

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

State of Arizona
House of Representatives
Fifty-fourth Legislature
Second Regular Session
2020

HB 2693

Introduced by
Representatives Salman: Andrade, Blanc, Bolding, Cano, Chávez, DeGrazia,
Engel, Espinoza, Fernandez, Friese, Hernandez A, Hernandez D, Longdon,
Meza, Peten, Powers Hannley, Rodriguez, Sierra, Terán

AN ACT

AMENDING SECTIONS 32-1606, 32-2501, 32-2531, 32-2532, 32-2534, 36-449.01,
36-449.02, 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 and practical nurses whose graduates are eligible for
44 licensing under this chapter as registered nurses or as practical nurses
45 if they satisfy the other requirements of this chapter and board rules.

- 1 4. Examine qualified registered and practical nurse applicants.
- 2 5. License and renew the licenses of qualified registered and
- 3 practical nurse applicants and licensed nursing assistants who are not
- 4 qualified to be licensed by the executive director.
- 5 6. Adopt a seal, which the executive director shall keep.
- 6 7. Keep a record of all proceedings.
- 7 8. For proper cause, deny or rescind approval of a regulated
- 8 training or educational program for failure to comply with this chapter or
- 9 the rules of the board.
- 10 9. Adopt rules to approve credential evaluation services that
- 11 evaluate the qualifications of applicants who graduated from an
- 12 international nursing program.
- 13 10. Determine and administer appropriate disciplinary action
- 14 against all regulated parties who are found guilty of violating this
- 15 chapter or rules adopted by the board.
- 16 11. Perform functions necessary to carry out the requirements of
- 17 nursing assistant and nurse aide training and competency evaluation
- 18 program as set forth in the omnibus budget reconciliation act of 1987
- 19 (P.L. 100-203; 101 Stat. 1330), as amended by the medicare catastrophic
- 20 coverage act of 1988 (P.L. 100-360; 102 Stat. 683). These functions shall
- 21 include:
- 22 (a) Testing and registering certified nursing assistants.
- 23 (b) Testing and licensing licensed nursing assistants.
- 24 (c) Maintaining a list of board-approved training programs.
- 25 (d) Maintaining a registry of nursing assistants for all certified
- 26 nursing assistants and licensed nursing assistants.
- 27 (e) Assessing fees.
- 28 12. Adopt rules establishing those acts that may be performed by a
- 29 registered nurse practitioner or certified nurse midwife, ~~except that the~~
- 30 ~~board does not have authority to decide scope of practice relating to~~
- 31 ~~abortion as defined in section 36-2151.~~
- 32 13. Adopt rules that prohibit registered nurse practitioners,
- 33 clinical nurse specialists or certified nurse midwives from dispensing a
- 34 schedule II controlled substance that is an opioid, except for an
- 35 implantable device or an opioid that is for medication-assisted treatment
- 36 for substance use disorders.
- 37 14. Adopt rules establishing educational requirements to certify
- 38 school nurses.
- 39 15. Publish copies of board rules and distribute these copies on
- 40 request.
- 41 16. Require each applicant for initial licensure or certification
- 42 to submit a full set of fingerprints to the board for the purpose of
- 43 obtaining a state and federal criminal records check pursuant to section
- 44 41-1750 and Public Law 92-544. The department of public safety may
- 45 exchange this fingerprint data with the federal bureau of investigation.

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

9 18. Establish standards to approve and reapprove nurse practitioner
10 and clinical nurse specialist programs and provide for surveys of nurse
11 practitioner and clinical nurse specialist programs as it deems necessary.

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

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

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

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

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

22 24. Maintain a list of approved medication assistant training
23 programs.

24 25. Test and certify medication assistants.

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

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

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

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

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

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

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

3 32-2501. Definitions

4 In this chapter, unless the context otherwise requires:

5 1. "Active license" means a regular license issued pursuant to this
6 chapter.

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

13 3. "Advisory letter" means a nondisciplinary letter to notify a
14 physician assistant that either:

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

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

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

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

30 5. "Board" means the Arizona regulatory board of physician
31 assistants.

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

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

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

43 9. "Limit" means a nondisciplinary action that is taken by the
44 board and that alters a physician assistant's practice or medical

1 activities if there is evidence that the physician assistant is or may be
2 mentally or physically unable to safely engage in health care tasks.

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

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

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

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

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

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

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

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

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

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

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

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

42 (d) Exhibiting a pattern of using or being under the influence of
43 alcohol or drugs or a similar substance while performing health care tasks
44 or to the extent that judgment may be impaired and the ability to perform
45 health care tasks detrimentally affected.

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

1 a court of competent jurisdiction or a plea of no contest is conclusive
2 evidence of the commission.

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

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

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

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

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

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

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

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

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

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

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

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

42 (ii) Knowingly failing to disclose to a patient on a form that is
43 prescribed by the board and that is dated and signed by the patient or
44 guardian acknowledging that the patient or guardian has read and
45 understands that the licensee has a direct financial interest in a

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

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

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

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

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

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

25 (iii) Prescriptions written to prepare a patient for a medical
26 examination.

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

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

38 (i) Engaging in or soliciting sexual relationships, whether
39 consensual or nonconsensual.

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

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

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

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

5 32-2531. Physician assistant scope of practice; health care
6 tasks; supervising physician duties; civil penalty

7 A. A supervising physician may delegate health care tasks to a
8 physician assistant.

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

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

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

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

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

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

- 31 1. Obtaining patient histories.
- 32 2. Performing physical examinations.
- 33 3. Ordering and performing diagnostic and therapeutic procedures.
- 34 4. Formulating a diagnostic impression.
- 35 5. Developing and implementing a treatment plan.
- 36 6. Monitoring the effectiveness of therapeutic interventions.
- 37 7. Assisting in surgery.
- 38 8. Offering counseling and education to meet patient needs.
- 39 9. Making appropriate referrals.
- 40 10. Prescribing schedule IV or V controlled substances as defined
41 in the federal controlled substances act of 1970 (P.L. 91-513; 84 Stat.
42 1242; 21 United States Code section 802) and prescription-only
43 medications.
- 44 11. Prescribing schedule II and III controlled substances as
45 defined in the federal controlled substances act of 1970.

