

REFERENCE TITLE: **abortion; authorized providers; waiting period**

State of Arizona  
Senate  
Fifty-fifth Legislature  
Second Regular Session  
2022

## **SB 1646**

Introduced by  
Senators Terán: Alston, Contreras, Gabaldon, Gonzales, Hatathlie, Otondo,  
Quezada, Rios, Stahl Hamilton, Steele; Representatives Hernandez M,  
Solorio

AN ACT

AMENDING SECTIONS 32-1606, 32-2501, 32-2531, 32-2532, 32-2534, 36-449.01,  
36-449.03, 36-2152, 36-2153, 36-2155, 36-2156, 36-2158, 36-2161 AND  
36-2162.01, ARIZONA REVISED STATUTES; REPEALING SECTION 36-3604, ARIZONA  
REVISED STATUTES; RELATING TO ABORTION.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Section 32-1606, Arizona Revised Statutes, is amended to  
3 read:

4 32-1606. Powers and duties of board

5 A. The board may:

6 1. Adopt and revise rules necessary to carry into effect this  
7 chapter.

8 2. Publish advisory opinions regarding registered and practical  
9 nursing practice and nursing education.

10 3. Issue limited licenses or certificates if it determines that an  
11 applicant or licensee cannot function safely in a specific setting or  
12 within the full scope of practice.

13 4. Refer criminal violations of this chapter to the appropriate law  
14 enforcement agency.

15 5. Establish a confidential program for monitoring licensees who  
16 are chemically dependent and who enroll in rehabilitation programs that  
17 meet the criteria established by the board. The board may take further  
18 action if the licensee refuses to enter into a stipulated agreement or  
19 fails to comply with its terms. In order to protect the public health and  
20 safety, the confidentiality requirements of this paragraph do not apply if  
21 the licensee does not comply with the stipulated agreement.

22 6. On the applicant's or regulated party's request, establish a  
23 payment schedule with the applicant or regulated party.

24 7. Provide education regarding board functions.

25 8. Collect or assist in collecting workforce data.

26 9. Adopt rules to conduct pilot programs consistent with public  
27 safety for innovative applications in nursing practice, education and  
28 regulation.

29 10. Grant retirement status on request to retired nurses who are or  
30 were licensed under this chapter, who have no open complaint or  
31 investigation pending against them and who are not subject to discipline.

32 11. Accept and spend federal monies and private grants, gifts,  
33 contributions and devises to assist in carrying out the purposes of this  
34 chapter. These monies do not revert to the state general fund at the end  
35 of the fiscal year.

36 B. The board shall:

37 1. Approve regulated training and educational programs that meet  
38 the requirements of this chapter and rules adopted by the board.

39 2. By rule, establish approval and reapproval processes for nursing  
40 and nursing assistant training programs that meet the requirements of this  
41 chapter and board rules.

42 3. Prepare and maintain a list of approved nursing programs to  
43 prepare registered **NURSES** and practical nurses whose graduates are  
44 eligible for licensing under this chapter as registered nurses or as

- 1 practical nurses if they satisfy the other requirements of this chapter  
2 and board rules.
- 3 4. Examine qualified registered NURSE and practical nurse  
4 applicants.
- 5 5. License and renew the licenses of qualified registered NURSE and  
6 practical nurse applicants and licensed nursing assistants who are not  
7 qualified to be licensed by the executive director.
- 8 6. Adopt a seal, which the executive director shall keep.
- 9 7. Keep a record of all proceedings.
- 10 8. For proper cause, deny or rescind approval of a regulated  
11 training or educational program for failure to comply with this chapter or  
12 the rules of the board.
- 13 9. Adopt rules to approve credential evaluation services that  
14 evaluate the qualifications of applicants who graduated from an  
15 international nursing program.
- 16 10. Determine and administer appropriate disciplinary action  
17 against all regulated parties who are found guilty of violating this  
18 chapter or rules adopted by the board.
- 19 11. Perform functions necessary to carry out the requirements of  
20 THE nursing assistant and nurse aide training and competency evaluation  
21 program as set forth in the omnibus budget reconciliation act of 1987  
22 (P.L. 100-203; 101 Stat. 1330), as amended by the medicare catastrophic  
23 coverage act of 1988 (P.L. 100-360; 102 Stat. 683). These functions shall  
24 include:
- 25 (a) Testing and registering certified nursing assistants.  
26 (b) Testing and licensing licensed nursing assistants.  
27 (c) Maintaining a list of board-approved training programs.  
28 (d) Maintaining a registry of nursing assistants for all certified  
29 nursing assistants and licensed nursing assistants.  
30 (e) Assessing fees.
- 31 12. Adopt rules establishing those acts that may be performed by a  
32 registered nurse practitioner or certified nurse midwife, ~~except that the~~  
33 ~~board does not have authority to decide scope of practice relating to~~  
34 ~~abortion as defined in section 36-2151.~~
- 35 13. Adopt rules that prohibit registered nurse practitioners,  
36 clinical nurse specialists or certified nurse midwives from dispensing a  
37 schedule II controlled substance that is an opioid, except for an  
38 implantable device or an opioid that is for medication-assisted treatment  
39 for substance use disorders.
- 40 14. Adopt rules establishing educational requirements to certify  
41 school nurses.
- 42 15. Publish copies of board rules and distribute these copies on  
43 request.
- 44 16. Require each applicant for initial licensure or certification  
45 to submit a full set of fingerprints to the board for the purpose of

1 obtaining a state and federal criminal records check pursuant to section  
2 41-1750 and Public Law 92-544. The department of public safety may  
3 exchange this fingerprint data with the federal bureau of investigation.

4 17. Except for a licensee who has been convicted of a felony that  
5 has been designated a misdemeanor pursuant to section 13-604, revoke a  
6 license of a person, revoke the multistate licensure privilege of a person  
7 pursuant to section 32-1669 or not issue a license or renewal to an  
8 applicant who has one or more felony convictions and who has not received  
9 an absolute discharge from the sentences for all felony convictions three  
10 or more years before the date of filing an application pursuant to this  
11 chapter.

12 18. Establish standards to approve and reapprove REGISTERED nurse  
13 practitioner and clinical nurse specialist programs and provide for  
14 surveys of REGISTERED nurse practitioner and clinical nurse specialist  
15 programs as it deems necessary.

16 19. Provide the licensing authorities of health care institutions,  
17 facilities and homes with any information the board receives regarding  
18 practices that place a patient's health at risk.

19 20. Limit the multistate licensure privilege of any person who  
20 holds or applies for a license in this state pursuant to section 32-1668.

21 21. Adopt rules to establish competency standards for obtaining and  
22 maintaining a license.

23 22. Adopt rules to qualify and certify clinical nurse specialists.

24 23. Adopt rules to approve and reapprove refresher courses for  
25 nurses who are not currently practicing.

26 24. Maintain a list of approved medication assistant training  
27 programs.

28 25. Test and certify medication assistants.

29 26. Maintain a registry and disciplinary record of medication  
30 assistants who are certified pursuant to this chapter.

31 27. Adopt rules to establish the requirements for a clinical nurse  
32 specialist to prescribe and dispense drugs and devices consistent with  
33 section 32-1651 and within the clinical nurse specialist's population or  
34 disease focus.

35 C. The board may conduct an investigation on receipt of information  
36 that indicates that a person or regulated party may have violated this  
37 chapter or a rule adopted pursuant to this chapter. Following the  
38 investigation, the board may take disciplinary action pursuant to this  
39 chapter.

40 D. The board may limit, revoke or suspend the privilege of a nurse  
41 to practice in this state granted pursuant to section 32-1668.

42 E. Failure to comply with any final order of the board, including  
43 an order of censure or probation, is cause for suspension or revocation of  
44 a license or a certificate.

1 F. The president or a member of the board designated by the  
2 president may administer oaths in transacting the business of the board.

3 Sec. 2. Section 32-2501, Arizona Revised Statutes, is amended to  
4 read:

5 32-2501. Definitions

6 In this chapter, unless the context otherwise requires:

7 1. "Active license" means a regular license issued pursuant to this  
8 chapter.

9 2. "Adequate records" means legible medical records containing, at  
10 a minimum, sufficient information to identify the patient, support the  
11 diagnosis, justify the treatment, accurately document the results,  
12 indicate advice and cautionary warnings provided to the patient and  
13 provide sufficient information for another practitioner to assume  
14 continuity of the patient's care at any point in the course of treatment.

15 3. "Advisory letter" means a nondisciplinary letter to notify a  
16 physician assistant that either:

17 (a) While there is insufficient evidence to support disciplinary  
18 action, the board believes that continuation of the activities that led to  
19 the investigation may result in further board action against the licensee.

20 (b) The violation is a minor or technical violation that is not of  
21 sufficient merit to warrant disciplinary action.

22 (c) While the licensee has demonstrated substantial compliance  
23 through rehabilitation or remediation that has mitigated the need for  
24 disciplinary action, the board believes that repetition of the activities  
25 that led to the investigation may result in further board action against  
26 the licensee.

27 4. "Approved program" means a physician assistant educational  
28 program accredited by the accreditation review commission on education for  
29 physician assistants, or one of its predecessor agencies, the committee on  
30 allied health education and accreditation or the commission on the  
31 accreditation of allied health educational programs.

32 5. "Board" means the Arizona regulatory board of physician  
33 assistants.

34 6. "Completed application" means an application for which the  
35 applicant has supplied all required fees, information and correspondence  
36 requested by the board on forms and in a manner acceptable to the board.

37 7. "Immediate family" means the spouse, natural or adopted  
38 children, father, mother, brothers and sisters of the physician assistant  
39 and the natural or adopted children, father, mother, brothers and sisters  
40 of the physician assistant's spouse.

41 8. "Letter of reprimand" means a disciplinary letter that is issued  
42 by the board and that informs the physician assistant that the physician  
43 assistant's conduct violates state or federal law and may require the  
44 board to monitor the physician assistant.

1           9. "Limit" means a nondisciplinary action that is taken by the  
2 board and that alters a physician assistant's practice or medical  
3 activities if there is evidence that the physician assistant is or may be  
4 mentally or physically unable to safely engage in health care tasks.

5           10. "Medically incompetent" means that a physician assistant lacks  
6 sufficient medical knowledge or skills, or both, in performing delegated  
7 health care tasks to a degree likely to endanger the health or safety of  
8 patients.

