

House Engrossed

midwives; medication administration; advisory committee

State of Arizona
House of Representatives
Fifty-seventh Legislature
Second Regular Session
2026

HOUSE BILL 2251

AN ACT

AMENDING SECTIONS 36-751 AND 36-755, ARIZONA REVISED STATUTES; AMENDING TITLE 36, CHAPTER 6, ARTICLE 7, ARIZONA REVISED STATUTES, BY ADDING SECTIONS 36-761, 36-762 AND 36-763; RELATING TO MIDWIFERY.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:
2 Section 1. Section 36-751, Arizona Revised Statutes, is amended to
3 read:
4 36-751. Definitions
5 In this article, unless the context otherwise requires:
6 1. "Department" means the department of health services.
7 2. "Director" means the director of the department ~~of health~~
8 ~~services~~.
9 3. "LICENSED MIDWIFE" MEANS A MIDWIFE WHO IS LICENSED PURSUANT TO
10 THIS ARTICLE.
11 ~~3.~~ 4. "Midwife" means a person who delivers a baby or provides
12 health care related to pregnancy, labor, delivery and postpartum care of
13 the mother and her infant.
14 Sec. 2. Section 36-755, Arizona Revised Statutes, is amended to
15 read:
16 36-755. Powers and duties of the director
17 A. The director may adopt rules necessary for the proper
18 administration and enforcement of this article.
19 B. The director shall, by rule:
20 1. Define and describe, consistent with this article and the laws
21 of this state, the duties and limits of the practice of midwifery.
22 2. Adopt standards with respect to the practice of midwifery
23 designed to safeguard the health and safety of the mother and child.
24 3. Establish the criteria for granting, denying, suspending and
25 revoking a license in order to protect the health and safety of the mother
26 and child.
27 4. Describe and define reasonable and necessary minimum
28 qualifications for LICENSED midwives, including:
29 (a) The ability to read and write.
30 (b) Knowledge of the fundamentals of hygiene.
31 (c) The ability to recognize abnormal or potentially abnormal
32 conditions during pregnancy, labor and delivery and following birth.
33 (d) Knowledge of the laws of this state concerning reporting of
34 births, prenatal blood tests and newborn screening and of the rules
35 pertaining to midwifery.
36 (e) Education requirements.
37 (f) Age requirements.
38 C. THE DIRECTOR SHALL CONSIDER THE MOST RECENT MIDWIFERY JOB
39 ANALYSIS ISSUED BY THE NORTH AMERICAN REGISTRY OF MIDWIVES WHEN ADOPTING
40 OR AMENDING RULES RELATING TO THE MIDWIFERY SCOPE OF PRACTICE.

1 Sec. 3. Title 36, chapter 6, article 7, Arizona Revised Statutes,
2 is amended by adding sections 36-761, 36-762 and 36-763, to read:

3 36-761. Prescription drugs; dispensing and administration
4 authority; storage; documentation

5 A. A LICENSED MIDWIFE WHO, IN ADDITION TO THE REQUIREMENTS FOR
6 INITIAL LICENSURE, HAS PROOF OF COMPLETION OF A PHARMACOLOGY COURSE OF AT
7 LEAST EIGHT CONTINUING EDUCATION UNITS FROM A MIDWIFERY EDUCATION
8 ACCREDITATION COUNCIL-ACCREDITED INSTITUTION OR A REGIONALLY ACCREDITED
9 INSTITUTION MAY DISPENSE AND ADMINISTER THE FOLLOWING MEDICATIONS,
10 THERAPIES AND DEVICES WITH THE FOLLOWING LIMITATIONS:

11 1. ANTIBIOTICS RELATED TO GROUP B STREPTOCOCCUS PROPHYLAXIS
12 CONSISTENT WITH THE UNITED STATES CENTERS FOR DISEASE CONTROL AND
13 PREVENTION GUIDELINES OR OTHER CURRENT EVIDENCE-BASED GUIDELINES.

14 2. THE FOLLOWING ANTIHEMORRHAGIC MEDICATIONS FOR PREVENTING AND
15 TREATING POSTPARTUM HEMORRHAGE AS DEFINED BY THE AMERICAN COLLEGE OF
16 OBSTETRICIANS AND GYNECOLOGISTS:

17 (a) OXYTOCIN FOR PREVENTING UTERINE ATONY DURING OR IMMEDIATELY
18 FOLLOWING THE THIRD STAGE OF LABOR ACCORDING TO CURRENT EVIDENCE-BASED
19 STANDARDS OF CARE.

