

REFERENCE TITLE: terminally ill individuals; end-of-life options

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

## **SB 1486**

Introduced by  
Senators Stahl Hamilton: Alston, Gabaldon, Gonzales, Hatathlie, Steele,  
Terán

AN ACT

AMENDING TITLE 36, ARIZONA REVISED STATUTES, BY ADDING CHAPTER 33;  
RELATING TO END-OF-LIFE OPTIONS.

(TEXT OF BILL BEGINS ON NEXT PAGE)

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

2 Section 1. Title 36, Arizona Revised Statutes, is amended by adding  
3 chapter 33, to read:

4 CHAPTER 33

5 MEDICAL AID IN DYING

6 ARTICLE 1. GENERAL PROVISIONS

7 36-3301. Definitions

8 IN THIS ARTICLE, UNLESS THE CONTEXT OTHERWISE REQUIRES:

9 1. "ADULT" MEANS AN INDIVIDUAL WHO IS AT LEAST EIGHTEEN YEARS OF  
10 AGE.

11 2. "ATTENDING PROVIDER" MEANS A PERSON WHO IS QUALIFIED BY  
12 SPECIALTY OR EXPERIENCE TO DETERMINE AN INDIVIDUAL'S ELIGIBILITY TO PURSUE  
13 MEDICAL AID IN DYING UNDER THIS ARTICLE, WHO AGREES TO WRITE THE  
14 PRESCRIPTIONS AND WHO TAKES RESPONSIBILITY FOR COUNSELING THE INDIVIDUAL,  
15 MAKING CARE DECISIONS, ENSURING COMPLIANCE WITH THIS ARTICLE AND  
16 SUBMITTING PROPER DOCUMENTATION TO THE DEPARTMENT.

17 3. "CAPACITY" MEANS AN INDIVIDUAL'S ABILITY, AS DETERMINED BY  
18 PROFESSIONAL STANDARDS OF CARE, TO UNDERSTAND AND APPRECIATE HEALTH CARE  
19 OPTIONS AVAILABLE TO THE INDIVIDUAL, INCLUDING SIGNIFICANT BENEFITS AND  
20 RISKS, AND TO MAKE AND COMMUNICATE AN INFORMED HEALTH CARE DECISION.

21 4. "COERCION OR UNDUE INFLUENCE" MEANS THE WILFUL ATTEMPT, WHETHER  
22 BY DECEPTION, INTIMIDATION OR ANY OTHER MEANS, TO CAUSE AN INDIVIDUAL TO  
23 REQUEST, OBTAIN OR SELF-ADMINISTER MEDICATION PURSUANT TO THIS ARTICLE  
24 WITH INTENT TO CAUSE THE DEATH OF THE INDIVIDUAL OR TO PREVENT THE  
25 INDIVIDUAL FROM OBTAINING OR SELF-ADMINISTERING MEDICATION PURSUANT TO  
26 THIS ARTICLE.

27 5. "CONSULTING PROVIDER" MEANS A PROVIDER WHO IS QUALIFIED BY  
28 SPECIALTY OR EXPERIENCE TO MAKE A PROFESSIONAL DIAGNOSIS AND PROGNOSIS  
29 REGARDING AN INDIVIDUAL'S DISEASE.

30 6. "COUNSELING" MEANS ONE OR MORE CONSULTATIONS AS NECESSARY  
31 BETWEEN A MENTAL HEALTH PROFESSIONAL AND AN INDIVIDUAL TO DETERMINE  
32 WHETHER THE INDIVIDUAL HAS CAPACITY AND IS NOT SUFFERING FROM A  
33 PSYCHIATRIC OR PSYCHOLOGICAL DISORDER OR DEPRESSION CAUSING IMPAIRED  
34 JUDGMENT.

35 7. "DEPARTMENT" MEANS THE DEPARTMENT OF HEALTH SERVICES.

