

26:5D-1 to 26:5D-4

LEGISLATIVE HISTORY CHECKLIST

NISA: 26:5D-1 to 26:5D-4 ("SIDS Assistance Act")

LAWS OF: 1987 CHAPTER: 331

Bill No: A2396

Sponsor(s): Muhler and Smith

Date Introduced: May 8, 1986

Committee: Assembly: Health and Human Resources

Senate: Institutions, Health and Welfare

Amended during passage: Yes

Date of Passage: Assembly: June 19, 1986

Senate: November 12, 1987

Date of Approval: December 22, 1987

Following statements are attached if available:

Sponsor statement: Yes

Attached: Assembly amendments, adopted 6-12-86 (with statement).

Committee statement: Assembly Yes

Senate Yes

Fiscal Note: No

Veto Message: No

Message on Signing: No

Following were printed:

Reports: No

Hearings: No

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ASSEMBLY, No. 2396

STATE OF NEW JERSEY

INTRODUCED MAY 8, 1986

By Assemblywomen MUHLER and SMITH

AN ACT establishing programs for the diagnosis and treatment of Sudden Infant Death Syndrome, supplementing Title 26 of the Revised Statutes and making an appropriation therefor.

1 BE IT ENACTED *by the Senate and General Assembly of the State*
2 *of New Jersey:*

1 1. This act shall be known and may be cited as the "SIDS
2 Assistance Act."

1 2. The Legislature finds and declares that:

2 a. Sudden Infant Death Syndrome, the sudden and unexpected
3 death of apparently healthy babies, commonly known as "SIDS"
4 or "Crib Death," is the major cause of death of infants between
5 the ages of one month and one year and is responsible for the
6 deaths of approximately 7,000 infants in the United States each
7 year.

8 b. Although the cause of SIDS is not known, there is evidence
9 that it may be caused by an infectious agent, hypoglycemia, a
10 neuroendocrine defect, or poor socioeconomic conditions. SIDS
11 has also been associated with apnea, the temporary stoppage of
12 breathing; however, there are no data firmly linking SIDS to
13 apnea, and preliminary data suggest that the number of infants
14 who have had a history of ****[apneic]**** ***apneic*** episodes may
15 account for not more than 5% of SIDS fatalities.

16 c. Because of the nature of SIDS and the inability to discover
17 the cause of death, parents of victims of SIDS often experience
18 trauma and shock and have a need for counseling and other sup-
19 port services.

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

Matter printed in italics *thus* is new matter.

Matter enclosed in asterisks or stars has been adopted as follows:

*—Assembly amendment adopted June 12, 1986.

**—Senate committee amendments adopted November 17, 1986.

20 d. Reseach regarding the detection, treatment, cure or preven-
 21 tion of SIDS has not been afforded the attention given to other
 22 areas of medicine, and many health care professionals are not
 23 familiar with the symptoms, diagnosis or treatment of SIDS; and

24 e. Therefore, it is imperative that a program be established for
 25 identifying and treating infants who are potential victims of SIDS,
 26 referring potential SIDS victims and their families to sources of
 27 treatment and counseling, referring families whose children have
 28 been victims of SIDS to counseling and other support services and
 29 providing an educational program to health care professionals to
 30 heighten their awareness in detecting potenial SIDS victims and
 31 in preventing SIDS.

1 3. The Commissioner of the Department of Health shall estab-
 2 lish a program to educate the public and health care professionals
 3 about SIDS. The program shall include a referral service for the
 4 public and health care professionals on SIDS related services and
 5 a 24-hour telephone hotline to provide needed information and re-
 6 ferrals. The commissioner shall also encourage the development
 7 of local support programs to provide early detection, counseling,
 8 and referrals for infants who may be at risk of SIDS.

1 4. The Commissioner of the Department of Health shall estab-
 2 lish a "SIDS Resource Center" within a State medical school.
 3 The SIDS Resource Center shall, in coordination with the De-
 4 partment of Health, serve as a technical advisory center and may
 5 offer diagnostic procedures, medical treatment and counseling, as
 6 well as any other services that may be necessary to assist potential
 7 SIDS victims and their families.