- 1 12. Performing minor surgery as defined in section 32-2501.
- 2 13. Performing other nonsurgical health care tasks that are normally
- 3 taught in courses of training approved by the board, that are consistent
- 4 with the training and experience of the physician assistant and that have
- 5 been properly delegated by the supervising physician.
- 6 ~~H.~~ G. The supervising physician shall:
- 7 1. Meet the requirements established by the board for supervising a
- 8 physician assistant.
- 9 2. Accept responsibility for all tasks and duties the physician
- 10 delegates to a physician assistant.
- 11 3. Notify the board and the physician assistant in writing if the
- 12 physician assistant exceeds the scope of the delegated health care tasks.
- 13 4. Maintain a written agreement with the physician assistant. The
- 14 agreement must state that the physician will exercise supervision over the
- 15 physician assistant and retains professional and legal responsibility for
- 16 the care rendered by the physician assistant. The agreement must be
- 17 signed by the supervising physician and the physician assistant and
- 18 updated annually. The agreement must be kept on file at the practice site
- 19 and made available to the board on request. Each year the board shall
- 20 randomly audit at least five ~~percent~~ PERCENT of these agreements for
- 21 compliance.
- 22 ~~I.~~ H. A physician's ability to supervise a physician assistant is
- 23 not affected by restrictions imposed by the board on a physician assistant
- 24 pursuant to disciplinary action taken by the board.
- 25 ~~J.~~ I. Supervision must be continuous but does not require the
- 26 personal presence of the physician at the place where health care tasks
- 27 are performed if the physician assistant is in contact with the
- 28 supervising physician by telecommunication. If the physician assistant
- 29 practices in a location where a supervising physician is not routinely
- 30 present, the physician assistant must meet in person or by
- 31 telecommunication with a supervising physician at least once each week to
- 32 ensure ongoing direction and oversight of the physician assistant's work.
- 33 The board by order may require the personal presence of a supervising
- 34 physician when designated health care tasks are performed.
- 35 ~~K.~~ J. At all times while a physician assistant is on duty, the
- 36 physician assistant shall wear a name tag with the designation "physician
- 37 assistant" on it.
- 38 ~~L.~~ K. The board by rule may prescribe a civil penalty for a
- 39 violation of this article. The penalty shall not exceed ~~fifty dollars~~ \$50
- 40 for each violation. The board shall deposit, pursuant to sections 35-146
- 41 and 35-147, all monies it receives from this penalty in the state general
- 42 fund. A physician assistant and the supervising physician may contest the
- 43 imposition of this penalty pursuant to board rule. The imposition of a
- 44 civil penalty is public information, and the board may use this
- 45 information in any future disciplinary actions.

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

3 32-2532. Prescribing, administering and dispensing drugs;
4 limits and requirements; notice

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

7 1. A schedule II or schedule III controlled substance as defined in
8 the federal controlled substances act of 1970 (P.L. 91-513; 84 Stat. 1242;
9 21 United States Code section 802) without delegation by the supervising
10 physician, board approval and United States drug enforcement
11 administration registration.

12 2. A schedule IV or schedule V controlled substance as defined in
13 the federal controlled substances act of 1970 without United States drug
14 enforcement administration registration and delegation by the supervising
15 physician.

16 3. Prescription-only medication without delegation by the
17 supervising physician.

18 ~~4. Prescription medication intended to perform or induce an~~
19 ~~abortion.~~

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

25 C. If certified for prescription privileges pursuant to section
26 32-2504, subsection A, initial prescriptions for schedule II controlled
27 substances that are opioids are subject to the limits prescribed in
28 sections 32-3248 and 32-3248.01 if the physician assistant has been
29 delegated to prescribe schedule II controlled substances by the
30 supervising physician pursuant to this section. For each schedule IV or
31 schedule V controlled substance, the physician assistant may not prescribe
32 the controlled substance more than five times in a six-month period for
33 each patient.

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

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

39 F. Except in an emergency, a physician assistant may dispense
40 schedule II or schedule III controlled substances for a period of use of
41 not to exceed seventy-two hours with board approval or any other
42 controlled substance for a period of use of not to exceed ninety days and
43 may administer controlled substances without board approval if it is
44 medically indicated in an emergency dealing with potential loss of life or
45 limb or major acute traumatic pain. Notwithstanding the authority granted

1 in this subsection, a physician assistant may not dispense a schedule II
2 controlled substance that is an opioid, except for an implantable device
3 or an opioid that is for medication-assisted treatment for substance use
4 disorders.

5 G. Except for samples provided by manufacturers, all drugs
6 dispensed by a physician assistant shall be labeled to show the name of
7 the physician assistant.

8 H. A physician assistant shall not obtain a drug from any source
9 other than the supervising physician or a pharmacist. A physician
10 assistant may receive manufacturers' samples if delegated to do so by the
11 supervising physician.

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

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

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

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

29 32-2534. Initiation of practice

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

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

36 36-449.01. Definitions

37 In this article, unless the context otherwise requires:

38 1. "Abortion" means the use of any means with the intent to
39 terminate a woman's pregnancy for reasons other than to increase the
40 probability of a live birth, to preserve the life or health of the child
41 after a live birth, to terminate an ectopic pregnancy or to remove a dead
42 fetus. Abortion does not include birth control devices or oral
43 contraceptives.