36 8. "HEALTH CARE FACILITY":

37 (a) MEANS A HOSPITAL, MEDICAL CLINIC, NURSING HOME OR INPATIENT  
38 HOSPICE FACILITY OR ANY OTHER LICENSED HEALTH CARE INSTITUTION WHERE THE  
39 DELIVERY OF HEALTH CARE IS FACILITATED.

40 (b) DOES NOT INCLUDE AN INDIVIDUAL HEALTH CARE PROVIDER.

41 9. "HEALTH CARE PROVIDER":

42 (a) MEANS A PERSON WHO IS LICENSED, CERTIFIED OR OTHERWISE  
43 AUTHORIZED OR ALLOWED BY THE LAWS OF THIS STATE TO ADMINISTER HEALTH CARE  
44 OR DISPENSE MEDICATION IN THE ORDINARY COURSE OF BUSINESS OR PRACTICE OF A  
45 PROFESSION.

- 1 (b) DOES NOT INCLUDE A HEALTH CARE FACILITY.  
2 10. "INFORMED DECISION" MEANS A VOLUNTARY AFFIRMATIVE DECISION THAT  
3 IS ALL OF THE FOLLOWING:  
4 (a) MADE BY A QUALIFIED INDIVIDUAL TO REQUEST AND OBTAIN A  
5 PRESCRIPTION FOR MEDICATION THAT THE INDIVIDUAL WILL SELF-ADMINISTER TO  
6 END THE INDIVIDUAL'S LIFE IN A HUMANE AND DIGNIFIED MANNER.  
7 (b) BASED ON AN APPRECIATION OF THE RELEVANT FACTS.  
8 (c) MADE AFTER THE ATTENDING PROVIDER FULLY INFORMS THE INDIVIDUAL  
9 OF ALL OF THE FOLLOWING:  
10 (i) THE INDIVIDUAL'S MEDICAL DIAGNOSIS.  
11 (ii) THE INDIVIDUAL'S PROGNOSIS.  
12 (iii) THE POTENTIAL RISKS ASSOCIATED WITH TAKING THE MEDICATION TO  
13 BE PRESCRIBED.  
14 (iv) THE PROBABLE RESULT OF TAKING THE MEDICATION TO BE PRESCRIBED.  
15 (v) THE FEASIBLE ALTERNATIVES AND CONCURRENT OR ADDITIONAL  
16 TREATMENT OPPORTUNITIES FOR THE INDIVIDUAL'S TERMINAL ILLNESS, INCLUDING  
17 COMFORT CARE, PALLIATIVE CARE, HOSPICE CARE, PAIN CONTROL AND  
18 DISEASE-DIRECTED TREATMENT OPTIONS, AS WELL AS THE RISKS AND BENEFITS OF  
19 EACH ALTERNATIVE.  
20 11. "MEDICAL AID IN DYING" MEANS THE PRACTICE OF EVALUATING A  
21 REQUEST FROM, DETERMINING QUALIFICATION FOR AND PROVIDING A PRESCRIPTION  
22 FOR MEDICATION TO A QUALIFIED INDIVIDUAL PURSUANT TO THIS ARTICLE.  
23 12. "MEDICALLY CONFIRM" MEANS THAT A CONSULTING PROVIDER WHO HAS  
24 EXAMINED THE INDIVIDUAL AND THE INDIVIDUAL'S RELEVANT MEDICAL RECORDS  
25 CONFIRMS THE MEDICAL OPINION OF THE ATTENDING PROVIDER.  
26 13. "MENTAL HEALTH PROFESSIONAL" MEANS A PSYCHIATRIST,  
27 PSYCHOLOGIST OR PSYCHIATRIC NURSE PRACTITIONER WHO IS LICENSED BY THIS  
28 STATE.  
29 14. "PROVIDER" MEANS AN INDIVIDUAL WHO IS ANY OF THE FOLLOWING:  
30 (a) A PHYSICIAN LICENSED PURSUANT TO TITLE 32, CHAPTER 13 OR 17.  
31 (b) AN ADVANCE PRACTICE REGISTERED NURSE LICENSED PURSUANT TO TITLE  
32 32, CHAPTER 15.  
33 (c) A PHYSICIAN ASSISTANT LICENSED PURSUANT TO TITLE 32,  
34 CHAPTER 25.  
35 15. "PRESCRIPTION FOR MEDICATION" MEANS A PRESCRIPTION THAT IS  
36 WRITTEN BY AN ATTENDING PROVIDER FOR MEDICATION FOR A QUALIFIED INDIVIDUAL  
37 TO SELF-ADMINISTER TO BRING ABOUT A PEACEFUL DEATH IN ACCORDANCE WITH THIS  
38 ARTICLE.  
39 16. "QUALIFIED INDIVIDUAL" MEANS A TERMINALLY ILL ADULT WITH  
40 CAPACITY WHO IS A RESIDENT OF THIS STATE AND WHO HAS SATISFIED THE  
41 REQUIREMENTS OF THIS ARTICLE IN ORDER TO OBTAIN A PRESCRIPTION FOR  
42 MEDICATION.

