

REFERENCE TITLE: gender transition procedures; informed consent

State of Arizona
Senate
Fifty-seventh Legislature
Second Regular Session
2026

SB 1099

Introduced by
Senators Carroll: Angius, Gowan, Payne, Shamp; Representative Pingerelli

AN ACT

AMENDING TITLE 32, CHAPTER 32, ARTICLE 1, ARIZONA REVISED STATUTES, BY
ADDING SECTION 32-3230.03; RELATING TO HEALTH PROFESSIONALS.

(TEXT OF BILL BEGINS ON NEXT PAGE)

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

2 Section 1. Title 32, chapter 32, article 1, Arizona Revised
3 Statutes, is amended by adding section 32-3230.03, to read:

4 32-3230.03. Informed consent; gender transition procedures;
5 record retention; civil action; definitions

6 A. A HEALTH PROFESSIONAL MAY NOT PRESCRIBE, ADMINISTER OR PERFORM A
7 GENDER TRANSITION PROCEDURE WITHOUT FIRST OBTAINING VOLUNTARY, WRITTEN AND
8 SIGNED INFORMED CONSENT AS PRESCRIBED IN THIS SECTION.

9 B. BEFORE PRESCRIBING, ADMINISTERING OR PERFORMING A GENDER
10 TRANSITION PROCEDURE, A HEALTH PROFESSIONAL SHALL DISCLOSE, AT A MINIMUM,
11 BOTH VERBALLY AND IN WRITING, ALL OF THE FOLLOWING:

12 1. THAT THE LONG-TERM BENEFITS AND HARMS OF PUBERTY-SUPPRESSING
13 MEDICATIONS, CROSS-SEX HORMONES AND SURGICAL PROCEDURES USED FOR GENDER
14 TRANSITION ARE UNCERTAIN AND THAT AVAILABLE RESEARCH HAS LOW CERTAINTY.

15 2. THAT THE KNOWN RISKS AND REASONABLY FORESEEABLE HARMS ASSOCIATED
16 WITH THESE PROCEDURES INCLUDE:

17 (a) IMPAIRED BONE MINERAL DENSITY AND ALTERED SKELETAL DEVELOPMENT.

18 (b) POSSIBLE ADVERSE EFFECTS ON BRAIN MATURATION, COGNITION AND
19 EMOTIONAL REGULATION.

20 (c) INFERTILITY OR PERMANENT STERILIZATION, INCLUDING THE RISK THAT
21 FERTILITY MAY NOT BE RESTORED IF PUBERTY IS SUPPRESSED BEFORE GAMETE
22 MATURATION.

23 (d) STRUCTURAL AND FUNCTIONAL CHANGES TO REPRODUCTIVE ORGANS,
24 INCLUDING OVARIAN, UTERINE, TESTICULAR AND GENITAL TISSUE DAMAGE.

25 (e) CARDIOVASCULAR, METABOLIC AND THROMBOEMBOLIC RISKS THAT ARE
26 ASSOCIATED WITH HIGH-DOSE HORMONE EXPOSURE.

27 (f) PSYCHIATRIC OR BEHAVIORAL CHANGES, INCLUDING MOOD INSTABILITY,
28 DEPRESSION, ANXIETY, AGGRESSION AND OTHER ADVERSE REACTIONS THAT HAVE BEEN
29 OBSERVED IN POSTMARKETING REPORTS.

30 (g) SURGICAL COMPLICATIONS, INCLUDING CHRONIC PAIN, ALTERED
31 SENSATION, IMPAIRED SEXUAL FUNCTION, FISTULAS, STRICTURES AND THE
32 POSSIBILITY OF THE NEED FOR ADDITIONAL REVISION SURGERIES.

33 3. THAT REMOVAL OR ALTERATION OF HEALTHY ORGANS IS IRREVERSIBLE AND
34 THAT CERTAIN SURGICAL OUTCOMES CANNOT BE FULLY CORRECTED OR REVERSED.

35 4. THAT FERTILITY PRESERVATION MAY BE IMPOSSIBLE FOR INDIVIDUALS
36 WHO BEGIN PUBERTY-SUPPRESSING MEDICATIONS BEFORE GAMETE MATURATION.

37 5. THE EXISTENCE OF NONMEDICAL ALTERNATIVES, INCLUDING
38 PSYCHOTHERAPY, TREATMENT FOR CO-OCCURRING MENTAL HEALTH CONDITIONS AND
39 OTHER NONINVASIVE APPROACHES.