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

4 ~~3. "Director" means the director of the department of health~~
5 ~~services.~~

6 3. "HEALTH CARE PROVIDER" MEANS A PHYSICIAN WHO IS LICENSED
7 PURSUANT TO TITLE 32, CHAPTER 13 OR 17, A PHYSICIAN ASSISTANT WHO IS
8 LICENSED PURSUANT TO TITLE 32, CHAPTER 25 OR A NURSE PRACTITIONER WHO IS
9 LICENSED PURSUANT TO TITLE 32, CHAPTER 15.

10 4. "Medication abortion" means the use of any medication, drug or
11 other substance that is intended to cause or induce an abortion.

12 5. "Perform" includes the initial administration of any medication,
13 drug or other substance intended to cause or induce an abortion.

14 6. "Surgical abortion" has the same meaning prescribed in section
15 36-2151.

16 7. "Viable fetus" has the same meaning prescribed in section
17 36-2301.01.

18 Sec. 7. Section 36-449.02, Arizona Revised Statutes, is amended to
19 read:

20 36-449.02. Abortion clinics; licensure requirements; rules;
21 inspections; standing to intervene; legal
22 counsel

23 A. Beginning on April 1, 2000, an abortion clinic shall meet the
24 same licensure requirements as prescribed in article 2 of this chapter for
25 health care institutions. At the time of licensure, an abortion clinic
26 shall submit to the director all documentation required by this
27 article, ~~including verification that the clinic's physicians who are~~
28 ~~required to be available have admitting privileges at a health care~~
29 ~~institution as required by section 36-449.03, subsection C, paragraph 3.~~

30 B. On or before the anniversary of the issue date of an abortion
31 clinic's license, the abortion clinic shall submit to the director all
32 documentation required by this article.

33 C. Beginning on April 1, 2000, abortion clinics shall comply with
34 department requirements for abortion clinics and department rules that
35 govern abortion clinics.

36 D. If the director determines that there is reasonable cause to
37 believe an abortion clinic is not adhering to the licensing requirements
38 of this article or any other law or rule concerning abortion, the director
39 and any duly designated employee or agent of the director, including
40 county health representatives and county or municipal fire inspectors,
41 consistent with standard medical practices, may enter on and into the
42 premises of the abortion clinic that is licensed or required to be
43 licensed pursuant to this article during regular business hours of the
44 abortion clinic to determine compliance with this article, rules adopted

1 pursuant to this article, local fire ordinances or rules and any other law
2 or rule relating to abortion.

3 E. An application for licensure pursuant to this article
4 constitutes permission for, and complete acquiescence in, an entry or
5 inspection of the premises during the pendency of the application and, if
6 licensed, while the abortion clinic is licensed.

7 F. If an inspection conducted pursuant to this section reveals that
8 an abortion clinic is not adhering to the licensing requirements
9 prescribed pursuant to this article or any other law or rule concerning
10 abortion, the director may take action authorized by this article.

11 G. An abortion clinic whose license has been suspended or revoked
12 pursuant to this article or section 36-424 is subject to inspection on
13 application for relicensure or reinstatement of the license.

14 H. In any proceeding in which the constitutionality, legality or
15 application of this section is challenged, the attorney general or any
16 county or city attorney who wishes to defend the law has the right to
17 intervene as a party and is deemed to have proper standing in the matter.
18 The only objection that may be raised to a motion to intervene as of right
19 pursuant to this subsection is that the proposed intervenor does not have
20 a good faith intention to defend the law. Any party or proposed
21 intervenor may raise this objection. Notwithstanding section 41-192, the
22 department may employ legal counsel and make an expenditure or incur an
23 indebtedness for legal services for the purposes of defending this
24 section.

25 Sec. 8. Section 36-449.03, Arizona Revised Statutes, is amended to
26 read:

27 36-449.03. Abortion clinics; rules; civil penalties

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

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

32 2. Dressing rooms for staff and patients.

33 3. Appropriate lavatory areas.

34 4. Areas for preprocedure hand washing.

35 5. Private procedure rooms.

36 6. Adequate lighting and ventilation for abortion procedures.

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

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

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

42 10. Areas for cleaning and sterilizing instruments.

43 11. Adequate areas ~~for the secure storage of~~ TO SECURELY STORE
44 medical records and necessary 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 ~~for the TO~~ conduct, in an appropriate fashion, ~~of~~
10 any abortion procedure that the medical staff of the clinic anticipates
11 performing and ~~for monitoring TO MONITOR~~ the progress of each patient
12 throughout the procedure and recovery period.

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

1 ~~4.~~ 3. If a physician is not present, a registered nurse, nurse
2 practitioner, licensed practical nurse or physician assistant is present
3 and remains at the clinic when abortions are performed to provide
4 postoperative monitoring and care, or monitoring and care after inducing a
5 medication abortion, until each patient who had an abortion that day is
6 discharged.

7 ~~5.~~ 4. Surgical assistants receive training in counseling, patient
8 advocacy and the specific responsibilities of the services the surgical
9 assistants provide.

10 ~~6.~~ 5. Volunteers receive training in the specific responsibilities
11 of the services the volunteers provide, including counseling and patient
12 advocacy as provided in the rules adopted by the director for different
13 types of volunteers based on their responsibilities.

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

17 1. A medical history, including the following:

18 (a) Reported allergies to medications, antiseptic solutions or
19 latex.

20 (b) Obstetric and gynecologic history.

21 (c) Past surgeries.

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

24 3. The appropriate laboratory tests, including:

25 (a) Urine or blood tests for pregnancy performed before the
26 abortion procedure.

27 (b) A test for anemia.

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

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

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

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

1 keep original prints of each ultrasound examination of a patient in the
2 patient's medical history file.