20 (b) METHYLERGONOVINE.

21 (c) CARBOPROST TROMETHAMINE.

22 (d) MISOPROSTOL.

23 (e) TRANEXAMIC ACID.

24 A LICENSED MIDWIFE MAY NOT USE THE ANTIHEMORRHAGIC MEDICATIONS SPECIFIED
25 IN THIS PARAGRAPH TO INDUCE OR AUGMENT LABOR. THE LICENSED MIDWIFE SHALL
26 INITIATE A TRANSFER OF CARE IF AN ANTIHEMORRHAGIC MEDICATION IS
27 ADMINISTERED FOR MANAGING HEMORRHAGE.

28 3. PROPHYLACTIC OPHTHALMIC MEDICATIONS FOR NEWBORN EYE CARE.

29 4. INTRAVENOUS FLUIDS FOR THE FOLLOWING:

30 (a) MEDICATION ADMINISTRATION.

31 (b) ROUTINE FLUID ADMINISTRATION.

32 (c) TREATING HYPOVOLEMIC SHOCK WHILE AWAITING EMERGENCY MEDICAL
33 SERVICE.

34 5. VITAMIN K PROPHYLAXIS FOR NEWBORNS.

35 6. RHO IMMUNE GLOBULIN.

36 7. TOPICAL, INTRAMUSCULAR OR SUBCUTANEOUS LOCAL ANESTHETICS FOR
37 POSTPARTUM REPAIR OF FIRST AND SECOND DEGREE TEARS, LACERATIONS OR
38 EPISIOTOMIES. THIS PARAGRAPH DOES NOT INCLUDE ANY SCHEDULE I CONTROLLED
39 SUBSTANCE.

40 8. OXYGEN AND COMPRESSED AIR FOR FETAL OR MATERNAL DISTRESS AND
41 INFANT RESUSCITATION.

42 9. EPINEPHRINE FOR NEONATAL RESUSCITATION CONSISTENT WITH THE
43 NEONATAL RESUSCITATION PROGRAM GUIDELINES AND TO TREAT MATERNAL ALLERGIC
44 REACTIONS.

45 10. GLUCOSE GEL ADMINISTERED ORALLY FOR NEONATAL HYPOGLYCEMIA.

1 11. VITAMINS AND MINERALS FOR CORRECTING ELECTROLYTE IMBALANCES,
2 INCLUDING B VITAMINS, CALCIUM, MAGNESIUM, DIETARY SUPPLEMENTS, HOMEOPATHIC
3 REMEDIES, PLANT SUBSTANCES THAT ARE NOT DESIGNATED AS PRESCRIPTION DRUGS
4 OR CONTROLLED SUBSTANCES, AND OVER-THE-COUNTER MEDICATIONS.

5 12. RESUSCITATION SUPPLIES AND EQUIPMENT ACCORDING TO THE CURRENT
6 NEONATAL RESUSCITATION PROGRAM ALGORITHM.

7 13. MEDICAL SUPPLIES AND EQUIPMENT NEEDED TO ADMINISTER THE
8 MEDICATIONS PRESCRIBED IN THIS SUBSECTION.

9 14. ELECTRONIC BREAST PUMPS, GLUCOSE MONITORS, COMPRESSION
10 STOCKINGS AND PREGNANCY SUPPORT BELTS OR DEVICES.

11 B. A LICENSED MIDWIFE MAY ADMINISTER OTHER PRESCRIPTION MEDICATIONS
12 AS PRESCRIBED BY A PHYSICIAN WHO IS LICENSED PURSUANT TO TITLE 32, CHAPTER
13 13, 14 OR 17, A REGISTERED NURSE PRACTITIONER WHO IS LICENSED PURSUANT TO
14 TITLE 32, CHAPTER 15 OR A PHYSICIAN ASSISTANT WHO IS LICENSED PURSUANT TO
15 TITLE 32, CHAPTER 25. A PHARMACIST WHO DISPENSES PRESCRIPTION MEDICATIONS
16 PRESCRIBED PURSUANT TO THIS SUBSECTION TO A LICENSED MIDWIFE IS NOT LIABLE
17 FOR ANY ADVERSE REACTION THAT IS CAUSED BY THE LICENSED MIDWIFE'S METHOD
18 OF USE.