9           11. "Minor surgery" means those invasive procedures that may be  
10 delegated to a physician assistant by a supervising physician, that are  
11 consistent with the training and experience of the physician assistant,  
12 that are normally taught in courses of training approved by the board and  
13 that have been approved by the board as falling within a scope of practice  
14 of a physician assistant. ~~Minor surgery does not include a surgical~~  
15 ~~abortion.~~

16           12. "Physician" means a physician who is licensed pursuant to  
17 chapter 13 or 17 of this title.

18           13. "Physician assistant" means a person who is licensed pursuant  
19 to this chapter and who practices medicine with physician supervision.

20           14. "Regular license" means a valid and existing license that is  
21 issued pursuant to section 32-2521 to perform health care tasks.

22           15. "Restrict" means a disciplinary action that is taken by the  
23 board and that alters a physician assistant's practice or medical  
24 activities if there is evidence that the physician assistant is or may be  
25 medically incompetent or guilty of unprofessional conduct.

26           16. "Supervising physician" means a physician who holds a current  
27 unrestricted license, who supervises a physician assistant and who assumes  
28 legal responsibility for health care tasks performed by the physician  
29 assistant.

30           17. "Supervision" means a physician's opportunity or ability to  
31 provide or exercise direction and control over the services of a physician  
32 assistant. Supervision does not require a physician's constant physical  
33 presence if the supervising physician is or can be easily in contact with  
34 the physician assistant by telecommunication.

35           18. "Unprofessional conduct" includes the following acts by a  
36 physician assistant that occur in this state or elsewhere:

37           (a) Violating any federal or state law or rule that applies to the  
38 performance of health care tasks as a physician assistant. Conviction in  
39 any court of competent jurisdiction is conclusive evidence of a violation.

40           (b) Claiming to be a physician or knowingly ~~permitting~~ **ALLOWING**  
41 another person to represent that person as a physician.

42           (c) Performing health care tasks that have not been delegated by  
43 the supervising physician.

44           (d) Exhibiting a pattern of using or being under the influence of  
45 alcohol or drugs or a similar substance while performing health care tasks

- 1 or to the extent that judgment may be impaired and the ability to perform  
2 health care tasks detrimentally affected.
- 3 (e) Signing a blank, undated or predated prescription form.
- 4 (f) Committing gross malpractice, repeated malpractice or any  
5 malpractice resulting in the death of a patient.
- 6 (g) Representing that a manifestly incurable disease or infirmity  
7 can be permanently cured or that a disease, ailment or infirmity can be  
8 cured by a secret method, procedure, treatment, medicine or device, if  
9 this is not true.
- 10 (h) Refusing to divulge to the board on demand the means, method,  
11 procedure, modality of treatment or medicine used in the treatment of a  
12 disease, injury, ailment or infirmity.
- 13 (i) Prescribing or dispensing controlled substances or  
14 prescription-only drugs for which the physician assistant is not approved  
15 or in excess of the amount authorized pursuant to this chapter.
- 16 (j) Committing any conduct or practice that is or might be harmful  
17 or dangerous to the health of a patient or the public.
- 18 (k) Violating a formal order, probation or stipulation issued by  
19 the board.
- 20 (l) Failing to clearly disclose the person's identity as a  
21 physician assistant in the course of the physician assistant's employment.
- 22 (m) Failing to use and affix the initials "P.A." or "P.A.-C." after  
23 the physician assistant's name or signature on charts, prescriptions or  
24 professional correspondence.
- 25 (n) Procuring or attempting to procure a physician assistant  
26 license by fraud, misrepresentation or knowingly taking advantage of the  
27 mistake of another.
- 28 (o) Having professional connection with or lending the physician  
29 assistant's name to an illegal practitioner of any of the healing arts.
- 30 (p) Failing or refusing to maintain adequate records ~~and~~ FOR a  
31 patient.
- 32 (q) Using controlled substances that have not been prescribed by a  
33 physician, physician assistant, dentist or nurse practitioner for use  
34 during a prescribed course of treatment.
- 35 (r) Prescribing or dispensing controlled substances to members of  
36 the physician assistant's immediate family.
- 37 (s) Prescribing, dispensing or administering any controlled  
38 substance or prescription-only drug for other than accepted therapeutic  
39 purposes.
- 40 (t) Dispensing a schedule II controlled substance that is an  
41 opioid, except as provided in section 32-2532.
- 42 (u) Knowingly making any written or oral false or fraudulent  
43 statement in connection with the performance of health care tasks or when  
44 applying for privileges or renewing an application for privileges at a  
45 health care institution.

1 (v) Committing a felony, whether or not involving moral turpitude,  
2 or a misdemeanor involving moral turpitude. In either case, conviction by  
3 a court of competent jurisdiction or a plea of no contest is conclusive  
4 evidence of the commission.

5 (w) Having a certification or license refused, revoked, suspended,  
6 limited or restricted by any other licensing jurisdiction for the  
7 inability to safely and skillfully perform health care tasks or for  
8 unprofessional conduct as defined by that jurisdiction that directly or  
9 indirectly corresponds to any act of unprofessional conduct as prescribed  
10 by this paragraph.

11 (x) Having sanctions including restriction, suspension or removal  
12 from practice imposed by an agency of the federal government.

13 (y) Violating or attempting to violate, directly or indirectly, or  
14 assisting in or abetting the violation of or conspiring to violate a  
15 provision of this chapter.

16 (z) Using the term "doctor" or the abbreviation "Dr." on a name tag  
17 or in a way that leads the public to believe that the physician assistant  
18 is licensed to practice as an allopathic or ~~an~~ osteopathic physician in  
19 this state.

20 (aa) Failing to furnish legally requested information to the board  
21 or its investigator in a timely manner.

22 (bb) Failing to allow properly authorized board personnel to  
23 examine on demand documents, reports and records of any kind relating to  
24 the physician assistant's performance of health care tasks.

25 (cc) Knowingly making a false or misleading statement on a form  
26 required by the board or in written correspondence or attachments  
27 furnished to the board.

28 (dd) Failing to submit to a body fluid examination and other  
29 examinations known to detect the presence of alcohol or other drugs  
30 pursuant to an agreement with the board or an order of the board.

31 (ee) Violating a formal order, probation agreement or stipulation  
32 issued or entered into by the board or its executive director.

33 (ff) Except as otherwise required by law, intentionally betraying a  
34 professional secret or intentionally violating a privileged  
35 communication.

36 (gg) Allowing the use of the licensee's name in any way to enhance  
37 or ~~permit~~ ALLOW the continuance of the activities of, or maintaining a  
38 professional connection with, an illegal practitioner of medicine or the  
39 performance of health care tasks by a person who is not licensed pursuant  
40 to this chapter.

41 (hh) Committing false, fraudulent, deceptive or misleading  
42 advertising by a physician assistant or the physician assistant's staff or  
43 representative.

44 (ii) Knowingly failing to disclose to a patient on a form that is  
45 prescribed by the board and that is dated and signed by the patient or



1 guardian acknowledging that the patient or guardian has read and  
2 understands that the licensee has a direct financial interest in a  
3 separate diagnostic or treatment agency or in nonroutine goods or services  
4 that the patient is being prescribed and if the prescribed treatment,  
5 goods or services are available on a competitive basis. This subdivision  
6 does not apply to a referral by one physician assistant to another  
7 physician assistant or to a doctor of medicine or a doctor of osteopathic  
8 medicine within a group working together.

9 (jj) With the exception of heavy metal poisoning, using chelation  
10 therapy in the treatment of arteriosclerosis or as any other form of  
11 therapy without adequate informed patient consent or without conforming to  
12 generally accepted experimental criteria, including protocols, detailed  
13 records, periodic analysis of results and periodic review by a medical  
14 peer review committee, or without approval by the United States food and  
15 drug administration or its successor agency.

16 (kk) Prescribing, dispensing or administering anabolic or  
17 androgenic steroids for other than therapeutic purposes.

18 (ll) Prescribing, dispensing or furnishing a prescription  
19 medication or a prescription-only device as defined in section 32-1901 to  
20 a person unless the licensee first conducts a physical examination of that  
21 person or has previously established a professional relationship with the  
22 person. This subdivision does not apply to:

23 (i) A physician assistant who provides temporary patient care on  
24 behalf of the patient's regular treating licensed health care  
25 professional.

26 (ii) Emergency medical situations as defined in section 41-1831.

27 (iii) Prescriptions written to prepare a patient for a medical  
28 examination.

29 (iv) Prescriptions written or antimicrobials dispensed to a contact  
30 as defined in section 36-661 who is believed to have had significant  
31 exposure risk as defined in section 36-661 with another person who has  
32 been diagnosed with a communicable disease as defined in section 36-661 by  
33 the prescribing or dispensing physician assistant.

34 (mm) Engaging in sexual conduct with a current patient or with a  
35 former patient within six months after the last medical consultation  
36 unless the patient was the licensee's spouse at the time of the contact  
37 or, immediately preceding the professional relationship, was in a dating  
38 or engagement relationship with the licensee. For the purposes of this  
39 subdivision, "sexual conduct" includes:

40 (i) Engaging in or soliciting sexual relationships, whether  
41 consensual or nonconsensual.

42 (ii) Making sexual advances, requesting sexual favors or engaging  
43 in other verbal conduct or physical contact of a sexual nature with a  
44 patient.

1 (iii) Intentionally viewing a completely or partially disrobed  
2 patient in the course of treatment if the viewing is not related to  
3 patient diagnosis or treatment under current practice standards.

4 (nn) Performing health care tasks under a false or assumed name in  
5 this state.

6 Sec. 3. Section 32-2531, Arizona Revised Statutes, is amended to  
7 read:

8 32-2531. Physician assistant scope of practice; health care  
9 tasks; supervising physician duties; civil penalty

10 A. A supervising physician may delegate health care tasks to a  
11 physician assistant.

12 ~~B. A physician assistant shall not perform surgical abortions as~~  
13 ~~defined in section 36-2151.~~

14 ~~C.~~ B. The physician assistant may perform those duties and  
15 responsibilities, including ~~the~~ ordering, prescribing, dispensing and  
16 ~~administration of~~ ADMINISTERING drugs and medical devices, that are  
17 delegated by the supervising physician.

18 ~~D.~~ C. The physician assistant may provide any medical service that  
19 is delegated by the supervising physician if the service is within the  
20 physician assistant's skills, is within the physician's scope of practice  
21 and is supervised by the physician.

22 ~~E.~~ D. The physician assistant may pronounce death and, if  
23 delegated, may authenticate by the physician assistant's signature any  
24 form that may be authenticated by a physician's signature.