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

5 1. That medical personnel is available to all patients throughout
6 the abortion procedure.

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

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

12 4. The use of appropriate precautions, such as ~~the establishment of~~
13 ESTABLISHING intravenous access at least for patients undergoing second or
14 third trimester abortions.

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

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

24 F. The director shall adopt rules that prescribe minimum recovery
25 room standards. At a minimum these rules shall require that:

26 1. For a surgical abortion, immediate postprocedure care, or care
27 provided after inducing a medication abortion, consists of observation in
28 a supervised recovery room for as long as the patient's condition
29 warrants.

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

32 3. A licensed health professional who is trained in ~~the management~~
33 ~~of~~ MANAGING the recovery area and WHO is capable of providing basic
34 cardiopulmonary resuscitation and related emergency procedures remains on
35 the premises of the abortion clinic until all patients are discharged.

36 4. ~~For a surgical abortion, a physician with admitting privileges~~
37 ~~at a health care institution that is classified by the director as a~~
38 ~~hospital pursuant to section 36-405, subsection B and that is within~~
39 ~~thirty miles of the abortion clinic remains on the premises of the~~
40 ~~abortion clinic until all patients are stable and are ready to leave the~~
41 ~~recovery room and to facilitate the transfer of emergency cases if~~
42 ~~hospitalization of the patient or viable fetus is necessary.~~ A physician,
43 shall sign NURSE PRACTITIONER OR PHYSICIAN ASSISTANT SIGNS the discharge
44 order and ~~be~~ IS readily accessible and available until the last patient is
45 discharged.

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

8 6. Written instructions with regard to postabortion coitus, signs
9 of possible problems and general aftercare are given to each patient.
10 Each patient shall have specific instructions regarding access to medical
11 care for complications, including a telephone number to call for medical
12 emergencies.

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

16 8. The physician, ~~assures~~ NURSE PRACTITIONER OR PHYSICIAN ASSISTANT
17 ENSURES that a licensed health professional from the abortion clinic makes
18 a good faith effort to contact the patient by telephone, with the
19 patient's consent, within twenty-four hours after a surgical abortion to
20 assess the patient's recovery.

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

24 G. The director shall adopt rules that prescribe standards for
25 follow-up visits. At a minimum these rules shall require that:

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

33 2. A urine pregnancy test is obtained at the time of the follow-up
34 visit to rule out continuing pregnancy. If a continuing pregnancy is
35 suspected, the patient shall be evaluated and a physician, NURSE
36 PRACTITIONER OR PHYSICIAN ASSISTANT who performs abortions shall be
37 consulted.

38 H. The director shall adopt rules to prescribe minimum abortion
39 clinic incident reporting. At a minimum these rules shall require that:

40 1. The abortion clinic records each incident resulting in a
41 patient's or viable fetus' serious injury occurring at an abortion clinic
42 and shall report them in writing to the department within ten days after
43 the incident. For the purposes of this paragraph, "serious injury" means
44 an injury that occurs at an abortion clinic and that creates a serious

1 risk of substantial impairment of a major body organ and includes any
2 injury or condition that requires ambulance transportation of the patient.

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

6 3. Incident reports are filed with the department and appropriate
7 professional regulatory boards.

8 I. The director shall adopt rules relating to enforcement of this
9 article. At a minimum, these rules shall require that:

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

- 16 (a) Assess a civil penalty pursuant to section 36-431.01.
- 17 (b) Impose an intermediate sanction pursuant to section 36-427.
- 18 (c) Suspend or revoke a license pursuant to section 36-427.
- 19 (d) Deny a license.
- 20 (e) Bring an action for an injunction pursuant to section 36-430.

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

- 24 (a) Whether the abortion clinic has repeated violations of statutes
25 or rules.
- 26 (b) Whether the abortion clinic has engaged in a pattern of
27 noncompliance.
- 28 (c) The type, severity and number of violations.

29 J. The department shall not release personally identifiable patient
30 or ~~physician~~ HEALTH CARE PROVIDER information.

31 K. The rules adopted by the director pursuant to this section do
32 not limit the ability of a physician or other health professional to
33 advise a patient on any health issue.

34 Sec. 9. Section 36-2152, Arizona Revised Statutes, is amended to
35 read:

36 36-2152. Parental consent; exception; hearings; time limits;
37 violations; classification; civil relief; statute
38 of limitations

39 A. In addition to the other requirements of this chapter, a person
40 shall not knowingly perform an abortion on a pregnant unemancipated minor
41 unless the attending physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT
42 has secured the written and notarized consent from one of the minor's
43 parents or the minor's guardian or conservator or unless a judge of the
44 superior court authorizes the physician to perform the abortion pursuant
45 to subsection B of this section. Notwithstanding section 41-319, the

1 notarized statement of parental consent and the description of the
 2 document or notarial act recorded in the notary journal are confidential
 3 and are not public records.

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

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

31 D. The pregnant minor may participate in the court proceedings on
 32 her own behalf. The court shall appoint a guardian ad litem for her. The
 33 court shall advise her that she has the right to ~~court appointed~~
 34 COURT-APPOINTED counsel and, on her request, shall provide her with
 35 counsel unless she appears through private counsel or she knowingly and
 36 intelligently waives her right to counsel.

37 E. Proceedings in the court under this section are confidential and
 38 have precedence over other pending matters. Members of the public shall
 39 not inspect, obtain copies of or otherwise have access to records of court
 40 proceedings under this section unless authorized by law. A judge who
 41 conducts proceedings under this section shall make in writing specific
 42 factual findings and legal conclusions supporting the decision and shall
 43 order a confidential record of the evidence to be maintained, including
 44 the judge's own findings and conclusions. The minor may file the petition
 45 using a fictitious name. For THE purposes of this subsection, public does

1 not include judges, clerks, administrators, professionals or other persons
2 employed by or working under the supervision of the court or employees of
3 other public agencies who are authorized by state or federal rule or law
4 to inspect and copy closed court records.

