SB 504 Deuell (S. King)

SUBJECT: Modifying the requirement for scoliosis screenings in grades 6-9

COMMITTEE: Public Education — favorable, without amendment

VOTE: 8 ayes — Aycock, Allen, J. Davis, Farney, Huberty, K. King, Ratliff,

J. Rodriguez

0 nays

3 absent — Deshotel, Dutton, Villarreal

SENATE VOTE: On final passage, April 2 — 30-1 (Zaffirini)

WITNESSES: For — Julie Lindley, Texas School Nurses Association; (Registered, but

did not testify: Ramiro Canales, Texas Association of School

Administrators; Julie Shields, Texas Association of School Boards)

Against — (Registered, but did not testify: John Gill; Bobby Hillert, Texas

Orthopaedic Association; Andrew Kant)

On — (Registered, but did not testify: David Anderson, Texas Education

Agency; Jann Melton-Kissel, Department of State Health Services)

BACKGROUND: The Legislature in 1985 enacted HB 832 by McKinney, which requires

screening for abnormal spinal curvature (scoliosis) for students in grades 6-9 attending public and private schools. A school is required to notify the

parents if a child shows any signs of a possible spinal curvature.

DIGEST: SB 504 would require the Department of State Health Services and the

Texas Education Agency to require each public school to choose whether

to screen students in grades 6-9 for abnormal spinal curvature or to provide the parents, managing conservators, or guardians of students in

grades 6-9 with information about abnormal spinal curvature.

The Department of State Health Services would be required by March 1, 2014 to develop and provide information on abnormal spinal curvature.

The chief administrator of a school would have to make information about

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abnormal spinal curvature available to the parents, managing conservators, or guardians of students who were exempted from the screening because of religious beliefs.

SB 504 would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect September 1, 2013, and would apply beginning with the 2014-15 school year.

## SUPPORTERS SAY:

SB 504 would eliminate an unnecessary and unfunded mandate by allowing public schools the option to continue screening for scoliosis or to provide parents of students with information about abnormal spinal curvature.

School trustees know what is best for the students in their communities, and SB 504 would honor their discretion. It also would repeal a decades-old mandate for a screening that is ineffective and is not a requirement in many other states. Such screenings have resulted in a high number of findings of possible abnormal spinal curvature that were proven false with further tests that are costly to families, according to a study published by Studies Health Technology Information. Also, a finding at school of a possible abnormal spinal curvature often fails to prompt parents to follow up with a medical examination, rendering even a positive screening ineffective.

Students who attended schools that chose not to require the screening could still find access to examination. Medicaid requires children from poor families to have an annual examination by a physician, and the state requires a physical examination for any student-athlete. Parents also would be more aware of scoliosis if a school provided them with information about abnormal spinal curvature.

Additionally, the bill would remove from school nurses a mandate that keeps them from their other many duties, and would save schools that do not have a nurse from the expense of hiring a provider to administer the screening.

## OPPONENTS SAY:

SB 504 would remove a key screening for scoliosis at public schools that often serves as the only chance to identify in impoverished students an abnormal spinal curvature or other deformity.

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Early detection through these screenings for students in grades 6-9 is vital to treating a spinal deformity such as scoliosis. Finding a suggestion of an abnormal spinal curve in a student is the first step in an important process that progresses with a referral to a physician for an extensive examination and possible treatment. Setting a student on this path toward treatment has great value even if it requires a screening of all the students of a school. These screenings are administered by properly trained professionals. Simply providing parents with information about scoliosis would be ineffective because most parents are not trained to give such an examination.

Also, the bill would eliminate for many students without access to health care their only chance to detect scoliosis. These screenings have also been used to detect other deformities, such as a leg-length discrepancy, hip dysplasia, and cervical neck problems, many of which would go undiagnosed if not for the current mandatory screening program.