25 ~~F.~~ E. The physician assistant is the agent of the physician  
26 assistant's supervising physician in ~~the performance of~~ PERFORMING all  
27 practice related activities, including ~~the~~ ordering ~~of~~ diagnostic,  
28 therapeutic and other medical services.

29 ~~G.~~ F. The physician assistant may perform health care tasks in any  
30 setting authorized by the supervising physician, including physician  
31 offices, clinics, hospitals, ambulatory surgical centers, patient homes,  
32 nursing homes and other health care institutions. These tasks may  
33 include:

- 34 1. Obtaining patient histories.
- 35 2. Performing physical examinations.
- 36 3. Ordering and performing diagnostic and therapeutic procedures.
- 37 4. Formulating a diagnostic impression.
- 38 5. Developing and implementing a treatment plan.
- 39 6. Monitoring the effectiveness of therapeutic interventions.
- 40 7. Assisting in surgery.
- 41 8. Offering counseling and education to meet patient needs.
- 42 9. Making appropriate referrals.
- 43 10. Prescribing schedule IV or V controlled substances as defined  
44 in the federal controlled substances act of 1970 (P.L. 91-513; 84 Stat.

1 1242; 21 United States Code section 802) and prescription-only  
2 medications.

3 11. Prescribing schedule II and III controlled substances as  
4 defined in the federal controlled substances act of 1970.

5 12. Performing minor surgery as defined in section 32-2501.

6 13. Performing other nonsurgical health care tasks that are  
7 normally taught in courses of training approved by the board, that are  
8 consistent with the training and experience of the physician assistant and  
9 that have been properly delegated by the supervising physician.

10 ~~H.~~ G. The supervising physician shall:

11 1. Meet the requirements established by the board for supervising a  
12 physician assistant.

13 2. Accept responsibility for all tasks and duties the physician  
14 delegates to a physician assistant.

15 3. Notify the board and the physician assistant in writing if the  
16 physician assistant exceeds the scope of the delegated health care tasks.

17 4. Maintain a written agreement with the physician assistant. The  
18 agreement must state that the physician will exercise supervision over the  
19 physician assistant and retains professional and legal responsibility for  
20 the care rendered by the physician assistant. The agreement must be  
21 signed by the supervising physician and the physician assistant and  
22 updated annually. The agreement must be kept on file at the practice site  
23 and made available to the board on request. Each year the board shall  
24 randomly audit at least five ~~per cent~~ PERCENT of these agreements for  
25 compliance.

26 ~~F.~~ H. A physician's ability to supervise a physician assistant is  
27 not affected by restrictions imposed by the board on a physician assistant  
28 pursuant to disciplinary action taken by the board.

29 ~~G.~~ I. Supervision must be continuous but does not require the  
30 personal presence of the physician at the place where health care tasks  
31 are performed if the physician assistant is in contact with the  
32 supervising physician by telecommunication. If the physician assistant  
33 practices in a location where a supervising physician is not routinely  
34 present, the physician assistant must meet in person or by  
35 telecommunication with a supervising physician at least once each week to  
36 ensure ongoing direction and oversight of the physician assistant's work.  
37 The board by order may require the personal presence of a supervising  
38 physician when designated health care tasks are performed.

39 ~~K.~~ J. At all times while a physician assistant is on duty, the  
40 physician assistant shall wear a name tag with the designation "physician  
41 assistant" on it.

42 ~~L.~~ K. The board by rule may prescribe a civil penalty for a  
43 violation of this article. The penalty shall not exceed ~~fifty dollars~~ \$50  
44 for each violation. The board shall deposit, pursuant to sections 35-146  
45 and 35-147, all monies it receives from this penalty in the state general

1 fund. A physician assistant and the supervising physician may contest the  
2 imposition of this penalty pursuant to board rule. The imposition of a  
3 civil penalty is public information, and the board may use this  
4 information in any future disciplinary actions.

5 Sec. 4. Section 32-2532, Arizona Revised Statutes, is amended to  
6 read:

7 32-2532. Prescribing, administering and dispensing drugs;  
8 limits and requirements; notice

9 A. Except as provided in subsection F of this section, a physician  
10 assistant shall not prescribe, dispense or administer:

11 1. A schedule II or schedule III controlled substance as defined in  
12 the federal controlled substances act of 1970 (P.L. 91-513; 84 Stat. 1242;  
13 21 United States Code section 802) without delegation by the supervising  
14 physician, board approval and United States drug enforcement  
15 administration registration.

16 2. A schedule IV or schedule V controlled substance as defined in  
17 the federal controlled substances act of 1970 without United States drug  
18 enforcement administration registration and delegation by the supervising  
19 physician.

20 3. Prescription-only medication without delegation by the  
21 supervising physician.

22 ~~4. Prescription medication intended to perform or induce an~~  
23 ~~abortion.~~

24 B. All prescription orders issued by a physician assistant shall  
25 contain the name, address and telephone number of the physician assistant.  
26 A physician assistant shall issue prescription orders for controlled  
27 substances under the physician assistant's own United States drug  
28 enforcement administration registration number.

29 C. If certified for prescription privileges pursuant to section  
30 32-2504, subsection A, initial prescriptions for schedule II controlled  
31 substances that are opioids are subject to the limits prescribed in  
32 sections 32-3248 and 32-3248.01 if the physician assistant has been  
33 delegated to prescribe schedule II controlled substances by the  
34 supervising physician pursuant to this section. For each schedule IV or  
35 schedule V controlled substance, the physician assistant may not prescribe  
36 the controlled substance more than five times in a six-month period for  
37 each patient.

38 D. A prescription for a schedule III controlled substance that is  
39 an opioid or benzodiazepine is not refillable without the written consent  
40 of the supervising physician.

41 E. Prescription-only drugs shall not be dispensed, prescribed or  
42 refillable for a period exceeding one year.

43 F. Except in an emergency, a physician assistant may dispense  
44 schedule II or schedule III controlled substances for a period of use of  
45 not to exceed seventy-two hours with board approval or any other

1 controlled substance for a period of use of not to exceed ninety days and  
2 may administer controlled substances without board approval if it is  
3 medically indicated in an emergency dealing with potential loss of life or  
4 limb or major acute traumatic pain. Notwithstanding the authority granted  
5 in this subsection, a physician assistant may not dispense a schedule II  
6 controlled substance that is an opioid, except for an implantable device  
7 or an opioid that is for medication-assisted treatment for substance use  
8 disorders.

9 G. Except for samples provided by manufacturers, all drugs  
10 dispensed by a physician assistant shall be labeled to show the name of  
11 the physician assistant.

12 H. A physician assistant shall not obtain a drug from any source  
13 other than the supervising physician or a pharmacist. A physician  
14 assistant may receive manufacturers' samples if delegated to do so by the  
15 supervising physician.

16 I. If a physician assistant is approved by the board to prescribe,  
17 administer or dispense schedule II and schedule III controlled substances,  
18 the physician assistant shall maintain an up-to-date and complete log of  
19 all schedule II and schedule III controlled substances the physician  
20 assistant administers or dispenses. The board may not grant a physician  
21 assistant the authority to dispense schedule II controlled substances that  
22 are opioids, except for implantable devices or opioids that are for  
23 medication-assisted treatment for substance use disorders.

24 J. The ARIZONA REGULATORY board OF PHYSICIAN ASSISTANTS shall  
25 advise the Arizona state board of pharmacy and the United States drug  
26 enforcement administration of all physician assistants who are authorized  
27 to prescribe or dispense drugs and any modification of their authority.

28 K. The Arizona state board of pharmacy shall notify all pharmacies  
29 at least quarterly of physician assistants who are authorized to prescribe  
30 or dispense drugs.

31 Sec. 5. Section 32-2534, Arizona Revised Statutes, is amended to  
32 read:

33 32-2534. Initiation of practice

34 A physician assistant may not perform health care tasks until the  
35 physician assistant has completed and signed a written agreement with a  
36 supervising physician pursuant to section 32-2531, subsection ~~H~~ G,  
37 paragraph 4.

38 Sec. 6. Section 36-449.01, Arizona Revised Statutes, is amended to  
39 read:

40 36-449.01. Definitions

41 In this article, unless the context otherwise requires:

42 1. "Abortion" means the use of any means with the intent to  
43 terminate a woman's pregnancy for reasons other than to increase the  
44 probability of a live birth, to preserve the life or health of the child  
45 after a live birth, to terminate an ectopic pregnancy or to remove a dead

1 fetus. Abortion does not include birth control devices or oral  
2 contraceptives.

3 2. "Abortion clinic" means a facility, other than a hospital, in  
4 which five or more first trimester abortions in any month or any second or  
5 third trimester abortions are performed.

6 3. "Bodily remains" has the same meaning prescribed in section  
7 36-2151.

8 ~~4. "Director" means the director of the department of health  
9 services.~~

10 4. "HEALTH CARE PROVIDER" MEANS A PHYSICIAN WHO IS LICENSED  
11 PURSUANT TO TITLE 32, CHAPTER 13 OR 17, A PHYSICIAN ASSISTANT WHO IS  
12 LICENSED PURSUANT TO TITLE 32, CHAPTER 25 OR A NURSE PRACTITIONER WHO IS  
13 LICENSED PURSUANT TO TITLE 32, CHAPTER 15.

14 5. "Final disposition" has the same meaning prescribed in section  
15 36-301.

16 6. "Medication abortion" means the use of any medication, drug or  
17 other substance that is intended to cause or induce an abortion.

18 7. "Perform" includes the initial administration of any medication,  
19 drug or other substance intended to cause or induce an abortion.

20 8. "Surgical abortion" has the same meaning prescribed in section  
21 36-2151.

22 9. "Viable fetus" has the same meaning prescribed in section  
23 36-2301.01.

24 Sec. 7. Section 36-449.03, Arizona Revised Statutes, is amended to  
25 read:

26 36-449.03. Abortion clinics; rules; civil penalties

27 A. The director shall adopt rules for an abortion clinic's physical  
28 facilities. At a minimum these rules shall prescribe standards for:

29 1. Adequate private space that is specifically designated for  
30 interviewing, counseling and medical evaluations.

31 2. Dressing rooms for staff and patients.

32 3. Appropriate lavatory areas.

33 4. Areas for preprocedure hand washing.

34 5. Private procedure rooms.

35 6. Adequate lighting and ventilation for abortion procedures.

36 7. Surgical or gynecologic examination tables and other fixed  
37 equipment.

38 8. Postprocedure recovery rooms that are supervised, staffed and  
39 equipped to meet the patients' needs.

40 9. Emergency exits to accommodate a stretcher or gurney.

41 10. Areas for cleaning and sterilizing instruments.