19 C. A LICENSED MIDWIFE MAY LAWFULLY OBTAIN, TRANSPORT, ADMINISTER
20 AND POSSESS ADEQUATE QUANTITIES OF THE MEDICATIONS PRESCRIBED IN
21 SUBSECTION A OF THIS SECTION AND THE EQUIPMENT NORMALLY REQUIRED TO
22 ADMINISTER THOSE MEDICATIONS. THE LICENSED MIDWIFE SHALL:

23 1. STORE THE MEDICATIONS PRESCRIBED IN SUBSECTION A OF THIS SECTION
24 AS DIRECTED BY THE MANUFACTURER. A LICENSED MIDWIFE MAY NOT ADMINISTER A
25 MEDICATION TO ANY PERSON AFTER THE LISTED EXPIRATION DATE.

26 2. RECORD IN THE PATIENT'S CHART EACH USE OF MEDICATION AND THE
27 MEDICATION'S LOT NUMBER AND EXPIRATION DATE.

28 36-762. Arizona midwifery advisory committee; membership;
29 duties; scope of practice; modification; sentinel
30 events; definition

31 A. THE ARIZONA MIDWIFERY ADVISORY COMMITTEE IS ESTABLISHED IN THE
32 DEPARTMENT TO ASSIST IN EXAMINING APPLICANTS FOR A MIDWIFERY LICENSE, IF
33 REQUESTED, TO COLLABORATE WITH AND ASSIST THE DIRECTOR IN DISCIPLINARY
34 MATTERS, IF REQUESTED, AND TO PERFORM ANY OTHER DUTIES PRESCRIBED IN THIS
35 ARTICLE.

36 B. THE DIRECTOR SHALL APPOINT THE MEMBERS OF THE ADVISORY
37 COMMITTEE, WHICH SHALL BE COMPOSED OF NOT MORE THAN ELEVEN OF THE
38 FOLLOWING MEMBERS:

39 1. AT LEAST FIVE LICENSED MIDWIVES.

40 2. TWO CERTIFIED NURSE MIDWIVES WHO ARE LICENSED PURSUANT TO TITLE
41 32, CHAPTER 15.

42 3. TWO PHYSICIANS WHO ARE LICENSED PURSUANT TO TITLE 32, CHAPTER
43 13, 14 OR 17 AND WHO ARE BOARD CERTIFIED IN OBSTETRICS, PEDIATRICS OR
44 FAMILY MEDICINE. THE DIRECTOR SHALL SOLICIT PHYSICIAN APPLICATIONS FROM
45 STATE MEDICAL SOCIETIES AND ASSOCIATIONS.