40 6. THAT SOME INDIVIDUALS CHOOSE TO DETRANSITION AND THAT DATA
41 REGARDING LONG-TERM OUTCOMES, REGRET RATES AND REVERSIBILITY OF EFFECTS
42 ARE LIMITED.

43 C. INFORMED CONSENT OBTAINED PURSUANT TO THIS SECTION MUST BE
44 DOCUMENTED ON A FORM PRESCRIBED BY THE DEPARTMENT OF HEALTH SERVICES AND
45 SHALL BE MAINTAINED IN THE PATIENT'S MEDICAL RECORD.

1 D. A HEALTH PROFESSIONAL SHALL RETAIN ALL INFORMED CONSENT
2 DOCUMENTS RELATING TO A GENDER TRANSITION PROCEDURE FOR AT LEAST FIFTEEN
3 YEARS AND SHALL MAKE THESE RECORDS AVAILABLE TO THE HEALTH PROFESSIONAL'S
4 HEALTH PROFESSION REGULATORY BOARD ON REQUEST FOR THE PURPOSE OF A
5 COMPLIANCE REVIEW.

6 E. A HEALTH PROFESSIONAL MAY NOT PROVIDE INFORMATION THAT IS
7 MATERIALLY INCOMPLETE OR THAT MINIMIZES THE RISKS ASSOCIATED WITH A GENDER
8 TRANSITION PROCEDURE. A VIOLATION OF THIS SUBSECTION CONSTITUTES AN ACT
9 OF UNPROFESSIONAL CONDUCT AND IS SUBJECT TO DISCIPLINE BY THE APPROPRIATE
10 HEALTH PROFESSION REGULATORY BOARD.

11 F. A PERSON MAY BRING A CIVIL ACTION FOR DAMAGES AGAINST A HEALTH
12 PROFESSIONAL WHO DOES ANY OF THE FOLLOWING:

- 13 1. FAILS TO OBTAIN INFORMED CONSENT AS REQUIRED BY THIS SECTION.
- 14 2. KNOWINGLY PROVIDES FALSE, INCOMPLETE OR MISLEADING INFORMATION.
- 15 3. FAILS TO DISCLOSE RISKS OR ALTERNATIVES AS REQUIRED BY THIS
16 SECTION.

17 G. FOR THE PURPOSES OF THIS SECTION:

18 1. "GENDER DYSPHORIA" MEANS A MARKED INCONGRUENCE BETWEEN AN
19 INDIVIDUAL'S EXPERIENCED GENDER AND BIOLOGICAL SEX AS DESCRIBED IN THE
20 MOST RECENT EDITION OF THE DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL
21 DISORDERS.

22 2. "GENDER TRANSITION PROCEDURE":

23 (a) MEANS ANY MEDICAL OR SURGICAL INTERVENTION THAT IS INTENDED TO
24 SUPPRESS PUBERTY, ALTER SECONDARY SEX CHARACTERISTICS OR MODIFY
25 REPRODUCTIVE ANATOMY OR FUNCTION FOR THE PURPOSE OF TREATING OR MANAGING
26 GENDER DYSPHORIA.

27 (b) INCLUDES:

28 (i) PUBERTY-SUPPRESSING MEDICATIONS.

29 (ii) CROSS-SEX HORMONE THERAPIES.

30 (iii) SURGICAL PROCEDURES THAT ALTER OR REMOVE HEALTHY REPRODUCTIVE
31 OR SEXUAL ORGANS OR OTHERWISE MODIFY GENITAL OR NONGENITAL ANATOMY.

32 3. "HEALTH PROFESSIONAL" MEANS A HEALTH PROFESSIONAL WHO EVALUATES,
33 DIAGNOSIS, REFERS, PRESCRIBES, ADMINISTERS OR PERFORMS A GENDER TRANSITION
34 PROCEDURE.

35 Sec. 2. Legislative intent

36 The legislature finds that medical interventions used for gender
37 transition involve significant uncertainty and potential for harm,
38 including risks to bone development, neurocognitive maturation, fertility,
39 reproductive health, cardiovascular function and psychiatric well-being.
40 The purpose of this act is to ensure that no individual is subjected to
41 such interventions without complete, accurate and fully informed consent
42 consistent with the best available scientific evidence.