42 11. Adequate areas to securely store medical records and necessary  
43 equipment and supplies.

1           12. The display in the abortion clinic, in a place that is  
2 conspicuous to all patients, of the clinic's current license issued by the  
3 department.

4           B. The director shall adopt rules to prescribe abortion clinic  
5 supplies and equipment standards, including supplies and equipment that  
6 are required to be immediately available for use or in an emergency. At a  
7 minimum these rules shall:

8           1. Prescribe required equipment and supplies, including  
9 medications, required to conduct, in an appropriate fashion, any abortion  
10 procedure that the medical staff of the clinic anticipates performing and  
11 to monitor the progress of each patient throughout the procedure and  
12 recovery period.

13           2. Require that the number or amount of equipment and supplies at  
14 the clinic is adequate at all times to ensure sufficient quantities of  
15 clean and sterilized durable equipment and supplies to meet the needs of  
16 each patient.

17           3. Prescribe required equipment, supplies and medications that  
18 shall be available and ready for immediate use in an emergency and  
19 requirements for written protocols and procedures to be followed by staff  
20 in an emergency, such as the loss of electrical power.

21           4. Prescribe required equipment and supplies for required  
22 laboratory tests and requirements for protocols to calibrate and maintain  
23 laboratory equipment at the abortion clinic or operated by clinic staff.

24           5. Require ultrasound equipment.

25           6. Require that all equipment is safe for the patient and the  
26 staff, meets applicable federal standards and is checked annually to  
27 ensure safety and appropriate calibration.

28           C. The director shall adopt rules relating to abortion clinic  
29 personnel. At a minimum these rules shall require that:

30           1. The abortion clinic designate a medical director of the abortion  
31 clinic who is licensed pursuant to title 32, chapter 13, 17 or 29.

32           2. ~~Physicians HEALTH CARE PROVIDERS performing abortions are~~  
33 ~~licensed pursuant to title 32, chapter 13 or 17,~~ demonstrate competence in  
34 the procedure involved and are acceptable to the medical director of the  
35 abortion clinic.

36           3. A physician is available:

37           (a) For a surgical abortion who has admitting privileges at a  
38 health care institution that is classified by the director as a hospital  
39 pursuant to section 36-405, subsection B and that is within thirty miles  
40 of the abortion clinic.

41           (b) For a medication abortion who has admitting privileges at a  
42 health care institution that is classified by the director as a hospital  
43 pursuant to section 36-405, subsection B.

44           4. If a physician is not present, a registered nurse, nurse  
45 practitioner, licensed practical nurse or physician assistant is present

1 and remains at the clinic when abortions are performed to provide  
2 postoperative monitoring and care, or monitoring and care after inducing a  
3 medication abortion, until each patient who had an abortion that day is  
4 discharged.

5 5. Surgical assistants receive training in counseling, patient  
6 advocacy and the specific responsibilities of the services the surgical  
7 assistants provide.

8 6. Volunteers receive training in the specific responsibilities of  
9 the services the volunteers provide, including counseling and patient  
10 advocacy as provided in the rules adopted by the director for different  
11 types of volunteers based on their responsibilities.

12 D. The director shall adopt rules relating to ~~the medical~~ **MEDICALLY**  
13 screening and ~~evaluation of~~ **EVALUATING** each abortion clinic patient. At a  
14 minimum these rules shall require:

15 1. A medical history, including the following:

16 (a) Reported allergies to medications, antiseptic solutions or  
17 latex.

18 (b) Obstetric and gynecologic history.

19 (c) Past surgeries.

20 2. A physical examination, including a bimanual examination  
21 estimating uterine size and palpation of the adnexa.

22 3. The appropriate laboratory tests, including:

23 (a) Urine or blood tests for pregnancy performed before the  
24 abortion procedure.

25 (b) A test for anemia.

26 (c) Rh typing, unless reliable written documentation of blood type  
27 is available.

28 (d) Other tests as indicated from the physical examination.

29 4. An ultrasound evaluation for all patients. The rules shall  
30 require that if a person who is not a physician performs an ultrasound  
31 examination, that person shall have documented evidence that the person  
32 completed a course in operating ultrasound equipment as prescribed in  
33 rule. The physician or other health care professional shall review, at  
34 the request of the patient, the ultrasound evaluation results with the  
35 patient before the abortion procedure is performed, including the probable  
36 gestational age of the fetus.

37 5. That ~~the~~ **A physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT**  
38 is responsible for estimating the gestational age of the fetus based on  
39 the ultrasound examination and obstetric standards in keeping with  
40 established standards of care regarding the estimation of fetal age as  
41 defined in rule and shall write the estimate in the patient's medical  
42 history. The physician, **NURSE PRACTITIONER OR PHYSICIAN ASSISTANT** shall  
43 keep original prints of each ultrasound examination of a patient in the  
44 patient's medical history file.



1 E. The director shall adopt rules relating to the abortion  
2 procedure. At a minimum these rules shall require:

3 1. That medical personnel is available to all patients throughout  
4 the abortion procedure.

5 2. Standards for the safe conduct of abortion procedures that  
6 conform to obstetric standards in keeping with established standards of  
7 care regarding the estimation of fetal age as defined in rule.

8 3. Appropriate use of local anesthesia, analgesia and sedation if  
9 ordered by the physician, **NURSE PRACTITIONER OR PHYSICIAN ASSISTANT**.

10 4. The use of appropriate precautions, such as establishing  
11 intravenous access at least for patients undergoing second or third  
12 trimester abortions.

13 5. The use of appropriate monitoring of the vital signs and other  
14 defined signs and markers of the patient's status throughout the abortion  
15 procedure and during the recovery period until the patient's condition is  
16 deemed to be stable in the recovery room.

17 6. For abortion clinics performing or inducing an abortion for a  
18 woman whose unborn child is the gestational age of twenty weeks or more,  
19 minimum equipment standards to assist the physician in complying with  
20 section 36-2301. For the purposes of this paragraph, "abortion" and  
21 "gestational age" have the same meanings prescribed in section 36-2151.

22 F. The director shall adopt rules relating to the final disposition  
23 of bodily remains. At a minimum these rules shall require that:

24 1. The final disposition of bodily remains from a surgical abortion  
25 be by cremation or interment.

26 2. For a surgical abortion, the woman on whom the abortion is  
27 performed has the right to determine the method and location for final  
28 disposition of bodily remains.

29 G. The director shall adopt rules that prescribe minimum recovery  
30 room standards. At a minimum these rules shall require that:

31 1. For a surgical abortion, immediate postprocedure care, or care  
32 provided after inducing a medication abortion, consists of observation in  
33 a supervised recovery room for as long as the patient's condition  
34 warrants.

35 2. The clinic arrange hospitalization if any complication beyond  
36 the management capability of the staff occurs or is suspected.

37 3. A licensed health professional who is trained in managing the  
38 recovery area and who is capable of providing basic cardiopulmonary  
39 resuscitation and related emergency procedures remains on the premises of  
40 the abortion clinic until all patients are discharged.

41 4. For a surgical abortion, a physician with admitting privileges  
42 at a health care institution that is classified by the director as a  
43 hospital pursuant to section 36-405, subsection B and that is within  
44 thirty miles of the abortion clinic remains on the premises of the  
45 abortion clinic until all patients are stable and are ready to leave the

1 recovery room and to facilitate the transfer of emergency cases if  
2 hospitalization of the patient or viable fetus is necessary. A physician,  
3 NURSE PRACTITIONER OR PHYSICIAN ASSISTANT shall sign the discharge order  
4 and be readily accessible and available until the last patient is  
5 discharged.

6 5. A physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT discusses  
7 RhO(d) immune globulin with each patient for whom it is indicated and  
8 ensures that it is offered to the patient in the immediate postoperative  
9 period or that it will be available to her within seventy-two hours after  
10 completion of the abortion procedure. If the patient refuses, a refusal  
11 form approved by the department shall be signed by the patient and a  
12 witness and included in the medical record.

13 6. Written instructions with regard to postabortion coitus, signs  
14 of possible problems and general aftercare are given to each patient.  
15 Each patient shall have specific instructions regarding access to medical  
16 care for complications, including a telephone number to call for medical  
17 emergencies.

18 7. There is a specified minimum length of time that a patient  
19 remains in the recovery room by type of abortion procedure and duration of  
20 gestation.

21 8. The physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT ensures  
22 that a licensed health professional from the abortion clinic makes a good  
23 faith effort to contact the patient by telephone, with the patient's  
24 consent, within twenty-four hours after a surgical abortion to assess the  
25 patient's recovery.

26 9. Equipment and services are located in the recovery room to  
27 provide appropriate emergency resuscitative and life support procedures  
28 pending the transfer of the patient or viable fetus to the hospital.

29 H. The director shall adopt rules that prescribe standards for  
30 follow-up visits. At a minimum these rules shall require that:

31 1. For a surgical abortion, a postabortion medical visit is offered  
32 and, if requested, scheduled for three weeks after the abortion, including  
33 a medical examination and a review of the results of all laboratory tests.  
34 For a medication abortion, the rules shall require that a postabortion  
35 medical visit is scheduled between one week and three weeks after the  
36 initial dose for a medication abortion to confirm the pregnancy is  
37 completely terminated and to assess the degree of bleeding.

38 2. A urine pregnancy test is obtained at the time of the follow-up  
39 visit to rule out continuing pregnancy. If a continuing pregnancy is  
40 suspected, the patient shall be evaluated and a physician, NURSE  
41 PRACTITIONER OR PHYSICIAN ASSISTANT who performs abortions shall be  
42 consulted.

43 I. The director shall adopt rules to prescribe minimum abortion  
44 clinic incident reporting. At a minimum these rules shall require that:

1           1. The abortion clinic records each incident resulting in a  
2 patient's or viable fetus' serious injury occurring at an abortion clinic  
3 and shall report them in writing to the department within ten days after  
4 the incident. For the purposes of this paragraph, "serious injury" means  
5 an injury that occurs at an abortion clinic and that creates a serious  
6 risk of substantial impairment of a major body organ and includes any  
7 injury or condition that requires ambulance transportation of the patient.

8           2. If a patient's death occurs, other than a fetal death properly  
9 reported pursuant to law, the abortion clinic reports it to the department  
10 not later than the next department work day.

11           3. Incident reports are filed with the department and appropriate  
12 professional regulatory boards.

