## 2016 Kansas Statutes

**65-6b05. Same; written informed request.** The "written informed request" referred to in this act shall be on a form prepared by, and obtained from the state board of healing arts and shall be in substance as follows:

	NFORMED REQUEST FOR PRESCRIPTION OF AMYGDALIN (LAETRILE) FOR MEDICAL TREATMENT
Address	ne:
Age	Sex
	Name and address of prescribing physician:
Malignancy supplement:	, disease, illness or physical condition diagnosed for medical treatment by amygdalin (laetrile) or its use as a dietary
(a) That th	n has explained to me: e federal food and drug administration has determined amygdalin (laetrile) to be an "unapproved new drug" and that federal lav
(b) That no osteopathic (c) That th	e interstate distribution of an "unapproved new drug."  sither the American cancer society, the American medical association, the Kansas medical society nor the Kansas association of medicine recommends use of amygdalin (laetrile) in the treatment of any malignancy, disease, illness or physical condition. ere are alternative recognized treatments for the malignancy, disease, illness or physical condition from which I suffer which my as offered to provide for me including: (Here describe)
malignancy,	astanding the foregoing, I hereby request prescription and use of amygdalin (laetrile) (a) in the medical treatment of the disease, illness or physical condition from which I suffer [], (b) as a dietary supplement [] or (c) both in the medical treatment nancy, disease, illness or physical condition from which I suffer and as a dietary supplement [] (check (a), (b) or (c)).  Patient or person signing for patien
ATTEST:	
Prescribing	•
1.0	ch written informed request shall be forwarded forthwith after execution thereof to the medical care facility or other health care the state board of healing arts.

**History:** L. 1978, ch. 239, § 5; July 1.