5 F. The court shall hold the hearing and shall issue a ruling within
6 forty-eight hours, excluding weekends and holidays, after the petition is
7 filed. If the court fails to issue a ruling within this time period, the
8 petition is deemed to have been granted and the consent requirement is
9 waived.

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

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

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

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

35 I. A person who performs an abortion in violation of this section
36 is guilty of a class 1 misdemeanor. A person who intentionally causes,
37 aids or assists a minor in obtaining an abortion in violation of this
38 section is guilty of a class 1 misdemeanor. A person is not subject to
39 any liability under this section if the person establishes by written
40 evidence that the person relied on evidence sufficient to convince a
41 careful and prudent person that the representations of the pregnant minor
42 regarding information necessary to comply with this section are true.

43 J. In addition to other remedies available under the common or
44 statutory law of this state, one or both of the minor's parents or the
45 minor's guardian may bring a civil action in the superior court in the

1 county in which the parents or the guardian resides to obtain appropriate
2 relief for a violation of this section, unless the pregnancy resulted from
3 the criminal conduct of the parent or guardian. The civil action may be
4 based on a claim that failure to obtain consent was a result of simple
5 negligence, gross negligence, wantonness, wilfulness, intention or any
6 other legal standard of care. The civil action may be brought against the
7 person who performs the abortion in violation of this section and any
8 person who causes, aids or assists a minor to obtain an abortion without
9 meeting the requirements of this section. Relief pursuant to this
10 subsection includes the following:

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

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

15 3. Reasonable attorney fees and costs.

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

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

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

24 2. List the possible medical risks that may occur with a surgical
25 abortion, including hemorrhage, uterine perforation, sterility, injury to
26 the bowel or bladder, a possible hysterectomy as a result of a
27 complication or injury during the procedure and failure to remove all
28 products of conception that may result in an additional procedure.

29 3. List the possible medical risks that may occur with a medication
30 abortion, including hemorrhage, infection, failure to remove all products
31 of conception that may result in an additional procedure, sterility and
32 the possible continuation of the pregnancy.

33 4. Require the pregnant minor's and the pregnant minor's parent's
34 initials on each page of the form and a full signature on the final page
35 of the form.

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

38 M. The physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT must
39 maintain the form in the pregnant minor's records for seven years after
40 the date of the procedure or five years after the date of the minor's
41 maturity, whichever is longer.

1 Sec. 10. Section 36-2153, Arizona Revised Statutes, is amended to
2 read:

3 36-2153. Informed consent; requirements; information;
4 website; signage; violation; civil relief; statute
5 of limitations

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

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

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

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

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

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

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

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

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

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

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

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

41 (c) Public and private agencies and services are available to
42 assist the woman during her pregnancy and after the birth of her child if
43 she chooses not to have an abortion, whether she chooses to keep the child
44 or place the child for adoption.

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

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

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

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

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

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

20 B. If a woman has taken mifepristone as part of a two-drug regimen
21 to terminate her pregnancy, has not yet taken the second drug and consults
22 an abortion clinic questioning her decision to terminate her pregnancy or
23 seeking information regarding the health of her fetus or the efficacy of
24 mifepristone alone to terminate a pregnancy, the abortion clinic staff
25 shall inform the woman that the use of mifepristone alone to end a
26 pregnancy is not always effective and that she should immediately consult
27 a physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT if she would like
28 more information.

29 C. If a medical emergency compels the performance of an abortion,
30 the physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT shall inform the
31 woman, before the abortion if possible, of the medical indications
32 supporting the physician's, NURSE PRACTITIONER'S OR PHYSICIAN ASSISTANT'S
33 judgment that an abortion is necessary to avert the woman's death or to
34 avert substantial and irreversible impairment of a major bodily function.

35 D. The department of health services shall establish and shall
36 annually update a website that includes a link to a printable version of
37 all materials listed on the website. The materials must be written in an
38 easily understood manner and printed in a typeface that is large enough to
39 be clearly legible. The website must include all of the following
40 materials:

41 1. Information that is organized geographically by location and
42 that is designed to inform the woman about public and private agencies and
43 services that are available to assist a woman through pregnancy, at
44 childbirth and while her child is dependent, including adoption agencies.
45 The materials shall include a comprehensive list of the agencies, a

1 description of the services they offer and the manner in which these
2 agencies may be contacted, including the agencies' telephone numbers and
3 website addresses.

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

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

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

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

17 6. Information that is designed to inform the woman of the probable
18 anatomical and physiological characteristics of the unborn child at
19 two-week gestational increments from fertilization to full term, including
20 pictures or drawings representing the development of unborn children at
21 two-week gestational increments and any relevant information on the
22 possibility of the unborn child's survival. The pictures or drawings must
23 contain the dimensions of the unborn child and must be realistic and
24 appropriate for each stage of pregnancy. The information provided
25 pursuant to this paragraph must be objective, nonjudgmental and designed
26 to convey only accurate scientific information about the unborn child at
27 the various gestational ages.

28 7. Objective information that describes the methods of abortion
29 procedures commonly employed, the medical risks commonly associated with
30 each procedure, the possible detrimental psychological effects of abortion
31 and the medical risks commonly associated with carrying a child to term.

32 8. Information explaining the efficacy of mifepristone taken alone,
33 without a follow-up drug as part of a two-drug regimen, to terminate a
34 pregnancy and advising a woman to immediately contact a physician, NURSE
35 PRACTITIONER OR PHYSICIAN ASSISTANT if the woman has taken only
36 mifepristone and questions her decision to terminate her pregnancy or
37 seeks information regarding the health of her fetus.