13           J. The director shall adopt rules relating to enforcement of this  
14 article. At a minimum, these rules shall require that:

15           1. For an abortion clinic that is not in substantial compliance  
16 with this article and the rules adopted pursuant to this article and  
17 section 36-2301 or that is in substantial compliance but refuses to carry  
18 out a plan of correction acceptable to the department of any deficiencies  
19 that are listed on the department's statement of deficiency, the  
20 department may do any of the following:

- 21           (a) Assess a civil penalty pursuant to section 36-431.01.
- 22           (b) Impose an intermediate sanction pursuant to section 36-427.
- 23           (c) Suspend or revoke a license pursuant to section 36-427.
- 24           (d) Deny a license.
- 25           (e) Bring an action for an injunction pursuant to section 36-430.

26           2. In determining the appropriate enforcement action, the  
27 department consider the threat to the health, safety and welfare of the  
28 abortion clinic's patients or the general public, including:

- 29           (a) Whether the abortion clinic has repeated violations of statutes  
30 or rules.
- 31           (b) Whether the abortion clinic has engaged in a pattern of  
32 noncompliance.
- 33           (c) The type, severity and number of violations.

34           K. The department shall not release personally identifiable patient  
35 or ~~physician~~ HEALTH CARE PROVIDER information.

36           L. The rules adopted by the director pursuant to this section do  
37 not limit the ability of a physician or other health professional to  
38 advise a patient on any health issue.

39           Sec. 8. Section 36-2152, Arizona Revised Statutes, is amended to  
40 read:

41           36-2152. Parental consent; exceptions; hearings; time limits;  
42                           violations; classification; civil relief; statute  
43                           of limitations

44           A. In addition to the other requirements of this chapter, a person  
45 shall not knowingly perform an abortion on a pregnant unemancipated minor

1 unless the attending physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT  
2 has secured the written and notarized consent from one of the minor's  
3 parents or the minor's guardian or conservator or unless a judge of the  
4 superior court authorizes the physician to perform the abortion pursuant  
5 to subsection B of this section. Notwithstanding section 41-319, the  
6 notarized statement of parental consent and the description of the  
7 document or notarial act recorded in the notary journal are confidential  
8 and are not public records.

9 B. A judge of the superior court, on petition or motion, and after  
10 an appropriate hearing, shall authorize a physician, NURSE PRACTITIONER OR  
11 PHYSICIAN ASSISTANT to perform the abortion if the judge determines that  
12 the pregnant minor is mature and capable of giving informed consent to the  
13 proposed abortion. If the judge determines that the pregnant minor is not  
14 mature or if the pregnant minor does not claim to be mature, the judge  
15 shall determine whether the performance of an abortion on her without the  
16 consent from one of her parents or her guardian or conservator would be in  
17 her best interests and shall authorize a physician, NURSE PRACTITIONER OR  
18 PHYSICIAN ASSISTANT to perform the abortion without consent if the judge  
19 concludes that the pregnant minor's best interests would be served.

20 C. If the pregnant minor claims to be mature at a proceeding held  
21 pursuant to subsection B of this section, the minor must prove by clear  
22 and convincing evidence that she is sufficiently mature and capable of  
23 giving informed consent without consulting her parent or legal guardian  
24 based on her experience level, perspective and judgment. In assessing the  
25 pregnant minor's experience level, the court may consider, among other  
26 relevant factors, the minor's age and experiences working outside the  
27 home, living away from home, traveling on her own, handling personal  
28 finances and making other significant decisions. In assessing the  
29 pregnant minor's perspective, the court may consider, among other relevant  
30 factors, what steps the minor took to explore her options and the extent  
31 to which she considered and weighed the potential consequences of each  
32 option. In assessing the pregnant minor's judgment, the court may  
33 consider, among other relevant factors, the minor's conduct since learning  
34 of her pregnancy and her intellectual ability to understand her options  
35 and to make an informed decision.

36 D. The pregnant minor may participate in the court proceedings on  
37 her own behalf. The court shall appoint a guardian ad litem for her. The  
38 court shall advise her that she has the right to court-appointed counsel  
39 and, on her request, shall provide her with counsel unless she appears  
40 through private counsel or she knowingly and intelligently waives her  
41 right to counsel.

42 E. Proceedings in the court under this section are confidential and  
43 have precedence over other pending matters. Members of the public shall  
44 not inspect, obtain copies of or otherwise have access to records of court  
45 proceedings under this section unless authorized by law. A judge who

1 conducts proceedings under this section shall make in writing specific  
2 factual findings and legal conclusions supporting the decision and shall  
3 order a confidential record of the evidence to be maintained, including  
4 the judge's own findings and conclusions. The minor may file the petition  
5 using a fictitious name. For the purposes of this subsection, public does  
6 not include judges, clerks, administrators, professionals or other persons  
7 employed by or working under the supervision of the court or employees of  
8 other public agencies who are authorized by state or federal rule or law  
9 to inspect and copy closed court records.

10 F. The court shall hold the hearing and shall issue a ruling within  
11 forty-eight hours, excluding weekends and holidays, after the petition is  
12 filed. If the court fails to issue a ruling within this time period, the  
13 petition is deemed to have been granted and the consent requirement is  
14 waived.

15 G. An expedited confidential appeal is available to a pregnant  
16 minor for whom the court denies an order authorizing an abortion without  
17 parental consent. The appellate court shall hold the hearing and issue a  
18 ruling within forty-eight hours, excluding weekends and holidays, after  
19 the petition for appellate review is filed. Filing fees are not required  
20 of the pregnant minor at either the trial or the appellate level.

21 H. Parental consent or judicial authorization is not required under  
22 this section if either:

23 1. The pregnant minor certifies to the attending physician, NURSE  
24 PRACTITIONER OR PHYSICIAN ASSISTANT that the pregnancy resulted from  
25 sexual conduct with ~~a~~ THE minor by the minor's parent, stepparent, uncle,  
26 grandparent, sibling, adoptive parent, legal guardian or foster parent or  
27 by a person who lives in the same household with the minor and the minor's  
28 mother. The ~~physician~~ HEALTH CARE PROVIDER performing the abortion shall  
29 report the sexual conduct with ~~a~~ THE minor to the proper law enforcement  
30 officials pursuant to section 13-3620 and shall preserve and forward a  
31 sample of the fetal tissue to these officials for use in a criminal  
32 investigation.

33 2. The attending physician, NURSE PRACTITIONER OR PHYSICIAN  
34 ASSISTANT certifies in the pregnant minor's medical record that, on the  
35 basis of the physician's HEALTH CARE PROVIDER'S good faith clinical  
36 judgment, the pregnant minor has a condition that so complicates her  
37 medical condition as to necessitate the immediate abortion of her  
38 pregnancy to avert her death or for which a delay will create serious risk  
39 of substantial and irreversible impairment of major bodily function.

40 I. A person who performs an abortion in violation of this section  
41 is guilty of a class 1 misdemeanor. A person who intentionally causes,  
42 aids or assists a minor in obtaining an abortion in violation of this  
43 section is guilty of a class 1 misdemeanor. A person is not subject to  
44 any liability under this section if the person establishes by written  
45 evidence that the person relied on evidence sufficient to convince a

1 careful and prudent person that the representations of the pregnant minor  
2 regarding information necessary to comply with this section are true.

3 J. In addition to other remedies available under the common or  
4 statutory law of this state, one or both of the minor's parents or the  
5 minor's guardian may bring a civil action in the superior court in the  
6 county in which the parents or the guardian resides to obtain appropriate  
7 relief for a violation of this section, unless the pregnancy resulted from  
8 the criminal conduct of the parent or guardian. The civil action may be  
9 based on a claim that failure to obtain consent was a result of simple  
10 negligence, gross negligence, wantonness, wilfulness, intention or any  
11 other legal standard of care. The civil action may be brought against the  
12 person who performs the abortion in violation of this section and any  
13 person who causes, aids or assists a minor to obtain an abortion without  
14 meeting the requirements of this section. Relief pursuant to this  
15 subsection includes the following:

16 1. Money damages for all psychological, emotional and physical  
17 injuries that result from the violation of this section.

18 2. Statutory damages in an amount equal to \$5,000 or three times  
19 the cost of the abortion, whichever is greater.

20 3. Reasonable attorney fees and costs.

21 K. A civil action brought pursuant to this section must be  
22 initiated within six years after the violation occurred.

23 L. The consent required by this section must be obtained on a form  
24 prescribed by the department of health services. At a minimum, the form  
25 must:

26 1. List the possible medical risks that may occur with any  
27 surgical, medical or diagnostic procedure, including the potential for  
28 infection, blood clots, hemorrhage, allergic reactions and death.

29 2. List the possible medical risks that may occur with a surgical  
30 abortion, including hemorrhage, uterine perforation, sterility, injury to  
31 the bowel or bladder, a possible hysterectomy as a result of a  
32 complication or injury during the procedure and failure to remove the  
33 unborn child that may result in an additional procedure.

34 3. List the possible medical risks that may occur with a medication  
35 abortion, including hemorrhage, infection, failure to remove the unborn  
36 child that may result in an additional procedure, sterility and the  
37 possible continuation of the pregnancy.

38 4. Require the pregnant minor's and the pregnant minor's parent's  
39 initials on each page of the form and a full signature on the final page  
40 of the form.

41 5. Include a space for the notary's signature and seal on the final  
42 page of the form.

43 M. The physician, **NURSE PRACTITIONER OR PHYSICIAN ASSISTANT** must  
44 maintain the form in the pregnant minor's records for seven years after

1 the date of the procedure or five years after the date of the minor's  
2 maturity, whichever is longer.

3 Sec. 9. Section 36-2153, Arizona Revised Statutes, is amended to  
4 read:

5 36-2153. Informed consent; requirements; information;  
6 website; signage; violation; civil relief; statute  
7 of limitations

8 A. An abortion shall not be performed or induced without the  
9 voluntary and informed consent of the woman on whom the abortion is to be  
10 performed or induced. Except in the case of a medical emergency and in  
11 addition to the other requirements of this chapter, consent to an abortion  
12 is voluntary and informed only if all of the following are true:

13 1. ~~At least twenty-four hours~~ Before the abortion, the physician,  
14 NURSE PRACTITIONER OR PHYSICIAN ASSISTANT who is to perform the abortion  
15 or the referring physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT has  
16 informed the woman, orally and in person, of:

17 (a) The name of the physician, NURSE PRACTITIONER OR PHYSICIAN  
18 ASSISTANT who will perform the abortion.

19 (b) The nature of the proposed procedure or treatment.

20 (c) The immediate and long-term medical risks associated with the  
21 procedure that a reasonable patient would consider material to the  
22 decision of whether or not to undergo the abortion.

