

SECOND REGULAR SESSION

HOUSE BILL NO. 2086

100TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE ROWLAND.

4662H.011

DANA RADEMAN MILLER, Chief Clerk

AN ACT

To repeal section 578.350, RSMo, and to enact in lieu thereof four new sections relating to the collection of forensic evidence in emergency rooms.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Section 578.350, RSMo, is repealed and four new sections enacted in lieu thereof, to be known as sections 197.125, 197.130, 578.350, and 595.222, to read as follows:

2 **197.125. Any entity that operates an emergency room shall provide three hours of**
3 **annual training on the collection of forensic evidence to all personnel employed in a**
4 **capacity that requires them to assist in procedures involving the collection of forensic**
5 **evidence in such emergency room.**

6 **197.130. Any entity that operates an emergency room shall possess and maintain**
7 **a secure storage unit capable of storing forensic evidence collected by personnel during the**
8 **course of treatment of a gunshot wound patient or a stab wound patient in an emergency**
9 **room.**

578.350. 1. A person licensed under chapter 334 or 335 who treats a person for a wound inflicted by gunshot **or a stabbing wound that is at least one inch deep** commits the infraction of medical deception if he or she knowingly fails to immediately report to a local law enforcement official the name and address of the person, if known, and if unknown, a description of the person, together with an explanation of the nature of the wound and the circumstances under which the treatment was rendered.

2. A person licensed under chapter 334 or 335 who, in good faith, makes a report under this section shall have immunity from civil liability that otherwise might result from such report and shall have the same immunity with respect to any good faith participation in any judicial

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

10 proceeding in which the reported [~~gunshot~~] wound is an issue. Notwithstanding the provisions
11 of subdivision (5) of section 491.060, the existence of a physician-patient relationship shall not
12 prevent a physician from submitting the report required in this section, or testifying regarding
13 information acquired from a patient treated for a [~~gunshot~~] **reported** wound if such testimony
14 is otherwise admissible.

**595.222. 1. Any entity that operates an emergency room shall have access to
2 evidentiary collection kits to be used to collect evidence of a gunshot wound or a stabbing
3 wound that is at least one inch deep.**

**4 2. Evidentiary collection kits shall be developed and made available, subject to
5 appropriation, to emergency rooms by the department of health and senior services. Such
6 kits shall be distributed along with forms and procedures developed by the department for
7 gathering evidence during the examination of a victim of a gunshot wound or a stabbing
8 wound that is at least one inch deep.**

**9 3. The department shall have authority to promulgate rules and regulations
10 necessary to implement the provisions of this section. Any rule or portion of a rule, as that
11 term is defined in section 536.010, that is created under the authority delegated in this
12 section shall become effective only if it complies with and is subject to all of the provisions
13 of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are
14 nonseverable, and if any of the powers vested with the general assembly pursuant to
15 chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are
16 subsequently held unconstitutional, then the grant of rulemaking authority and any rule
17 proposed or adopted after August 28, 2020, shall be invalid and void.**

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