1 17. "SELF-ADMINISTER":

2 (a) MEANS AN AFFIRMATIVE, CONSCIOUS VOLUNTARY ACT BY A QUALIFIED  
3 INDIVIDUAL TO INGEST THE PRESCRIPTION MEDICATION.

4 (b) DOES NOT INCLUDE THE ADMINISTRATION OF PRESCRIPTION MEDICATION  
5 BY AN INJECTION OR INTRAVENOUS INFUSION.

6 18. "TERMINAL ILLNESS" OR "TERMINALLY ILL" MEANS AN INCURABLE  
7 ILLNESS THAT WILL, WITHIN REASONABLE MEDICAL JUDGMENT, RESULT IN DEATH  
8 WITHIN SIX MONTHS.

9 36-3302. Prescription for medication; written request;  
10 initiation

11 AN ADULT RESIDENT OF THIS STATE WHO HAS CAPACITY, WHOM THE ATTENDING  
12 PHYSICIAN AND CONSULTING PHYSICIAN HAVE DETERMINED IS SUFFERING FROM A  
13 TERMINAL ILLNESS AND WHO HAS VOLUNTARILY EXPRESSED A WISH TO DIE MAY MAKE  
14 A WRITTEN REQUEST FOR A PRESCRIPTION FOR MEDICATION.

15 36-3303. Form of request; translation; witnesses; signatures

16 A. A VALID REQUEST FOR A PRESCRIPTION FOR MEDICATION MUST BE IN  
17 SUBSTANTIALLY THE FORM DESCRIBED IN SECTION 36-3323, BE SIGNED AND DATED  
18 BY THE QUALIFIED INDIVIDUAL AND BE WITNESSED BY TWO INDIVIDUALS WHO, IN  
19 THE PRESENCE OF THE QUALIFIED INDIVIDUAL, ATTEST THAT TO THE BEST OF THEIR  
20 KNOWLEDGE AND BELIEF THE QUALIFIED INDIVIDUAL HAS CAPACITY, IS ACTING  
21 VOLUNTARILY AND IS NOT BEING COERCED TO SIGN THE REQUEST. A PERSON WHO  
22 DOES NOT SPEAK ENGLISH MAY HAVE THE WRITTEN REQUEST FORM TRANSLATED INTO  
23 THE PERSON'S PRIMARY LANGUAGE FOR SIGNATURE.

24 B. ONE OF THE WITNESSES MUST BE AN INDIVIDUAL WHO IS NOT ANY OF THE  
25 FOLLOWING:

26 1. RELATED TO THE QUALIFIED INDIVIDUAL BY BLOOD, MARRIAGE, ADOPTION  
27 OR REGISTERED DOMESTIC PARTNERSHIP.