23 (d) Alternatives to the procedure or treatment that a reasonable  
24 patient would consider material to the decision of whether or not to  
25 undergo the abortion.

26 (e) The probable gestational age of the unborn child at the time  
27 the abortion is to be performed.

28 (f) The probable anatomical and physiological characteristics of  
29 the unborn child at the time the abortion is to be performed.

30 (g) The medical risks associated with carrying the child to term.

31 2. ~~At least twenty-four hours~~ Before the abortion, the physician,  
32 NURSE PRACTITIONER OR PHYSICIAN ASSISTANT who is to perform the abortion,  
33 the referring physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT or a  
34 qualified physician, physician assistant, nurse, psychologist or licensed  
35 behavioral health professional to whom the responsibility has been  
36 delegated by either physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT  
37 has informed the woman, orally and in person, that:

38 (a) Medical assistance benefits may be available for prenatal care,  
39 childbirth and neonatal care.

40 (b) The father of the unborn child is liable to assist in the  
41 support of the child, even if he has offered to pay for the abortion. In  
42 the case of rape or incest, this information may be omitted.

43 (c) Public and private agencies and services are available to  
44 assist the woman during her pregnancy and after the birth of her child if

1 she chooses not to have an abortion, whether she chooses to keep the child  
2 or place the child for adoption.

3 (d) It is unlawful for any person to coerce a woman to undergo an  
4 abortion.

5 (e) The woman is free to withhold or withdraw her consent to the  
6 abortion at any time without affecting her right to future care or  
7 treatment and without the loss of any state or federally funded benefits  
8 to which she might otherwise be entitled.

9 (f) The department of health services maintains a website that  
10 describes the unborn child and lists the agencies that offer alternatives  
11 to abortion.

12 (g) The woman has the right to review the website and that a  
13 printed copy of the materials on the website will be provided to her free  
14 of charge if she chooses to review these materials.

15 (h) In the case of a surgical abortion, the woman has the right to  
16 determine final disposition of bodily remains and to be informed of the  
17 available options for locations and methods for disposition of bodily  
18 remains.

19 3. The information in paragraphs 1 and 2 of this subsection is  
20 provided to the woman individually and in a private room to protect her  
21 privacy and to ensure that the information focuses on her individual  
22 circumstances and that she has adequate opportunity to ask questions.

23 4. The woman certifies in writing before the abortion that the  
24 information required to be provided pursuant to paragraphs 1 and 2 of this  
25 subsection has been provided.

26 5. In the case of a surgical abortion, if the woman desires to  
27 exercise her right to determine final disposition of bodily remains, the  
28 woman indicates in writing her choice for the location and method of final  
29 disposition of bodily remains.

30 B. If a woman has taken mifepristone as part of a two-drug regimen  
31 to terminate her pregnancy, has not yet taken the second drug and consults  
32 an abortion clinic questioning her decision to terminate her pregnancy or  
33 seeking information regarding the health of her fetus or the efficacy of  
34 mifepristone alone to terminate a pregnancy, the abortion clinic staff  
35 shall inform the woman that the use of mifepristone alone to end a  
36 pregnancy is not always effective and that she should immediately consult  
37 a physician, **NURSE PRACTITIONER OR PHYSICIAN ASSISTANT** if she would like  
38 more information.

39 C. If a medical emergency compels the performance of an abortion,  
40 the physician, **NURSE PRACTITIONER OR PHYSICIAN ASSISTANT** shall inform the  
41 woman, before the abortion if possible, of the medical indications  
42 supporting the physician's, **NURSE PRACTITIONER'S OR PHYSICIAN ASSISTANT'S**  
43 judgment that an abortion is necessary to avert the woman's death or to  
44 avert substantial and irreversible impairment of a major bodily function.



1 D. The department of health services shall establish and shall  
2 annually update a website that includes a link to a printable version of  
3 all materials listed on the website. The materials must be written in an  
4 easily understood manner and printed in a typeface that is large enough to  
5 be clearly legible. The website must include all of the following  
6 materials:

7 1. Information that is organized geographically by location and  
8 that is designed to inform the woman about public and private agencies and  
9 services that are available to assist a woman through pregnancy, at  
10 childbirth and while her child is dependent, including adoption agencies.  
11 The materials shall include a comprehensive list of the agencies, a  
12 description of the services they offer and the manner in which these  
13 agencies may be contacted, including the agencies' telephone numbers and  
14 website addresses.

15 2. Information on the availability of medical assistance benefits  
16 for prenatal care, childbirth and neonatal care.

17 3. A statement that it is unlawful for any person to coerce a woman  
18 to undergo an abortion.

19 4. A statement that any physician, **NURSE PRACTITIONER OR PHYSICIAN**  
20 **ASSISTANT** who performs an abortion on a woman without obtaining the  
21 woman's voluntary and informed consent or without affording her a private  
22 medical consultation may be liable to the woman for damages in a civil  
23 action.

24 5. A statement that the father of a child is liable to assist in  
25 the support of that child, even if the father has offered to pay for an  
26 abortion, and that the law allows adoptive parents to pay costs of  
27 prenatal care, childbirth and neonatal care.

28 6. Information that is designed to inform the woman of the probable  
29 anatomical and physiological characteristics of the unborn child at  
30 two-week gestational increments from fertilization to full term, including  
31 pictures or drawings representing the development of unborn children at  
32 two-week gestational increments and any relevant information on the  
33 possibility of the unborn child's survival. The pictures or drawings must  
34 contain the dimensions of the unborn child and must be realistic and  
35 appropriate for each stage of pregnancy. The information provided  
36 pursuant to this paragraph must be objective, nonjudgmental and designed  
37 to convey only accurate scientific information about the unborn child at  
38 the various gestational ages.

39 7. Objective information that describes the methods of abortion  
40 procedures commonly employed, the medical risks commonly associated with  
41 each procedure, the possible detrimental psychological effects of abortion  
42 and the medical risks commonly associated with carrying a child to term.

43 8. Information explaining the efficacy of mifepristone taken alone,  
44 without a follow-up drug as part of a two-drug regimen, to terminate a  
45 pregnancy and advising a woman to immediately contact a physician, **NURSE**

1 PRACTITIONER OR PHYSICIAN ASSISTANT if the woman has taken only  
2 mifepristone and questions her decision to terminate her pregnancy or  
3 seeks information regarding the health of her fetus.

4 E. An individual who is not a physician, NURSE PRACTITIONER OR  
5 PHYSICIAN ASSISTANT shall not perform a surgical abortion.

6 ~~F. A person shall not write or communicate a prescription for a  
7 drug or drugs to induce an abortion or require or obtain payment for a  
8 service provided to a patient who has inquired about an abortion or  
9 scheduled an abortion until the twenty-four hour reflection period  
10 required by subsection A of this section expires.~~

11 ~~G.~~ F. A person shall not intimidate or coerce in any way any  
12 person to obtain an abortion. A parent, a guardian or any other person  
13 shall not coerce a minor to obtain an abortion. If a minor is denied  
14 financial support by the minor's parents, guardians or custodian due to  
15 the minor's refusal to have an abortion performed, the minor is deemed  
16 emancipated for the purposes of eligibility for public assistance  
17 benefits, except that the emancipated minor may not use these benefits to  
18 obtain an abortion.

19 ~~H.~~ G. An abortion clinic as defined in section 36-449.01 shall  
20 conspicuously post signs that are visible to all who enter the abortion  
21 clinic, that are clearly readable and that state it is unlawful for any  
22 person to force a woman to have an abortion and a woman who is being  
23 forced to have an abortion has the right to contact any local or state law  
24 enforcement or social service agency to receive protection from any actual  
25 or threatened physical, emotional or psychological abuse. The signs shall  
26 be posted in the waiting room, consultation rooms and procedure rooms.

27 ~~I.~~ H. A person shall not require a woman to obtain an abortion as  
28 a provision in a contract or as a condition of employment.

29 ~~J.~~ I. A physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT who  
30 knowingly violates this section commits an act of unprofessional conduct  
31 and is subject to license suspension or revocation ~~pursuant to title 32,  
32 chapter 13 or 17 BY THE HEALTH CARE PROVIDER'S REGULATORY BOARD.~~

33 ~~K.~~ J. In addition to other remedies available under the common or  
34 statutory law of this state, any of the following may file a civil action  
35 to obtain appropriate relief for a violation of this section:

36 1. A woman on whom an abortion has been performed without her  
37 informed consent as required by this section.

38 2. The father of the unborn child if the father was married to the  
39 mother at the time she received the abortion, unless the pregnancy  
40 resulted from the plaintiff's criminal conduct.

41 3. A maternal grandparent of the unborn child if the mother was not  
42 at least eighteen years of age at the time of the abortion, unless the  
43 pregnancy resulted from the plaintiff's criminal conduct.

1 ~~I~~ K. A civil action filed pursuant to subsection ~~K~~ J of this  
2 section shall be brought in the superior court in the county in which the  
3 woman on whom the abortion was performed resides and may be based on a  
4 claim that failure to obtain informed consent was a result of simple  
5 negligence, gross negligence, wantonness, wilfulness, intention or any  
6 other legal standard of care. Relief pursuant to subsection ~~K~~ J of this  
7 section includes the following:

- 8 1. Money damages for all psychological, emotional and physical  
9 injuries resulting from the violation of this section.
- 10 2. Statutory damages in an amount equal to \$5,000 or three times  
11 the cost of the abortion, whichever is greater.
- 12 3. Reasonable attorney fees and costs.

13 ~~M~~ L. A civil action brought pursuant to this section must be  
14 initiated within six years after the violation occurred.

15 Sec. 10. Section 36-2155, Arizona Revised Statutes, is amended to  
16 read:

17 36-2155. Performance of an abortion by individual who is not  
18 a health care provider; prohibition; definitions

19 A. An individual who is not a ~~physician~~ HEALTH CARE PROVIDER shall  
20 not perform a surgical abortion.

21 B. For the purposes of this section:

22 1. ~~"Physician" means a person who is~~ "HEALTH CARE PROVIDER" MEANS A  
23 PHYSICIAN WHO IS licensed pursuant to title 32, chapter 13 or 17, A NURSE  
24 PRACTITIONER WHO IS LICENSED PURSUANT TO TITLE 32, CHAPTER 15 OR A  
25 PHYSICIAN ASSISTANT WHO IS LICENSED PURSUANT TO TITLE 32, CHAPTER 25.