1 5. There is appropriated from the General Fund to the Depart-
 2 ment of Health *~~[\$99,000.00]~~* **~~[\$90,000.00]~~** **\$150,000.00**
 3 to carry out the provisions of this act.

1 6. This act shall take effect immediately.

HEALTH—GENERAL

Establishes a "SIDS" program in the Department of Health;
 appropriates \$150,000.

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 25 identifying and treating infants who are potential victims of SIDS,
 26 referring potential SIDS victims and their families to sources of
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 7 SIDS victims and their families.

1 5. There is appropriated from the General Fund to the Depart-
 2 ment of Health \$99,000.00 to carry out the provisions of this act.

1 6. This act shall take effect immediately.

STATEMENT

This bill establishes a Sudden Infant Death Syndrome (SIDS) program within the Department of Health and appropriates \$99,000.00 for this purpose.

The bill requires the Commissioner of Health to establish a program to educate the public and health care professionals about SIDS. The commissioner is also required to establish a "SIDS Resource Center" in a State medical school which will serve as a technical advisory center to assist potential SIDS victims and their families.

HEALTH—GENERAL

Establishes a "SIDS" program in the Department of Health; appropriates \$99,000.00.

A2396 (1987)

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ASSEMBLY HEALTH AND HUMAN RESOURCES
COMMITTEE

STATEMENT TO

ASSEMBLY, No. 2396

STATE OF NEW JERSEY

DATED: MAY 22, 1986

The Assembly Health and Human Resources Committee reports favorably Assembly Bill No. 2396.

This bill establishes a program within the Department of Health to educate the public and health care professionals about the diagnosis and treatment of Sudden Infant Death Syndrome (SIDS) and promote efforts to combat SIDS.

The bill requires the Commissioner of Health to set up a public education program, including a Statewide telephone hotline to provide information and referrals, and to encourage the development of local support programs to provide early detection, counseling and referrals for infants who may be at risk of SIDS.

The bill appropriates \$99,000.00 to the Department of Health and requires the Commissioner of Health to establish a "SIDS Resource Center" within a State medical school. The center would coordinate with the Department of Health its efforts to provide technical advice, diagnosis, treatment and counseling and other services to assist potential SIDS victims and their families.

11/86 ewj

12 MAY 86 2:48

HS0058
SR HS0064
TR HS0068

ADOPTED
JUN 12 1986

ASSEMBLY FLOOR Amendments
Sponsored by Assemblywoman Muhler

to

ASSEMBLY Bill No. 2396
Sponsored by Assemblywomen Muhler and
Smith

Amend:

Page

Sec.

Line

2

5

2

Omit \$99,000.00" Insert "\$90,000.00"

STATEMENT

program within

SENATE INSTITUTIONS, HEALTH AND WELFARE
COMMITTEE

STATEMENT TO
ASSEMBLY, No. 2396

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with Senate committee amendments

STATE OF NEW JERSEY

DATED: NOVEMBER 17, 1986

The Senate Institutions, Health and Welfare Committee favorably reports Assembly Bill No. 2396 OCR with committee amendments.

As amended, this bill establishes a program within the Department of Health to educate the public and health care professionals about the diagnosis and treatment of Sudden Infant Death Syndrome (SIDS) and promote efforts to combat SIDS.

The bill requires the Commissioner of Health to set up a public education program, including a Statewide telephone hotline to provide information and referrals, and to encourage the development of local support programs to provide early detection, counseling and referrals for infants who may be at risk of SIDS.

The bill appropriate \$150,000.00 to the Department of Health and requires the Commissioner of Health to establish a "SIDS Resource Center" within a State medical school. The center, in coordination with the Department of Health, would serve as a technical advisory center, and may offer diagnosis, treatment and counseling services to assist potential SIDS victims and their families.

The committee amended the bill to increase the appropriation from \$90,000.00 to \$150,000.00.