SENATE FLOOR AMENDMENTS

2024 Regular Session

Amendments proposed by Senator Miller on behalf of the Legislative Bureau to Engrossed Senate Bill No. 39 by Senator Mizell

1 AMENDMENT NO. 1

- 2 On page 1, line 8, change "1223(B)(7)(a)(iii)" to "the introductory paragraph of 1223(B) and
- 3 (B)(7)(a)(iii)"
- 4 AMENDMENT NO. 2
- 5 On page 2, line 7, change "1223(B)(7)(a)(iii)" to "the introductory paragraph of 1223(B) and
- 6 (B)(7)(a)(iii)"
- 7 AMENDMENT NO. 3
- 8 On page 17, line 29, delete "* * *"
- 9 AMENDMENT NO. 4
- 10 On page 18, delete lines 4 through 10 and insert:

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STATEMENT OF FAMILY HISTORY

13		Child's Biological MOTHER	Child's Biological FATHER
14	Age		
15	Height		
16	Weight		
17	Hair color		
18	Eye color		
19	Complexion		
20	Body build		
21 22 23	Education-last grade completed/ degree received		
24	Right/left handed		
25	Occupation		
26	Talents		
27	Religion		
28	Race		
29 30	Ethnicity/ Nationality		
31 32 33 34	Native American/Tribal Affiliation, if applicable		
35	Other		

Yes	No	Diseases/conditions	If yes, • state relationship to child [biological parent
			(mother or father), sibling (full or half), grandparent (paternal or maternal), great grandparent (paternal or maternal), aunt/uncle/cousin (paternal or maternal)];
			 state specific condition;
			age of onset;
			 treatment (medication, surgery, etc.); and
			• outcome.
		Cancer	
		Heart disease	
		Stroke	
		High blood pressure	
		Diabetes	
		Kidney disease	
		Liver disease	
		Digestive disorders	
		Respiratory disorders	
		Blood disease (sickle cell, hemophilia, etc.)	
		Glandular disturbances	
		(thyroid, adrenal,	
		growth, etc.)	
		Neurological &	
		muscular disorders	
		(multiple sclerosis, muscular dystrophy,	
		Tay-Sachs, etc.)	
		Arthritis (juvenile, rheumatoid, gout,	
		hammertoe, etc.)	
		Epilepsy, seizures, convulsions	
		Allergies (drugs, food, other)	
		Asthma	
		Vision problems/blindness	
		Hearing problems/deafness	
		Speech disorders	
	\top	Dental problems/braces	
	+	Birth defects (cleft	1
		palate, missing digit, club foot, etc.)	
		Curvature of spine	
	 	Headaches/migraines	
	\top	Alcoholism	
	\dashv	Substance abuse	
	\dashv	Eating disorders/obesity	
		Mental illness	
		(schizophrenia, bipolar, depressive, etc.)	

1 2 3 4			Intellectual disability–non-injury (PKU, Down's Syndrome, etc.)	
5 6			Learning disabilities (ADD, ADHD, etc.)	
7			Multiple births	
8 9			Miscarriages, stillbirths, neonatal deaths	
0			SIDS	
			Rh Factor	
			HIV (biological mother only)	
			Venereal disease during pregnancy (biological mother only)	
			Other: specify	
			Other: specify	
			Other: specify	
	Prenatal History			
	Yes	No		If yes,
				• state type;
				• state amount; and
				state during what months of pregnancy.
			Prescription medication	
			Over the counter medication	
			Alcohol	
			Tobacco	
			Other Drugs	
	If yes what is Has the minor YES NO	the biol child h	logical relationship? nad the following immuniza YES	to each other? Yes No ntions? NO () 12-15 mo. Hib, MMR # 1
	()() I-4		• • • • • • • • • • • • • • • • • • • •	() 12-18 mo. Var (chickenpox)
	() () 2 mo.		•) () 15-18 mo. DTaP
	() () 4 mo.	DTaP,	IPV, Hib,	() 4-6 yrs. MMR # 2, DTaP, OPV
	() () 6 mo.) () 11-12 yrs. MMR # 2, Var, Hep B
	() () 6-181) () 11-16 yrs. Td (tetanus, diphtheria)
	Has the minor YES NO	child h	and the following illnesses? YES	NO
		ssis (P)) () Rheumatic Fever
	() () Rubel			() Tonsillitis
	() () Mum) Convulsions
	() () Chick			() Asthma
	() () Rotav			() Polio (IPV)
	() () Scarle		·	() Allergies, specify
	() () Dipht			
			sturbances, specify	
	Does the mine	or child	have or has he the child ha	nd any other serious illnesses or medical conditions?

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