26 2. "Surgical abortion":

27 (a) Means the use of a surgical instrument or a machine to  
28 terminate the clinically diagnosable pregnancy of a woman with knowledge  
29 that the termination by those means will cause, with reasonable  
30 likelihood, the death of the unborn child. ~~Surgical abortion~~

31 (b) Does not include:

32 (i) The use of any means to increase the probability of a live  
33 birth, to preserve the life or health of the child after a live birth, to  
34 terminate an ectopic pregnancy or to remove a dead fetus. ~~Surgical~~  
35 ~~abortion does not include~~

36 (ii) Patient care incidental to the procedure.

37 Sec. 11. Section 36-2156, Arizona Revised Statutes, is amended to  
38 read:

39 36-2156. Informed consent; ultrasound required; violation;  
40 civil relief; statute of limitations

41 A. An abortion shall not be performed or induced without the  
42 voluntary and informed consent of the woman on whom the abortion is to be  
43 performed or induced. Except in the case of a medical emergency and in  
44 addition to the other requirements of this chapter, consent to an abortion  
45 is voluntary and informed only if both of the following are true:

1           1. ~~At least twenty-four hours~~ Before the woman having any part of  
2 an abortion performed or induced, and before the administration of any  
3 anesthesia or medication in preparation for the abortion on the woman, the  
4 physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT who is to perform the  
5 abortion, the referring physician, NURSE PRACTITIONER OR PHYSICIAN  
6 ASSISTANT or a qualified person working in conjunction with either  
7 physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT shall:

8           (a) Perform fetal ultrasound imaging and auscultation of fetal  
9 heart tone services on the woman undergoing the abortion.

10           (b) Offer to provide the woman with an opportunity to view the  
11 active ultrasound image of the unborn child and hear the heartbeat of the  
12 unborn child if the heartbeat is audible. The active ultrasound image  
13 must be of a quality consistent with standard medical practice in the  
14 community, contain the dimensions of the unborn child and accurately  
15 portray the presence of external members and internal organs, if present  
16 or viewable, of the unborn child. The auscultation of fetal heart tone  
17 must be of a quality consistent with standard medical practice in the  
18 community.

19           (c) Offer to provide the woman with a simultaneous explanation of  
20 what the ultrasound is depicting, including the presence and location of  
21 the unborn child within the uterus, the number of unborn children  
22 depicted, the dimensions of the unborn child and the presence of any  
23 external members and internal organs, if present or viewable.

24           (d) Offer to provide the patient with a physical picture of the  
25 ultrasound image of the unborn child.

26           2. The woman certifies in writing before the abortion that she has  
27 been given the opportunity to view the active ultrasound image and hear  
28 the heartbeat of the unborn child if the heartbeat is audible and that she  
29 opted to view or not view the active ultrasound image and hear or not hear  
30 the heartbeat of the unborn child.

31           B. A physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT who  
32 knowingly violates this section commits an act of unprofessional conduct  
33 and is subject to license suspension or revocation ~~pursuant to title 32,~~  
34 ~~chapter 13 or 17~~ BY THAT HEALTH CARE PROVIDER'S REGULATORY BOARD.

35           C. In addition to other remedies available under the common or  
36 statutory law of this state, any of the following may file a civil action  
37 to obtain appropriate relief for a violation of this section:

38           1. A woman on whom an abortion has been performed without her  
39 informed consent as required by this section.

40           2. The father of the unborn child if THE FATHER WAS married to the  
41 mother at the time she received the abortion, unless the pregnancy  
42 resulted from the plaintiff's criminal conduct.

1           3. ~~The~~ A maternal ~~grandparents~~ GRANDPARENT of the unborn child if  
2 the mother was not at least eighteen years of age at the time of the  
3 abortion, unless the pregnancy resulted from the plaintiff's criminal  
4 conduct.

5           D. A civil action filed pursuant to subsection C of this section  
6 shall be brought in the superior court in the county in which the woman on  
7 whom the abortion was performed resides and may be based on a claim that  
8 failure to obtain informed consent was a result of simple negligence,  
9 gross negligence, wantonness, wilfulness, intention or any other legal  
10 standard of care. Relief pursuant to subsection C of this section  
11 includes any of the following:

12           1. Money damages for all psychological, emotional and physical  
13 injuries resulting from the violation of this section.

14           2. Statutory damages in an amount equal to ~~five thousand dollars~~  
15 \$5,000 or three times the cost of the abortion, whichever is greater.

16           3. Reasonable attorney fees and costs.

17           E. A civil action brought pursuant to this section must be  
18 initiated within six years after the violation occurred.

19           Sec. 12. Section 36-2158, Arizona Revised Statutes, is amended to  
20 read:

21           36-2158. Informed consent; fetal condition; website;  
22 unprofessional conduct; civil relief; statute of  
23 limitations; definitions

24           A. A person shall not perform or induce an abortion without first  
25 obtaining the voluntary and informed consent of the woman on whom the  
26 abortion is to be performed or induced. Except in the case of a medical  
27 emergency and in addition to the other requirements of this chapter,  
28 consent to an abortion is voluntary and informed only if all of the  
29 following occur:

30           1. In the case of a woman seeking an abortion of her unborn child  
31 diagnosed with a lethal fetal condition, ~~at least twenty-four hours~~ before  
32 the abortion the physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT who  
33 is to perform the abortion or the referring physician, NURSE PRACTITIONER  
34 OR PHYSICIAN ASSISTANT has informed the woman, orally and in person, that:

35           (a) Perinatal hospice services are available and the physician,  
36 NURSE PRACTITIONER OR PHYSICIAN ASSISTANT has offered this care as an  
37 alternative to abortion.

38           (b) The department of health services maintains a website that  
39 lists perinatal hospice programs that are available both in this state and  
40 nationally and that are organized geographically by location.

41           (c) The woman has a right to review the website and that a printed  
42 copy of the materials on the website will be provided to her free of  
43 charge if she chooses to review these materials.

44           2. In the case of a woman seeking an abortion of her unborn child  
45 diagnosed with a nonlethal fetal condition, ~~at least twenty-four hours~~

1 before the abortion the physician, NURSE PRACTITIONER OR PHYSICIAN  
2 ASSISTANT who is to perform the abortion or the referring physician, NURSE  
3 PRACTITIONER OR PHYSICIAN ASSISTANT has informed the woman, orally and in  
4 person:

5 (a) Of up-to-date, evidence-based information concerning the range  
6 of outcomes for individuals living with the diagnosed condition, including  
7 physical, developmental, educational and psychosocial outcomes.

8 (b) That the department of health services maintains a website that  
9 lists information regarding support services, hotlines, resource centers  
10 or clearinghouses, national and local peer support groups and other  
11 education and support programs available to assist the woman and her  
12 unborn child, any national or local registries of families willing to  
13 adopt newborns with the nonlethal fetal condition and contact information  
14 for adoption agencies willing to place newborns with the nonlethal fetal  
15 condition with families willing to adopt.

16 (c) That the woman has a right to review the website and that a  
17 printed copy of the materials on the website will be provided to her free  
18 of charge if she chooses to review these materials.

19 (d) That section 13-3603.02 prohibits abortion because of the  
20 unborn child's sex or race or because of a genetic abnormality.

21 3. The woman certifies in writing before the abortion that the  
22 information required to be provided pursuant to this subsection has been  
23 provided.

24 B. The department of health services shall establish and annually  
25 update a website that includes the information prescribed in subsection A,  
26 paragraph 1, subdivision (b) and paragraph 2, subdivision (b) of this  
27 section.

28 C. A physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT who  
29 knowingly violates this section commits an act of unprofessional conduct  
30 and is subject to license suspension or revocation ~~pursuant to title 32,~~  
31 ~~chapter 13 or 17~~ BY THAT HEALTH CARE PROVIDER'S REGULATORY BOARD.

32 D. In addition to other remedies available under the common or  
33 statutory law of this state, any of the following individuals may file a  
34 civil action to obtain appropriate relief for a violation of this section:

35 1. A woman on whom an abortion has been performed without her  
36 informed consent as required by this section.

37 2. The father of the unborn child if the father was married to the  
38 mother at the time she received the abortion, unless the pregnancy  
39 resulted from the father's criminal conduct.

40 3. A maternal grandparent of the unborn child if the mother was not  
41 at least eighteen years of age at the time of the abortion, unless the  
42 pregnancy resulted from the maternal grandparent's criminal conduct.

43 E. A civil action filed pursuant to subsection D of this section  
44 shall be brought in the superior court in the county in which the woman on  
45 whom the abortion was performed resides and may be based on a claim that

1 failure to obtain informed consent was a result of simple negligence,  
2 gross negligence, wantonness, wilfulness, intention or any other legal  
3 standard of care. Relief pursuant to this subsection includes the  
4 following:

5 1. Money damages for all psychological, emotional and physical  
6 injuries resulting from the violation of this section.

7 2. Statutory damages in an amount equal to \$5,000 or three times  
8 the cost of the abortion, whichever is greater.

9 3. Reasonable attorney fees and costs.

10 F. A civil action brought pursuant to this section must be  
11 initiated within six years after the violation occurred.

12 G. For the purposes of this section:

13 1. "Lethal fetal condition" means a fetal condition that is  
14 diagnosed before birth and that will result, with reasonable certainty, in  
15 the death of the unborn child within three months after birth.

16 2. "Nonlethal fetal condition" means a fetal condition that is  
17 diagnosed before birth and that will not result in the death of the unborn  
18 child within three months after birth but may result in A physical or  
19 mental disability or abnormality.

20 3. "Perinatal hospice" means comprehensive support to the pregnant  
21 woman and her family that includes supportive care from the time of  
22 diagnosis through the time of birth and death of the infant and through  
23 the postpartum period. Supportive care may include counseling and medical  
24 care by maternal-fetal medical specialists, obstetricians, neonatologists,  
25 anesthesia specialists, clergy, social workers and specialty nurses who  
26 are focused on alleviating fear and ensuring that the woman and her family  
27 experience the life and death of the child in a comfortable and supportive  
28 environment.

29 Sec. 13. Section 36-2161, Arizona Revised Statutes, is amended to  
30 read:

31 36-2161. Abortions: reporting requirements

32 A. A hospital or facility in this state where abortions are  
33 performed must submit to the department of health services on a form  
34 prescribed by the department a report of each abortion performed in the  
35 hospital or facility. The report shall not identify the individual  
36 patient by name or include any other information or identifier that would  
37 make it possible to identify, in any manner or under any circumstances, a  
38 woman who has obtained or sought to obtain an abortion. The report must  
39 include the following information:

40 1. The name and address of the facility where the abortion was  
41 performed.

42 2. The type of facility where the abortion was performed.

43 3. The county where the abortion was performed.