28 2. AT THE TIME THE REQUEST IS SIGNED, ENTITLED TO ANY PORTION OF  
29 THE QUALIFIED INDIVIDUAL'S ESTATE ON THE QUALIFIED INDIVIDUAL'S DEATH  
30 UNDER ANY WILL OR BY OPERATION OF LAW.

31 3. AT THE TIME THE REQUEST IS SIGNED, THE QUALIFIED INDIVIDUAL'S  
32 ATTENDING PROVIDER, CONSULTING PROVIDER, MENTAL HEALTH PROFESSIONAL OR  
33 INTERPRETER.

34 36-3304. Attending provider; requirements

35 THE ATTENDING PROVIDER SHALL DO ALL OF THE FOLLOWING:

36 1. MAKE THE INITIAL DETERMINATION WHETHER AN INDIVIDUAL HAS A  
37 TERMINAL ILLNESS, HAS CAPACITY AND HAS MADE THE REQUEST VOLUNTARILY.

38 2. REQUEST THE INDIVIDUAL TO DEMONSTRATE RESIDENCY IN THIS STATE  
39 PURSUANT TO SECTION 36-3313.

40 3. ENSURE THAT THE INDIVIDUAL IS MAKING AN INFORMED DECISION BY  
41 INFORMING THE PATIENT OF ALL OF THE FOLLOWING:

42 (a) THE INDIVIDUAL'S MEDICAL DIAGNOSIS.

43 (b) THE INDIVIDUAL'S PROGNOSIS.

44 (c) THE POTENTIAL RISKS ASSOCIATED WITH TAKING THE MEDICATION TO BE  
45 PRESCRIBED.

1 (d) THE PROBABLE RESULT OF TAKING THE MEDICATION TO BE PRESCRIBED.  
2 (e) FEASIBLE ALTERNATIVES AND CONCURRENT OR ADDITIONAL TREATMENT  
3 OPPORTUNITIES FOR THE INDIVIDUAL'S TERMINAL ILLNESS, INCLUDING COMFORT  
4 CARE, PALLIATIVE CARE, HOSPICE CARE, PAIN CONTROL AND DISEASE-DIRECTED  
5 TREATMENT OPTIONS, AS WELL AS THE RISKS AND BENEFITS OF EACH ALTERNATIVE.  
6 4. PROVIDE THE INDIVIDUAL WITH A REFERRAL FOR COMFORT CARE,  
7 PALLIATIVE CARE, HOSPICE CARE, PAIN CONTROL OR OTHER END-OF-LIFE TREATMENT  
8 OPPORTUNITIES AS REQUESTED OR AS CLINICALLY INDICATED.  
9 5. CONFIRM THAT THE INDIVIDUAL'S REQUEST DOES NOT ARISE FROM  
10 COERCION OR UNDUE INFLUENCE BY ASKING THE INDIVIDUAL ABOUT COERCION AND  
11 UNDUE INFLUENCE OUTSIDE OF THE PRESENCE OF OTHER PERSONS, EXCEPT AN  
12 INTERPRETER AS NECESSARY.  
13 6. DISCUSS WITH THE INDIVIDUAL THE INDIVIDUAL'S RIGHT TO RESCIND  
14 THE REQUEST AT ANY TIME.  
15 7. REFER THE PATIENT INDIVIDUAL TO A CONSULTING PROVIDER TO  
16 MEDICALLY CONFIRM THE DIAGNOSIS AND TO DETERMINE THAT THE INDIVIDUAL HAS  
17 CAPACITY AND IS ACTING VOLUNTARILY AND NOTE THIS DETERMINATION IN THE  
18 INDIVIDUAL'S MEDICAL RECORD.  
19 8. REFER THE INDIVIDUAL TO A MENTAL HEALTH PROFESSIONAL FOR  
20 COUNSELING IF APPROPRIATE PURSUANT TO SECTION 36-3306 AND NOTE THIS  
21 DETERMINATION IN THE INDIVIDUAL'S MEDICAL RECORD.  
22 9. COUNSEL THE INDIVIDUAL ABOUT THE IMPORTANCE OF ALL OF THE  
23 FOLLOWING:  
24 (a) SAFELY KEEPING AND DISPOSING OF ALL UNUSED PRESCRIBED  
25 MEDICATION.  
26 (b) THE RECOMMENDED METHODS OF SELF-ADMINISTERING THE MEDICATIONS  
27 PRESCRIBED UNDER THIS ARTICLE.  
28 (c) HAVING ANOTHER PERSON PRESENT WHEN THE INDIVIDUAL TAKES THE  
29 MEDICATION.  
30 (d) NOT TAKING THE MEDICATION IN A PUBLIC PLACE.  
31 (e) THE BENEFITS OF NOTIFYING THE INDIVIDUAL'S NEXT OF KIN.  
32 10. OFFER THE INDIVIDUAL AN OPPORTUNITY TO RESCIND AT THE END OF  
33 THE FIFTEEN-DAY WAITING PERIOD PRESCRIBED IN SECTION 36-3311.  
34 11. IMMEDIATELY BEFORE WRITING THE PRESCRIPTION FOR MEDICATION,  
35 VERIFY THAT THE INDIVIDUAL IS MAKING AN INFORMED DECISION.  
36 12. EITHER:  
37 (a) IF THE ATTENDING PROVIDER IS AUTHORIZED BY STATE AND FEDERAL  
38 LAW TO DISPENSE THE MEDICATION, DISPENSE THE MEDICATION DIRECTLY,  
39 INCLUDING ANY ANCILLARY MEDICATIONS INTENDED TO MINIMIZE THE INDIVIDUAL'S  
40 DISCOMFORT.  
41 (b) WITH THE INDIVIDUAL'S WRITTEN CONSENT, DO BOTH OF THE  
42 FOLLOWING:  
43 (i) CONTACT A PHARMACIST AND INFORM THE PHARMACIST OF THE  
44 PRESCRIPTION.

