

Amendment No. (for drafter's use only)

CHAMBER ACTION

Senate

House

1 Representative(s) Barreiro offered the following:

2
3 **Amendment (with title amendment)**

4 Between line(s) 15 and 16, insert:

5 Section 1. Subsection (8) is added to section 1003.57,
6 Florida Statutes, to read:

7 1003.57 Exceptional students instruction.--Each district
8 school board shall provide for an appropriate program of special
9 instruction, facilities, and services for exceptional students
10 as prescribed by the State Board of Education as acceptable,
11 including provisions that:

12 (8) Before a public school student may be evaluated for an
13 emotional, behavioral, or mental disorder, a specific learning
14 disability, or other health impairment, including psychological
15 or psychiatric evaluation, the parent of such student must be
16 fully informed of all known and potential consequences of and

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17 alternatives for such evaluation and acknowledge and sign the
18 following statement:

19
20 I understand that my child has been referred to be evaluated for
21 an emotional, behavioral, or mental disorder, a specific
22 learning disability, or other health impairment, that may lead
23 to psychological or psychiatric evaluation. The evaluation may
24 ultimately result in the diagnosis of a "mental disorder" or
25 "syndrome" which is based on the observation and subjective
26 interpretation of my child's behavior as reported by teachers,
27 psychologists, psychiatrists, or others.

28
29 I understand that, unlike most medical diagnostic methods, a
30 diagnosis of mental disorder or syndrome, including, but not
31 limited to, attention deficit hyperactivity disorder (ADHD),
32 bipolar disorder, and depression, is not based on any medical
33 test, such as a brain scan, chemical imbalance test, Xray,
34 biopsy, blood test, or urinalysis, that can scientifically
35 detect a physical abnormality in an infant, child, adolescent,
36 or adult.

37
38 I understand that if my child is diagnosed or labeled with any
39 mental disorder or syndrome, treatment may include prescriptions
40 for psychotropic or psychiatric medications, such as
41 antidepressants or stimulants, which may have side effects and
42 uncertain effectiveness. Most antidepressants are not approved
43 for children by the Food and Drug Administration, and all
44 antidepressants contain warnings of suicide risk. The Food and
45 Drug Administration has also issued warnings that stimulants

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46 often prescribed for children may cause suicidal and psychotic
47 behavior or sudden death due to heart failure.

48
49 I understand that I have the right to be informed of all the
50 known side effects of any recommended drug, including the
51 current information concerning the drug in the Physicians' Desk
52 Reference.

53
54 I understand that I may request full information on the short-
55 term and long-term benefits and risks of a drug, any
56 interactions the drug has with other medications, the length of
57 time my child will need to take the drug, and all of the up-to-
58 date accumulation of adverse reaction reports of the drug from
59 the FDA. I understand that psychotropic or psychiatric drugs may
60 be addictive and could cause dependency.

61
62 I understand that physical problems such as poor nutrition,
63 exposure to toxins, including lead poisoning, or allergies and
64 other medical conditions can cause emotional, behavioral, or
65 mental symptoms and that these causes may be detectible through
66 medical examination, including, but not limited to, blood
67 testing.

68
69 I understand that there are alternatives to psychotropic or
70 psychiatric drug treatment and that I should ask the evaluation
71 personnel and my physician about such alternatives. I understand
72 that it is my responsibility to make an informed decision on
73 behalf of my child.

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75 | I acknowledge that I have read and understood the above
76 | information and, based on my understanding, I hereby:

77 |
78 | (1) Give my full and informed consent for my child to
79 | undergo evaluation for an emotional, behavioral, or mental
80 | disorder, a specific learning disability, or other health
81 | impairment.

82 | (Signature of Parent)

83 | (2) Do not give my consent for my child to undergo
84 | evaluation for an emotional, behavioral, or mental disorder, a
85 | specific learning disability, or other health impairment.

86 | (Signature of Parent)

87 |

88 | ===== T I T L E A M E N D M E N T =====

89 | Remove line(s) 2 and insert:

90 | An act relating to mental health; amending s. 1003.57, F.S.;

91 | requiring consent by a parent before his or her child's

92 | evaluation for an emotional, behavioral, or mental disorder, a

93 | specific learning disability, or other health impairment;

94 | specifying the contents of a statement that must be signed by a

95 | parent; providing for a