44 4. The woman's age.

- 1           5. The woman's educational background by highest grade completed
- 2 and, if applicable, level of college completed.
- 3           6. The county and state in which the woman resides.
- 4           7. The woman's race and ethnicity.
- 5           8. The woman's marital status.
- 6           9. The number of prior pregnancies and prior abortions of the
- 7 woman.
- 8           10. The number of previous spontaneous terminations of pregnancy of
- 9 the woman.
- 10          11. The gestational age of the unborn child at the time of the
- 11 abortion.
- 12          12. The reason for the abortion, including at least one of the
- 13 following:
- 14           (a) The abortion is elective.
- 15           (b) The abortion is due to maternal health considerations,
- 16 including one of the following:
- 17           (i) A premature rupture of membranes.
- 18           (ii) An anatomical abnormality.
- 19           (iii) Chorioamnionitis.
- 20           (iv) Preeclampsia.
- 21           (v) Other.
- 22           (c) The abortion is due to fetal health considerations, including
- 23 the fetus being diagnosed with at least one of the following:
- 24           (i) A lethal anomaly.
- 25           (ii) A central nervous system anomaly.
- 26           (iii) Other.
- 27           (d) The pregnancy is the result of a sexual assault.
- 28           (e) The pregnancy is the result of incest.
- 29           (f) The woman is being coerced into obtaining an abortion.
- 30           (g) The woman is a victim of sex trafficking.
- 31           (h) The woman is a victim of domestic violence.
- 32           (i) Other.
- 33           (j) The woman declined to answer.
- 34          13. The type of procedure performed or prescribed and the date of
- 35 the abortion.
- 36          14. Any preexisting medical conditions of the woman that would
- 37 complicate pregnancy.
- 38          15. Any known medical complication that resulted from the abortion,
- 39 including at least one of the following:
- 40           (a) Shock.
- 41           (b) Uterine perforation.
- 42           (c) Cervical laceration requiring suture or repair.
- 43           (d) Heavy bleeding or hemorrhage with estimated blood loss of at
- 44 least five hundred cubic centimeters.
- 45           (e) Aspiration or allergic response.



- 1 (f) Postprocedure infection.
- 2 (g) Sepsis.
- 3 (h) Incomplete abortion retaining part of the fetus requiring
- 4 reevacuation.
- 5 (i) Damage to the uterus.
- 6 (j) Failed termination of pregnancy.
- 7 (k) Death of the patient.
- 8 (l) Other.
- 9 (m) None.

10 16. The basis for any medical judgment that a medical emergency  
11 existed that excused the physician, **NURSE PRACTITIONER OR PHYSICIAN**  
12 **ASSISTANT** from compliance with the requirements of this chapter.

13 17. The physician's statement if required pursuant to section  
14 36-2301.01.

15 18. If applicable, the weight of the aborted fetus for any abortion  
16 performed pursuant to section 36-2301.01.

17 19. Whether a fetus or embryo was delivered alive as defined in  
18 section 36-2301 during or immediately after an attempted abortion and the  
19 efforts made to promote, preserve and maintain the life of the fetus or  
20 embryo pursuant to section 36-2301.

21 20. Statements by the physician and all clinical staff who observed  
22 the fetus or embryo during or immediately after the abortion certifying  
23 under penalty of perjury that, to the best of their knowledge, the aborted  
24 fetus or embryo was not delivered alive as defined in section 36-2301.

25 21. The medical specialty of the physician, **NURSE PRACTITIONER OR**  
26 **PHYSICIAN ASSISTANT** performing the abortion, including one of the  
27 following:

- 28 (a) Obstetrics-gynecology.
- 29 (b) General or family practice.
- 30 (c) Emergency medicine.
- 31 (d) Other.

32 22. The type of admission for the patient, including whether the  
33 abortion was performed:

- 34 (a) As an outpatient procedure in an abortion clinic.
- 35 (b) As an outpatient procedure at a hospital.
- 36 (c) As an inpatient procedure at a hospital.
- 37 (d) As an outpatient procedure at a health care institution other  
38 than an abortion clinic or hospital.

39 23. Whether anesthesia was administered to the mother.

40 24. Whether anesthesia was administered to the unborn child.

41 25. Whether any genetic abnormality of the unborn child was  
42 detected at or before the time of the abortion by genetic testing, such as  
43 maternal serum tests, or by ultrasound, such as nuchal translucency  
44 screening, or by other forms of testing.

1           26. If a surgical abortion was performed, the method of final  
2 disposition of bodily remains and whether the woman exercised her right to  
3 choose the final disposition of bodily remains.

4           B. The hospital or facility shall request the information specified  
5 in subsection A, paragraph 12 of this section at the same time the  
6 information pursuant to section 36-2153 is provided to the woman  
7 individually and in a private room to protect the woman's privacy. The  
8 information requested pursuant to subsection A, paragraph 12 of this  
9 section may be obtained on a medical form provided to the woman to  
10 complete if the woman completes the form individually and in a private  
11 room.

12           C. If the woman who is seeking the abortion discloses that the  
13 abortion is being sought because of a reason described in subsection A,  
14 paragraph 12, subdivision (d), (e), (f), (g) or (h) of this section, the  
15 hospital or facility shall provide the woman with information regarding  
16 the woman's right to report a crime to law enforcement and resources  
17 available for assistance and services, including a national human  
18 trafficking resource hotline.

19           D. The report must be signed by the physician, **NURSE PRACTITIONER**  
20 **OR PHYSICIAN ASSISTANT** who performed the abortion or, if a health  
21 professional other than a physician, **NURSE PRACTITIONER OR PHYSICIAN**  
22 **ASSISTANT** is authorized by law to prescribe or administer abortion  
23 medication, the signature and title of the person who prescribed or  
24 administered the abortion medication. The form may be signed  
25 electronically and shall indicate that the person who signs the report is  
26 attesting that the information in the report is correct to the best of the  
27 person's knowledge. The hospital or facility must transmit the report to  
28 the department within fifteen days after the last day of each reporting  
29 month.

30           E. Any report filed pursuant to this section shall be filed  
31 electronically at an internet website that is designated by the department  
32 unless the person required to file the report applies for a waiver from  
33 electronic reporting by submitting a written request to the department.

34           Sec. 14. Section 36-2162.01, Arizona Revised Statutes, is amended  
35 to read:

36           36-2162.01. Informed consent; reporting requirements

37           A. A physician, **NURSE PRACTITIONER OR PHYSICIAN ASSISTANT** in this  
38 state who provides informed consent information regarding abortion  
39 pursuant to section 36-2153 or performs fetal ultrasound imaging and  
40 auscultation of fetal heart tone services pursuant to section 36-2156 or  
41 who delegates to a person authorized by section 36-2153 or 36-2156 the  
42 duty to provide the information or services required by those sections  
43 shall submit to the department of health services on a form prescribed by  
44 the department a report that includes the following information:

1           1. The number of women to whom the physician, NURSE PRACTITIONER OR  
2     PHYSICIAN ASSISTANT provided the information described in section 36-2153,  
3     subsection A, paragraph 1, and, of those women, the number provided in the  
4     capacity of a referring physician, NURSE PRACTITIONER OR PHYSICIAN  
5     ASSISTANT and the number provided in the capacity of a physician, NURSE  
6     PRACTITIONER OR PHYSICIAN ASSISTANT who is to perform the abortion.

7           2. The number of women to whom the physician, physician assistant,  
8     nurse, psychologist or licensed behavioral health professional provided  
9     the information described in section 36-2153, subsection A, paragraph 2,  
10    and, of those women, the number provided in the capacity of a referring  
11    physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT and the number  
12    provided in the capacity of a physician, NURSE PRACTITIONER OR PHYSICIAN  
13    ASSISTANT who is to perform the abortion, and, of each of those numbers,  
14    the number provided by the physician, NURSE PRACTITIONER OR PHYSICIAN  
15    ASSISTANT and the number provided by a physician assistant, nurse,  
16    psychologist or licensed behavioral health professional.

17          3. The number of women for whom the physician, NURSE PRACTITIONER  
18    OR PHYSICIAN ASSISTANT or qualified person working in conjunction with the  
19    physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT performed fetal  
20    ultrasound imaging and auscultation of fetal heart tone services described  
21    in section 36-2156, subsection A, paragraph 1, and, of those numbers, the  
22    number provided in the capacity of a referring physician, NURSE  
23    PRACTITIONER OR PHYSICIAN ASSISTANT and the number provided in the  
24    capacity of a physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT who is  
25    to perform the abortion, and, of each of those numbers, the number  
26    provided by the physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT and  
27    the number provided by a qualified person working in conjunction with the  
28    physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT.

29          4. The number of abortions performed by the physician, NURSE  
30    PRACTITIONER OR PHYSICIAN ASSISTANT in which information required by  
31    sections 36-2153 and 36-2156 to be provided ~~at least twenty-four hours~~  
32    before the abortion was not provided because a medical emergency compelled  
33    the performance of an abortion to avert the woman's death and the number  
34    of abortions in which this required information was not provided because a  
35    medical emergency compelled the performance of an abortion to avert  
36    substantial and irreversible impairment of a major bodily function of the  
37    woman.

38          B. The report may not identify the individual patient by name or  
39    include any other information or identifier that would make it possible to  
40    identify, in any manner or under any circumstances, a woman who has  
41    obtained or sought to obtain an abortion.

42          C. The report shall be signed by the physician, NURSE PRACTITIONER  
43    OR PHYSICIAN ASSISTANT who provided to the woman the information required  
44    by section 36-2153, subsection A, paragraph 1 or the physician, NURSE  
45    PRACTITIONER OR PHYSICIAN ASSISTANT who delegated the duty to another

1 person authorized by law to provide to the woman the information required  
2 by section 36-2153, subsection A, paragraph 2 or section 36-2156,  
3 subsection A, paragraph 1. The form may be signed electronically and  
4 shall indicate that the physician, NURSE PRACTITIONER OR PHYSICIAN  
5 ASSISTANT who signs the report is attesting that the information in the  
6 report is correct to the best of the ~~physician's~~ HEALTH CARE PROVIDER'S  
7 knowledge. The physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT must  
8 transmit the report to the department within fifteen days after the last  
9 day of each reporting month.

10 D. Any report filed pursuant to this section shall be filed  
11 electronically at an internet website that is designated by the department  
12 unless the person required to file the report applies for a waiver from  
13 electronic reporting by submitting a written request to the department.

14 Sec. 15. Repeal

15 Section 36-3604, Arizona Revised Statutes, is repealed.