1 (ii) DELIVER THE WRITTEN PRESCRIPTION FOR MEDICATION PERSONALLY OR  
2 BY OTHER MEANS TO THE PHARMACIST, WHO SHALL DISPENSE THE MEDICATIONS TO  
3 EITHER THE QUALIFIED INDIVIDUAL, THE ATTENDING PROVIDER OR AN EXPRESSLY  
4 IDENTIFIED AGENT OF THE QUALIFIED INDIVIDUAL.

5 13. DOCUMENT THE QUALIFIED INDIVIDUAL'S MEDICAL RECORD AS REQUIRED  
6 IN SECTION 36-3312.

7 14. ENSURE THAT ALL APPROPRIATE STEPS ARE CARRIED OUT IN ACCORDANCE  
8 WITH THIS ARTICLE BEFORE WRITING A PRESCRIPTION FOR MEDICATION.

9 15. CONFIRM IN THE INDIVIDUAL'S HEALTH RECORD THAT AT LEAST ONE  
10 PHYSICIAN LICENSED PURSUANT TO TITLE 32, CHAPTER 13 OR 17 HAS DETERMINED,  
11 AFTER CONDUCTING AN APPROPRIATE EXAMINATION, THAT THE INDIVIDUAL HAS  
12 CAPACITY, HAS A TERMINAL ILLNESS AND HAS THE ABILITY TO SELF-ADMINISTER  
13 THE PRESCRIBED MEDICATION.

