The novelty and difficulty of the questions. (b)
- (C) The skill requisite to perform the legal service properly.
- (d) The preclusions of other employment by the attorney due to the acceptance of the case.
 - The customary fee. (e)

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- (f) Whether the fee is fixed or contingent.
- The amount involved or the results obtained. (g)
- (h) The experience, reputation, and ability of the attorneys.
 - The costs expended to prosecute the claim. (i)
- (j) The type of fee arrangement between the attorney and the client.
- Whether the relevant market requires a contingency fee multiplier to obtain competent counsel.
- (1)Whether the attorney was able to mitigate the risk of nonpayment in any way.
- In any claim brought under this section, the plaintiff shall have the burden of proving by a preponderance of the evidence, the following:
 - The defendant owed a duty to the patient. (a)

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(b) The defendant breached the duty to the patient.

(c) The breach of the duty was a legal cause of loss, injury, death, or damage to the patient.

- (d) The patient sustained loss, injury, death, or damage as a result of the breach.
- (5) Nothing in this section shall be interpreted to create strict liability. Injury or death resulting to the patient shall be evidence of negligence, but shall not be negligence per se.
- (6) In any claim brought under this section, a clinic, person, or entity shall have a duty to exercise reasonable care.

 Reasonable care is that degree of care which a reasonably careful clinic, person, or entity would use under like circumstances.
- (7) In any claim for negligence by a physician, such physician shall have the duty to exercise care consistent with the prevailing professional standard of care for physicians. The prevailing professional standard of care for physicians shall be that level of care, skill, and treatment which, in light of all relevant surrounding circumstances, is recognized as acceptable and appropriate by reasonably prudent similar physicians.
- (8) In any claim for negligence by a nurse licensed under part I of chapter 464, such nurse shall have the duty to exercise care consistent with the prevailing professional standard of care for a nurse. The prevailing professional standard of care for a nurse shall be that level of care, skill, and treatment which, in light of all relevant surrounding circumstances, is recognized as acceptable and appropriate by reasonably prudent similar nurses.

(9) Any action brought pursuant to this section is not a claim for medical malpractice, and chapter 766 does not apply.

The provisions of s. 768.21(8) do not apply to a claim alleging death of the patient.

(10) For purposes of this section, punitive damages may be awarded for conduct that is willful, wanton, gross or flagrant, reckless or consciously indifferent to the rights of the patient. Sections 768.72, 768.725, and 768.73 do not apply to any civil action filed pursuant to this section.

Section 6. Section 390.01118, Florida Statutes, is created to read:

390.01118 Statute of limitations.--Any action for damages brought under ss. 390.01113, 390.01114(3)(d)-(f), and 390.01117 shall be commenced within 2 years from the time the incident giving rise to the action occurred or within 2 years from the time the incident is discovered or should have been discovered with the exercise of due diligence. In those actions covered by ss. 390.01113, 390.01114(3)(d)-(f), and 390.01117 in which it can be shown that fraudulent concealment or intentional misrepresentation of fact prevented discovery of the injury, the period of limitations is extended forward 2 years from the time the injury is discovered with the exercise of due diligence.

Section 7. Section 390.01118, Florida Statutes, as created by this act, shall apply to causes of action that have accrued prior to the effective date of that section; however, any such cause of action that would not have been barred under prior law may be brought within the time allowed by prior law or within 2 years after the effective date of that section, whichever is

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645 earlier, and will be barred thereafter.

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- Section 8. Section 390.01119, Florida Statutes, is created to read:
 - 390.01119 Medical records.--
- (1) Any person who fraudulently alters, defaces, or falsifies any medical record related to an abortion or causes or procures any of these offenses to be committed, commits a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083.
- (2) A conviction under subsection (1) is also grounds for restriction, suspension, or termination of the license privileges of a professional licensee.
- Section 9. Subsection (1) and paragraph (d) of subsection (3) of section 390.012, Florida Statutes, are amended to read:

 390.012 Powers of agency; rules; disposal of fetal
- 390.012 Powers of agency; rules; disposal of fetal remains.--
- (1) The agency shall have the authority to develop and enforce rules for the health, care, and treatment of persons in abortion clinics and for the safe operation of such clinics.
- (a) The rules shall be reasonably related to the preservation of maternal health of the clients.
- (b) The rules shall be in accordance with s. 797.03 and may not impose an unconstitutional burden on a woman's freedom to decide whether to terminate her pregnancy.
- (c) The rules shall prohibit the performance of abortions in the third trimester other than in a hospital.
- 671 (d) The rules shall prohibit a clinic from requesting a
 672 patient to waive her ability to either file a complaint with any

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disciplinary body or to litigate a cause of action based on the care received in the clinic or a violation of her rights.

(e) (c) The rules shall provide for:

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- 1. The performance of pregnancy termination procedures only by a licensed physician.
- 2. The making, protection, and preservation of patient records, which shall be treated as medical records under chapter 458.
- (3) For clinics that perform or claim to perform abortions after the first trimester of pregnancy, the agency shall adopt rules pursuant to ss. 120.536(1) and 120.54 to implement the provisions of this chapter, including the following:
- (d) Rules relating to the medical screening and evaluation of each abortion clinic patient. At a minimum, these rules shall require:
- 1. A medical history including reported allergies to medications, antiseptic solutions, or latex; past surgeries; and an obstetric and gynecological history.
- 2. A physical examination, including a bimanual examination estimating uterine size and palpation of the adnexa.
 - 3. The appropriate laboratory tests, including:
- a. For an abortion in which an ultrasound examination is not performed before the abortion procedure, Urine or blood tests for pregnancy performed before the abortion procedure.
 - b. A test for anemia.
- c. Rh typing, unless reliable written documentation of blood type is available.
 - d. Other tests as indicated from the physical examination.

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4. An ultrasound evaluation for all patients who elect to have an abortion after the first trimester. The rules shall require that if a person who is not a physician performs an ultrasound examination, that person shall have documented evidence that he or she has completed a course in the operation of ultrasound equipment as prescribed in rule. The physician, registered nurse, licensed practical nurse, advanced registered nurse practitioner, or physician assistant shall review and explain, at the request of the patient, the live ultrasound images evaluation results, including an estimate of the probable gestational age of the fetus, with the patient before the abortion procedure is performed, unless the patient declines pursuant to s. 390.0111.

5. That the physician is responsible for estimating the gestational age of the fetus based on the ultrasound examination and obstetric standards in keeping with established standards of care regarding the estimation of fetal age as defined in rule and shall write the estimate in the patient's medical history. The physician shall keep original prints of each ultrasound examination of a patient in the patient's medical history file.

Section 10. It is the intent of this act and the

Legislature to accord the utmost comity and respect to the

constitutional prerogatives of Florida's judiciary, and nothing
in this act should be construed as any effort to impinge upon
those prerogatives. To that end, should any court of competent
jurisdiction enter a final judgment concluding or declaring that
any provision of this act improperly encroaches upon the
authority of the Florida Supreme Court to determine the rules of

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practice and procedure in Florida courts, the Legislature hereby declares its intent that any such provision be construed as a request for rule change pursuant to s. 2, Art. V of the State Constitution and not as a mandatory legislative directive.

Section 11. If any provision of this act or the application thereof to any person or circumstance is held invalid, the invalidity does not affect other provisions or applications of the act which can be given effect without the invalid provision or application, and to this end the provisions of this act are declared severable.

Section 12. This act shall take effect July 1, 2007.