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

40 ~~F. A person shall not write or communicate a prescription for a~~
41 ~~drug or drugs to induce an abortion or require or obtain payment for a~~
42 ~~service provided to a patient who has inquired about an abortion or~~
43 ~~scheduled an abortion until the expiration of the twenty-four-hour~~
44 ~~reflection period required by subsection A of this section.~~

1 ~~F.~~ F. A person shall not intimidate or coerce in any way any
2 person to obtain an abortion. A parent, a guardian or any other person
3 shall not coerce a minor to obtain an abortion. If a minor is denied
4 financial support by the minor's parents, guardians or custodian due to
5 the minor's refusal to have an abortion performed, the minor is deemed
6 emancipated for the purposes of eligibility for public assistance
7 benefits, except that the emancipated minor may not use these benefits to
8 obtain an abortion.

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

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

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

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

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

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

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

35 ~~L.~~ K. A civil action filed pursuant to subsection ~~K~~ J of this
36 section shall be brought in the superior court in the county in which the
37 woman on whom the abortion was performed resides and may be based on a
38 claim that failure to obtain informed consent was a result of simple
39 negligence, gross negligence, wantonness, wilfulness, intention or any
40 other legal standard of care. Relief pursuant to subsection ~~K~~ J of this
41 section includes the following:

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

44 2. Statutory damages in an amount equal to ~~five thousand dollars~~
45 \$5,000 or three times the cost of the abortion, whichever is greater.

1 3. Reasonable attorney fees and costs.
2 ~~M.~~ L. A civil action brought pursuant to this section must be
3 initiated within six years after the violation occurred.

4 Sec. 11. Section 36-2155, Arizona Revised Statutes, is amended to
5 read:

6 36-2155. Performance of an abortion by individual who is not
7 a health care provider; prohibition; definitions

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

10 B. For the purposes of this section:

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

15 2. "Surgical abortion":

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

20 (b) Does not include:

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

25 (ii) Patient care incidental to the procedure.

26 Sec. 12. Section 36-2156, Arizona Revised Statutes, is amended to
27 read:

28 36-2156. Informed consent; ultrasound required; violation;
29 civil relief; statute of limitations

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

35 1. ~~At least twenty-four hours~~ Before the woman having any part of
36 an abortion performed or induced, and before the administration of any
37 anesthesia or medication in preparation for the abortion on the woman, the
38 physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT who is to perform the
39 abortion, the referring physician, NURSE PRACTITIONER OR PHYSICIAN
40 ASSISTANT or a qualified person working in conjunction with either
41 physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT shall:

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

44 (b) Offer to provide the woman with an opportunity to view the
45 active ultrasound image of the unborn child and hear the heartbeat of the

1 unborn child if the heartbeat is audible. The active ultrasound image
2 must be of a quality consistent with standard medical practice in the
3 community, contain the dimensions of the unborn child and accurately
4 portray the presence of external members and internal organs, if present
5 or viewable, of the unborn child. The auscultation of fetal heart tone
6 must be of a quality consistent with standard medical practice in the
7 community.

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

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

15 2. The woman certifies in writing before the abortion that she has
16 been given the opportunity to view the active ultrasound image and hear
17 the heartbeat of the unborn child if the heartbeat is audible and that she
18 opted to view or not view the active ultrasound image and hear or not hear
19 the heartbeat of the unborn child.

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

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

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

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

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

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

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

1 2. Statutory damages in an amount equal to ~~five thousand dollars~~
2 \$5,000 or three times the cost of the abortion, whichever is greater.
3 3. Reasonable attorney fees and costs.
4 E. A civil action brought pursuant to this section must be
5 initiated within six years after the violation occurred.
6 Sec. 13. Section 36-2158, Arizona Revised Statutes, is amended to
7 read:
8 36-2158. Informed consent; fetal condition; website;
9 unprofessional conduct; civil relief; statute of
10 limitations; definitions
11 A. A person shall not perform or induce an abortion without first
12 obtaining the voluntary and informed consent of the woman on whom the
13 abortion is to be performed or induced. Except in the case of a medical
14 emergency and in addition to the other requirements of this chapter,
15 consent to an abortion is voluntary and informed only if all of the
16 following occur:
17 1. In the case of a woman seeking an abortion of her unborn child
18 diagnosed with a lethal fetal condition, ~~at least twenty-four hours~~ before
19 the abortion the physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT who
20 is to perform the abortion or the referring physician, NURSE PRACTITIONER
21 OR PHYSICIAN ASSISTANT has informed the woman, orally and in person, that:
22 (a) Perinatal hospice services are available and the physician,
23 NURSE PRACTITIONER OR PHYSICIAN ASSISTANT has offered this care as an
24 alternative to abortion.
25 (b) The department of health services maintains a website that
26 lists perinatal hospice programs that are available both in this state and
27 nationally and that are organized geographically by location.
28 (c) The woman has a right to review the website and that a printed
29 copy of the materials on the website will be provided to her free of
30 charge if she chooses to review these materials.
31 2. In the case of a woman seeking an abortion of her unborn child
32 diagnosed with a nonlethal fetal condition, ~~at least twenty-four hours~~
33 before the abortion the physician, NURSE PRACTITIONER OR PHYSICIAN
34 ASSISTANT who is to perform the abortion or the referring physician, NURSE
35 PRACTITIONER OR PHYSICIAN ASSISTANT has informed the woman, orally and in
36 person:
37 (a) Of up-to-date, evidence-based information concerning the range
38 of outcomes for individuals living with the diagnosed condition, including
39 physical, developmental, educational and psychosocial outcomes.
40 (b) That the department of health services maintains a website that
41 lists information regarding support services, hotlines, resource centers
42 or clearinghouses, national and local peer support groups and other
43 education and support programs available to assist the woman and her
44 unborn child, any national or local registries of families willing to
45 adopt newborns with the nonlethal fetal condition and contact information

1 for adoption agencies willing to place newborns with the nonlethal fetal
2 condition with families willing to adopt.