14 36-3305. Consulting provider; confirmation of diagnosis;  
15 requirements

16 BEFORE AN INDIVIDUAL IS DEEMED QUALIFIED UNDER THIS ARTICLE, A  
17 CONSULTING PROVIDER SHALL EXAMINE THE INDIVIDUAL AND THE INDIVIDUAL'S  
18 RELEVANT MEDICAL RECORDS, SHALL CONFIRM IN WRITING THE ATTENDING  
19 PROVIDER'S DIAGNOSIS THAT THE INDIVIDUAL IS SUFFERING FROM A TERMINAL  
20 ILLNESS AND SHALL VERIFY THAT THE INDIVIDUAL HAS CAPACITY, IS ACTING  
21 VOLUNTARILY AND HAS MADE AN INFORMED DECISION.

22 36-3306. Counseling referral; prohibition

23 IF THE ATTENDING PROVIDER OR THE CONSULTING PROVIDER BELIEVES AN  
24 INDIVIDUAL MAY BE SUFFERING FROM A PSYCHIATRIC OR PSYCHOLOGICAL DISORDER  
25 OR DEPRESSION CAUSING IMPAIRED JUDGMENT, EITHER PROVIDER SHALL REFER THE  
26 INDIVIDUAL FOR COUNSELING. THE ATTENDING PROVIDER MAY NOT WRITE A  
27 PRESCRIPTION FOR MEDICATION UNTIL THE PERSON PERFORMING THE COUNSELING  
28 DETERMINES THAT THE INDIVIDUAL IS NOT SUFFERING FROM A PSYCHIATRIC OR  
29 PSYCHOLOGICAL DISORDER OR DEPRESSION CAUSING IMPAIRED JUDGMENT AND  
30 PROVIDES A WRITTEN REPORT.

31 36-3307. Informed decision required; verification

32 THE ATTENDING PROVIDER MAY NOT WRITE A PRESCRIPTION FOR MEDICATION  
33 UNLESS THE QUALIFIED INDIVIDUAL HAS MADE AN INFORMED DECISION.  
34 IMMEDIATELY BEFORE WRITING A PRESCRIPTION FOR MEDICATION, THE ATTENDING  
35 PROVIDER SHALL VERIFY THAT THE QUALIFIED INDIVIDUAL IS MAKING AN INFORMED  
36 DECISION.

37 36-3308. Family notification

38 THE ATTENDING PROVIDER SHALL RECOMMEND THAT THE QUALIFIED INDIVIDUAL  
39 NOTIFY THE QUALIFIED INDIVIDUAL'S NEXT OF KIN REGARDING THE QUALIFIED  
40 INDIVIDUAL'S REQUEST FOR A PRESCRIPTION FOR MEDICATION. IF THE QUALIFIED  
41 INDIVIDUAL DECLINES OR IS UNABLE TO NOTIFY NEXT OF KIN, THE ATTENDING  
42 PROVIDER MAY NOT DENY THE QUALIFIED INDIVIDUAL'S REQUEST FOR THAT REASON.

43 36-3309. Use of interpreters

44 AN INTERPRETER WHOSE SERVICES ARE PROVIDED TO AN INDIVIDUAL  
45 REQUESTING INFORMATION ON CARE UNDER THIS ARTICLE SHALL MEET THE STANDARDS

1 ADOPTED BY THE NATIONAL COUNCIL ON INTERPRETING IN HEALTH CARE OR OTHER  
2 STANDARDS DEEMED ACCEPTABLE BY THE DEPARTMENT FOR HEALTH CARE PROVIDERS IN  
3 THIS STATE. AN INTERPRETER WHO IS USED FOR THE PURPOSES OF THIS ARTICLE  
4 MAY NOT:

5 1. BE RELATED TO THE QUALIFIED INDIVIDUAL BY BLOOD, MARRIAGE,  
6 REGISTERED DOMESTIC PARTNERSHIP OR ADOPTION OR BE ENTITLED TO A PORTION OF  
7 THE INDIVIDUAL'S ESTATE ON DEATH.

8 2. ACT AS A WITNESS FOR THE INDIVIDUAL'S WRITTEN REQUEST.