- 1 4. ONE CONSUMER OF MIDWIFERY CARE.
- 2 C. ADVISORY COMMITTEE MEMBERS ARE NOT ELIGIBLE FOR COMPENSATION OR
3 REIMBURSEMENT OF EXPENSES.
- 4 D. THE ADVISORY COMMITTEE SHALL MEET AT LEAST FOUR TIMES EACH YEAR,
5 ONCE PER QUARTER.
- 6 E. THE ADVISORY COMMITTEE SHALL MAKE RECOMMENDATIONS TO THE
7 DIRECTOR WHEN ADOPTING OR AMENDING RULES RELATING TO THE MIDWIFERY SCOPE
8 OF PRACTICE.
- 9 F. A LICENSED MIDWIFE WHO IS INTERESTED IN MODIFYING THE MIDWIFERY
10 SCOPE OF PRACTICE MUST SUBMIT A REPORT TO THE ADVISORY COMMITTEE THAT
11 CONTAINS AT LEAST THE FOLLOWING:
- 12 1. A DESCRIPTION OF THE ISSUE AND WHY AN ADDITION TO THE MIDWIFERY
13 SCOPE OF PRACTICE IS NECESSARY, INCLUDING THE EXTENT TO WHICH CONSUMERS
14 NEED AND WILL BENEFIT FROM A LICENSED MIDWIFE'S ABILITY TO PROVIDE THIS
15 ADDITIONAL HEALTH CARE SERVICE.
- 16 2. THE AVAILABLE EVIDENCE-BASED RESEARCH THAT DEMONSTRATES THAT
17 LICENSED MIDWIVES ARE COMPETENT TO PERFORM THE PROPOSED HEALTH CARE
18 SERVICE.
- 19 3. THE EXTENT TO WHICH A CHANGE IN THE MIDWIFERY SCOPE OF PRACTICE
20 MAY HARM THE PUBLIC, INCLUDING THE EXTENT TO WHICH A CHANGE IN THE SCOPE
21 OF PRACTICE WILL RESTRICT ENTRY INTO THE PRACTICE OF MIDWIFERY.
- 22 G. IF A MAJORITY OF A QUORUM OF THE ADVISORY COMMITTEE MEMBERS
23 VOTES TO APPROVE A CHANGE IN THE MIDWIFERY SCOPE OF PRACTICE PURSUANT TO
24 SUBSECTION F OF THIS SECTION, THE ADVISORY COMMITTEE SHALL PROVIDE THE
25 DIRECTOR WITH ITS RECOMMENDATIONS FOR A POSSIBLE RULE CHANGE.
- 26 H. THE ADVISORY COMMITTEE SHALL CONDUCT A REVIEW OF SENTINEL EVENTS
27 OCCURRING DURING THE COURSE OF PRENATAL, INTRAPARTUM OR POSTPARTUM CARE
28 PROVIDED BY LICENSED MIDWIVES IN THIS STATE.
- 29 I. THE ADVISORY COMMITTEE MAY CONVENE EMERGENCY MEETINGS WHEN A
30 CASE OR SENTINEL EVENT REQUIRES TIMELY REVIEW OR ACTION TO PROTECT THE
31 PUBLIC HEALTH AND SAFETY.
- 32 J. FOLLOWING THE REVIEW OF A SENTINEL EVENT, THE ADVISORY COMMITTEE
33 SHALL MAKE RECOMMENDATIONS TO THE DEPARTMENT REGARDING WHETHER THE CARE
34 PROVIDED WAS:
- 35 1. CONSISTENT WITH COMMUNITY STANDARDS.
- 36 2. CONSISTENT WITH COMMUNITY STANDARDS BUT OUTSIDE THE SCOPE OF
37 PRACTICE AS DEFINED BY THE DEPARTMENT IN RULE.
- 38 3. OUTSIDE OF COMMUNITY STANDARDS AND REQUIRING CORRECTIVE ACTION.
- 39 K. FOR CARE DETERMINED TO BE OUTSIDE OF COMMUNITY STANDARDS UNDER
40 SUBSECTION J OF THIS SECTION, THE ADVISORY COMMITTEE MAY RECOMMEND ONE OR
41 MORE OF THE FOLLOWING TO THE DEPARTMENT:
- 42 1. ADDITIONAL CONTINUING EDUCATION REQUIREMENTS.
- 43 2. MENTORING OR SUPERVISED PRACTICE.
- 44 3. ADMINISTRATIVE CIVIL PENALTIES.
- 45 4. RESTRICTION OR SUSPENSION OF A LICENSE.