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

6 3. The woman certifies in writing before the abortion that the
7 information required to be provided pursuant to this subsection has been
8 provided.

9 B. The department of health services shall establish a website
10 ~~within ninety days after the effective date of this section~~ and shall
11 annually update the website, ~~. The website~~ WHICH shall include the
12 information prescribed in subsection A, paragraph 1, subdivision (b) and
13 paragraph 2, subdivision (b) of this section.

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

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

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

23 2. The father of the unborn child if the father ~~is~~ WAS married to
24 the mother at the time she received the abortion, unless the pregnancy
25 resulted from the father's criminal conduct.

26 3. ~~The A~~ maternal ~~grandparents~~ GRANDPARENT of the unborn child if
27 the mother was not at least eighteen years of age at the time of the
28 abortion, unless the pregnancy resulted from ~~either of~~ the maternal
29 grandparent's criminal conduct.

30 E. A civil action filed pursuant to subsection D of this section
31 shall be brought in the superior court in the county in which the woman on
32 whom the abortion was performed resides and may be based on a claim that
33 failure to obtain informed consent was a result of simple negligence,
34 gross negligence, wantonness, wilfulness, intention or any other legal
35 standard of care. Relief pursuant to this subsection includes the
36 following:

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

39 2. Statutory damages in an amount equal to ~~five thousand dollars~~
40 \$5,000 or three times the cost of the abortion, whichever is greater.

41 3. Reasonable attorney fees and costs.

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

1 G. For the purposes of this section:

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

5 2. "Nonlethal fetal condition" means a fetal condition that is
6 diagnosed before birth and that will not result in the death of the unborn
7 child within three months after birth but may result in physical or mental
8 disability or abnormality.

9 3. "Perinatal hospice" means comprehensive support to the pregnant
10 woman and her family that includes supportive care from the time of
11 diagnosis through the time of birth and death of the infant and through
12 the postpartum period. Supportive care may include counseling and medical
13 care by maternal-fetal medical specialists, obstetricians, neonatologists,
14 anesthesia specialists, clergy, social workers and specialty nurses who
15 are focused on alleviating fear and ensuring that the woman and her family
16 experience the life and death of the child in a comfortable and supportive
17 environment.

18 Sec. 14. Section 36-2161, Arizona Revised Statutes, is amended to
19 read:

20 36-2161. Abortions; reporting requirements

21 A. A hospital or facility in this state where abortions are
22 performed must submit to the department of health services on a form
23 prescribed by the department a report of each abortion performed in the
24 hospital or facility. The report shall not identify the individual
25 patient by name or include any other information or identifier that would
26 make it possible to identify, in any manner or under any circumstances, a
27 woman who has obtained or sought to obtain an abortion. The report must
28 include the following information:

29 1. The name and address of the facility where the abortion was
30 performed.

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

32 3. The county where the abortion was performed.

33 4. The woman's age.

34 5. The woman's educational background by highest grade completed
35 and, if applicable, level of college completed.

36 6. The county and state in which the woman resides.

37 7. The woman's race and ethnicity.

38 8. The woman's marital status.

39 9. The number of prior pregnancies and prior abortions of the
40 woman.

41 10. The number of previous spontaneous terminations of pregnancy of
42 the woman.

43 11. The gestational age of the unborn child at the time of the
44 abortion.

- 1 12. The reason for the abortion, including at least one of the
2 following:
- 3 (a) The abortion is elective.
- 4 (b) The abortion is due to maternal health considerations,
5 including one of the following:
- 6 (i) A premature rupture of membranes.
- 7 (ii) An anatomical abnormality.
- 8 (iii) Chorioamnionitis.
- 9 (iv) Preeclampsia.
- 10 (v) Other.
- 11 (c) The abortion is due to fetal health considerations, including
12 the fetus being diagnosed with at least one of the following:
- 13 (i) A lethal anomaly.
- 14 (ii) A central nervous system anomaly.
- 15 (iii) Trisomy 18.
- 16 (iv) Trisomy 21.
- 17 (v) Triploidy.
- 18 (vi) Other.
- 19 (d) The pregnancy is the result of a sexual assault.
- 20 (e) The pregnancy is the result of incest.
- 21 (f) The woman is being coerced into obtaining an abortion.
- 22 (g) The woman is a victim of sex trafficking.
- 23 (h) The woman is a victim of domestic violence.
- 24 (i) Other.
- 25 (j) The woman declined to answer.
- 26 13. The type of procedure performed or prescribed and the date of
27 the abortion.
- 28 14. Any preexisting medical conditions of the woman that would
29 complicate pregnancy.
- 30 15. Any known medical complication that resulted from the abortion,
31 including at least one of the following:
- 32 (a) Shock.
- 33 (b) Uterine perforation.
- 34 (c) Cervical laceration requiring suture or repair.
- 35 (d) Heavy bleeding or hemorrhage with estimated blood loss of at
36 least five hundred cubic centimeters.
- 37 (e) Aspiration or allergic response.
- 38 (f) Postprocedure infection.
- 39 (g) Sepsis.
- 40 (h) Incomplete abortion retaining part of the fetus requiring
41 reevacuation.
- 42 (i) Damage to the uterus.
- 43 (j) Failed termination of pregnancy.
- 44 (k) Death of the patient.
- 45 (l) Other.

1 (m) None.

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

5 17. The physician's statement if required pursuant to section
6 36-2301.01.