9 36-3310. Right to rescind request; disposal of unused  
10 medication

11 A. A QUALIFIED INDIVIDUAL MAY RESCIND A REQUEST AT ANY TIME AND IN  
12 ANY MANNER WITHOUT REGARD TO THE QUALIFIED INDIVIDUAL'S MENTAL STATE. THE  
13 ATTENDING PROVIDER MAY NOT WRITE A PRESCRIPTION FOR MEDICATION WITHOUT  
14 OFFERING THE QUALIFIED INDIVIDUAL AN OPPORTUNITY TO RESCIND THE REQUEST.

15 B. IF THE ATTENDING PROVIDER WRITES A PRESCRIPTION FOR MEDICATION  
16 AND THE QUALIFIED INDIVIDUAL DECIDES NOT TO USE THE MEDICATION TO END THE  
17 QUALIFIED INDIVIDUAL'S LIFE, THE UNUSED MEDICATION MUST BE DISPOSED OF BY  
18 ANY LEGAL MEANS OR AS PRESCRIBED BY RULE.

19 36-3311. Written request; waiting period; waiver

20 A. TO RECEIVE A PRESCRIPTION FOR MEDICATION THAT A QUALIFIED  
21 INDIVIDUAL MAY SELF-ADMINISTER UNDER THIS ARTICLE, THE QUALIFIED  
22 INDIVIDUAL MUST MAKE AN ORAL REQUEST INITIALLY AND A WRITTEN REQUEST WITH  
23 TWO WITNESSES AND MUST REITERATE THE ORAL REQUEST TO THE QUALIFIED  
24 INDIVIDUAL'S ATTENDING PROVIDER AT LEAST FIFTEEN DAYS AFTER MAKING THE  
25 INITIAL ORAL REQUEST. A PRESCRIPTION FOR MEDICATION MAY NOT BE WRITTEN  
26 BEFORE RECEIPT OF THE QUALIFIED INDIVIDUAL'S WRITTEN REQUEST.

27 B. NOTWITHSTANDING SUBSECTION A OF THIS SECTION, IF THE ATTENDING  
28 PROVIDER ATTESTS THAT THE QUALIFIED INDIVIDUAL WILL, WITHIN REASONABLE  
29 MEDICAL JUDGMENT, DIE WITHIN THE FIFTEEN DAYS AFTER MAKING THE INITIAL  
30 ORAL REQUEST, THE QUALIFIED INDIVIDUAL MAY REITERATE THE ORAL REQUEST TO  
31 THE ATTENDING PROVIDER AND SUBMIT THE WRITTEN REQUEST AT ANY TIME AFTER  
32 MAKING THE INITIAL ORAL REQUEST, AND THE FIFTEEN-DAY WAITING PERIOD IS  
33 WAIVED.

34 36-3312. Medical records; documentation; requirements

35 ALL OF THE FOLLOWING SHALL BE DOCUMENTED OR FILED IN THE QUALIFIED  
36 INDIVIDUAL'S MEDICAL RECORD:

37 1. ALL ORAL REQUESTS BY THE QUALIFIED INDIVIDUAL FOR A PRESCRIPTION  
38 FOR MEDICATION.

39 2. ALL WRITTEN REQUESTS BY THE QUALIFIED INDIVIDUAL FOR A  
40 PRESCRIPTION FOR MEDICATION.

41 3. THE ATTENDING PROVIDER'S DIAGNOSIS AND PROGNOSIS AND  
42 DETERMINATION THAT THE QUALIFIED INDIVIDUAL HAS CAPACITY, IS ACTING  
43 VOLUNTARILY AND HAS MADE AN INFORMED DECISION.

1 4. THE CONSULTING PROVIDER'S DIAGNOSIS AND PROGNOSIS AND  
2 VERIFICATION THAT THE QUALIFIED INDIVIDUAL HAS CAPACITY, IS ACTING  
3 VOLUNTARILY AND HAS MADE AN INFORMED DECISION.