- 1 5. REVOCATION OF A LICENSE.
- 2 L. THE ADVISORY COMMITTEE SHALL REVIEW MIDWIFE REPORTS SUBMITTED
- 3 PURSUANT TO SECTION 36-763 AND MAY RECOMMEND MODIFICATIONS TO REPORTING
- 4 REQUIREMENTS TO THE DEPARTMENT TO SUPPORT QUALITY IMPROVEMENT AND PATIENT
- 5 SAFETY.
- 6 M. FOR THE PURPOSES OF THIS SECTION, "SENTINEL EVENT":
- 7 1. MEANS AN UNEXPECTED, SERIOUS PATIENT SAFETY INCIDENT RESULTING
- 8 IN DEATH, PERMANENT HARM OR A SIGNIFICANT RISK OF HARM.
- 9 2. INCLUDES BOTH:
- 10 (a) MATERNAL SENTINEL EVENTS, INCLUDING:
- 11 (i) MATERNAL DEATH.
- 12 (ii) MATERNAL INTENSIVE CARE UNIT ADMISSION.
- 13 (iii) UTERINE RUPTURE.
- 14 (iv) POSTPARTUM HEMORRHAGE REQUIRING A BLOOD TRANSFUSION.
- 15 (v) SHOULDER DYSTOCIA WITH BRACHIAL PLEXUS INJURY.
- 16 (b) NEONATAL SENTINEL EVENTS, INCLUDING:
- 17 (i) NEONATAL INTENSIVE CARE UNIT ADMISSION WITHIN SEVENTY-TWO HOURS
- 18 AFTER BIRTH, NOT INCLUDING OBSERVATION-ONLY ADMISSIONS OR ADMISSIONS FOR
- 19 CONGENITAL ANOMALIES.
- 20 (ii) A BIRTH WEIGHT OF LESS THAN TWO THOUSAND FIVE HUNDRED GRAMS.
- 21 (iii) AN APGAR SCORE OF LESS THAN SEVEN AT FIVE MINUTES.
- 22 (iv) RESPIRATORY DISTRESS REQUIRING PROLONGED VENTILATION.
- 23 36-763. Disclosure; reporting requirements; definitions
- 24 A. AT THE INITIATION OF CARE, EACH LICENSED MIDWIFE SHALL DISCLOSE
- 25 TO EACH PATIENT WHETHER THE LICENSED MIDWIFE MAINTAINS PROFESSIONAL
- 26 LIABILITY INSURANCE. THIS DISCLOSURE SHALL BE INCLUDED IN THE INFORMED
- 27 CONSENT DOCUMENT AND ACKNOWLEDGED BY THE PATIENT'S SIGNATURE.
- 28 B. ON OR BEFORE JANUARY 31 EACH YEAR, EACH LICENSED MIDWIFE SHALL
- 29 FILE A REPORT WITH THE DEPARTMENT, IN A FORMAT PRESCRIBED BY THE
- 30 DEPARTMENT, THE FOLLOWING INFORMATION, NOT INCLUDING ANY INDIVIDUALLY
- 31 IDENTIFIABLE HEALTH INFORMATION OF A PATIENT, FOR THE PRECEDING CALENDAR
- 32 YEAR:
- 33 1. THE NUMBER OF WOMEN FOR WHOM THE LICENSED MIDWIFE PROVIDED CARE.
- 34 2. THE NUMBER OF DELIVERIES THE LICENSED MIDWIFE ATTENDED AS
- 35 PRIMARY MIDWIFE.
- 36 3. THE NUMBER, REASON FOR AND OUTCOME OF EACH TRANSFER OR TRANSPORT
- 37 OF A PATIENT IN THE ANTEPARTUM, INTRAPARTUM OR IMMEDIATE POSTPARTUM
- 38 PERIODS.
- 39 4. THE NUMBER OF PERINATAL DEATHS, INCLUDING THE CAUSE OF DEATH AND
- 40 A DESCRIPTION OF THE CIRCUMSTANCE.
- 41 5. THE NUMBER AND OUTCOME OF BREECH BIRTHS AND VAGINAL BIRTHS AFTER
- 42 CESAREAN.
- 43 6. THE NUMBER OF BIRTHS THAT OCCURRED MORE THAN TWENTY-FIVE MILES
- 44 FROM A HOSPITAL THAT PROVIDES OBSTETRICS SERVICES.
- 45 7. THE NUMBER OF FETAL DEATHS AFTER TWENTY WEEKS' GESTATION.

- 1 8. THE LICENSED MIDWIFE'S FULL NAME, LICENSE NUMBER AND COUNTY.
2 C. IN ADDITION TO THE REPORTING REQUIRED IN SUBSECTION B OF THIS
3 SECTION, A LICENSED MIDWIFE SHALL REPORT TO THE DEPARTMENT:
4 1. A PERINATAL MORTALITY WITHIN SEVENTY-TWO HOURS AFTER THE DEATH.
5 2. A SENTINEL EVENT WITHIN FOURTEEN DAYS AFTER THE EVENT.
6 D. THE INFORMATION REPORTED TO THE DEPARTMENT PURSUANT TO
7 SUBSECTIONS B AND C OF THIS SECTION MAY BE INSPECTED, COPIED, OBTAINED OR
8 PROVIDED TO THE ADVISORY COMMITTEE FOR RESEARCH AND EVIDENCE.
9 E. THE REPORT REQUIRED BY SUBSECTION B OF THIS SECTION REPLACES THE
10 REPORT REQUIRED BY EACH LICENSED MIDWIFE FOLLOWING THE TERMINATION OF CARE
11 FOR EACH PATIENT.
12 F. FOR THE PURPOSES OF THIS SECTION:
13 1. "INDIVIDUALLY IDENTIFIABLE HEALTH INFORMATION" HAS THE SAME
14 MEANING PRESCRIBED IN SECTION 36-3801.
15 2. "SENTINEL EVENT" HAS THE SAME MEANING PRESCRIBED IN SECTION
16 36-762.
17 Sec. 4. Short title
18 This act may be cited as the "Jordan and Mack Terry Act".