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

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

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

17 21. The medical specialty of the physician, NURSE PRACTITIONER OR
18 PHYSICIAN ASSISTANT performing the abortion, including one of the
19 following:

- 20 (a) Obstetrics-gynecology.
- 21 (b) General or family practice.
- 22 (c) Emergency medicine.
- 23 (d) Other.

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

- 26 (a) As an outpatient procedure in an abortion clinic.
- 27 (b) As an outpatient procedure at a hospital.
- 28 (c) As an inpatient procedure at a hospital.
- 29 (d) As an outpatient procedure at a health care institution other
30 than an abortion clinic or hospital.

31 23. Whether anesthesia was administered to the mother.

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

33 B. The hospital or facility shall request the information specified
34 in subsection A, paragraph 12 of this section at the same time the
35 information pursuant to section 36-2153 is provided to the woman
36 individually and in a private room to protect the woman's privacy. The
37 information requested pursuant to subsection A, paragraph 12 of this
38 section may be obtained on a medical form provided to the woman to
39 complete if the woman completes the form individually and in a private
40 room.

41 C. If the woman who is seeking the abortion discloses that the
42 abortion is being sought because of a reason described in subsection A,
43 paragraph 12, subdivision (d), (e), (f), (g) or (h) of this section, the
44 hospital or facility shall provide the woman with information regarding
45 the woman's right to report a crime to law enforcement and resources

1 available for assistance and services, including a national human
2 trafficking resource hotline.

3 D. The report must be signed by the physician, NURSE PRACTITIONER
4 OR PHYSICIAN ASSISTANT who performed the abortion or, if a health
5 professional other than a physician, NURSE PRACTITIONER OR PHYSICIAN
6 ASSISTANT is authorized by law to prescribe or administer abortion
7 medication, the signature and title of the person who prescribed or
8 administered the abortion medication. The form may be signed
9 electronically and shall indicate that the person who signs the report is
10 attesting that the information in the report is correct to the best of the
11 person's knowledge. The hospital or facility must transmit the report to
12 the department within fifteen days after the last day of each reporting
13 month.

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

18 Sec. 15. Section 36-2162.01, Arizona Revised Statutes, is amended
19 to read:

20 36-2162.01. Informed consent; reporting requirements

21 A. A physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT in this
22 state who provides informed consent information regarding abortion
23 pursuant to section 36-2153 or performs fetal ultrasound imaging and
24 auscultation of fetal heart tone services pursuant to section 36-2156 or
25 who delegates to a person authorized by section 36-2153 or 36-2156 the
26 duty to provide the information or services required by those sections
27 shall submit to the department of health services on a form prescribed by
28 the department a report that includes the following information:

29 1. The number of women to whom the physician, NURSE PRACTITIONER OR
30 PHYSICIAN ASSISTANT provided the information described in section 36-2153,
31 subsection A, paragraph 1, and, of those women, the number provided in the
32 capacity of a referring physician, NURSE PRACTITIONER OR PHYSICIAN
33 ASSISTANT and the number provided in the capacity of a physician, NURSE
34 PRACTITIONER OR PHYSICIAN ASSISTANT who is to perform the abortion.

35 2. The number of women to whom the physician, physician assistant,
36 nurse, psychologist or licensed behavioral health professional provided
37 the information described in section 36-2153, subsection A, paragraph 2,
38 and, of those women, the number provided in the capacity of a referring
39 physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT and the number
40 provided in the capacity of a physician, NURSE PRACTITIONER OR PHYSICIAN
41 ASSISTANT who is to perform the abortion, and, of each of those numbers,
42 the number provided by the physician, NURSE PRACTITIONER OR PHYSICIAN
43 ASSISTANT and the number provided by a physician assistant, nurse,
44 psychologist or licensed behavioral health professional.

1 3. The number of women for whom the physician, NURSE PRACTITIONER
2 OR PHYSICIAN ASSISTANT or qualified person working in conjunction with the
3 physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT performed fetal
4 ultrasound imaging and auscultation of fetal heart tone services described
5 in section 36-2156, subsection A, paragraph 1, and, of those numbers, the
6 number provided in the capacity of a referring physician, NURSE
7 PRACTITIONER OR PHYSICIAN ASSISTANT and the number provided in the
8 capacity of a physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT who is
9 to perform the abortion, and, of each of those numbers, the number
10 provided by the physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT and
11 the number provided by a qualified person working in conjunction with the
12 physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT.

13 4. The number of abortions performed by the physician, NURSE
14 PRACTITIONER OR PHYSICIAN ASSISTANT in which information required by
15 sections 36-2153 and 36-2156 to be provided ~~at least twenty-four hours~~
16 before the abortion was not provided because a medical emergency compelled
17 the performance of an abortion to avert the woman's death and the number
18 of abortions in which this required information was not provided because a
19 medical emergency compelled the performance of an abortion to avert
20 substantial and irreversible impairment of a major bodily function of the
21 woman.

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

26 C. The report shall be signed by the physician, NURSE PRACTITIONER
27 OR PHYSICIAN ASSISTANT who provided to the woman the information required
28 by section 36-2153, subsection A, paragraph 1 or the physician, NURSE
29 PRACTITIONER OR PHYSICIAN ASSISTANT who delegated the duty to another
30 person authorized by law to provide to the woman the information required
31 by section 36-2153, subsection A, paragraph 2 or section 36-2156,
32 subsection A, paragraph 1. The form may be signed electronically and
33 shall indicate that the physician, NURSE PRACTITIONER OR PHYSICIAN
34 ASSISTANT who signs the report is attesting that the information in the
35 report is correct to the best of the ~~physician's~~ HEALTH CARE PROVIDER'S
36 knowledge. The physician, NURSE PRACTITIONER OR PHYSICIAN ASSISTANT must
37 transmit the report to the department within fifteen days after the last
38 day of each reporting month.

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

43 Sec. 16. Repeal

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