4 5. A REPORT OF THE OUTCOME AND DETERMINATIONS MADE DURING  
5 COUNSELING, IF PERFORMED.

6 6. THE ATTENDING PROVIDER'S OFFER TO THE QUALIFIED INDIVIDUAL TO  
7 RESCIND THE QUALIFIED INDIVIDUAL'S REQUEST AT THE TIME OF THE QUALIFIED  
8 INDIVIDUAL'S SECOND ORAL REQUEST.

9 7. A NOTE FROM THE ATTENDING PROVIDER INDICATING THAT ALL  
10 REQUIREMENTS UNDER THIS ARTICLE HAVE BEEN MET AND INDICATING THE STEPS  
11 TAKEN TO CARRY OUT THE REQUEST, INCLUDING A NOTATION OF ANY MEDICATIONS  
12 PRESCRIBED.

13 8. CONFIRMATION THAT AT LEAST ONE PHYSICIAN LICENSED PURSUANT TO  
14 TITLE 32, CHAPTER 13 OR 17 HAS DETERMINED, AFTER CONDUCTING AN APPROPRIATE  
15 EXAMINATION, THAT THE INDIVIDUAL HAS CAPACITY, HAS A TERMINAL ILLNESS AND  
16 HAS THE ABILITY TO SELF-ADMINISTER THE PRESCRIBED MEDICATION.

17 36-3313. Residency requirement; definition

18 A. THE ATTENDING PROVIDER MAY GRANT AN INDIVIDUAL'S REQUEST UNDER  
19 THIS ARTICLE ONLY IF THE INDIVIDUAL'S RESIDENCE IS IN THIS STATE. AN  
20 INDIVIDUAL MAY PRESENT ANY OF THE FOLLOWING TO SHOW THE INDIVIDUAL'S  
21 RESIDENCY UNDER THIS SECTION:

22 1. A VALID ARIZONA DRIVER LICENSE THAT CONTAINS THE INDIVIDUAL'S  
23 PHYSICAL RESIDENCE ADDRESS. A POST OFFICE BOX IS NOT A RESIDENCE ADDRESS  
24 FOR THE PURPOSES OF THIS PARAGRAPH.

25 2. A VALID ARIZONA NONOPERATING IDENTIFICATION LICENSE THAT  
26 CONTAINS THE INDIVIDUAL'S PHYSICAL RESIDENCE ADDRESS. A POST OFFICE BOX IS  
27 NOT A RESIDENCE ADDRESS FOR THE PURPOSES OF THIS PARAGRAPH.

28 3. EVIDENCE THAT THE INDIVIDUAL OWNS OR LEASES PROPERTY IN THIS  
29 STATE.

30 4. PROOF OF VOTER REGISTRATION IN THIS STATE.

31 5. A CURRENT INCOME TAX RETURN THAT CONTAINS THE INDIVIDUAL'S  
32 PHYSICAL RESIDENCE ADDRESS. A POST OFFICE BOX IS NOT A RESIDENCE ADDRESS  
33 FOR THE PURPOSES OF THIS PARAGRAPH.

34 6. ANY OTHER MEANS OF DEMONSTRATING RESIDENCY ACCEPTABLE TO THE  
35 ATTENDING PROVIDER.

36 B. FOR THE PURPOSES OF THIS SECTION, "RESIDENCE" MEANS A PLACE  
37 WHERE A PERSON HAS ESTABLISHED A FIXED AND PRINCIPAL HOME TO WHICH THE  
38 PERSON, WHENEVER TEMPORARILY ABSENT, INTENDS TO RETURN.

39 36-3314. Annual records review; reporting requirements;  
40 confidentiality; rules; annual report

41 A. THE DEPARTMENT SHALL ANNUALLY REVIEW A SAMPLE OF RECORDS  
42 MAINTAINED PURSUANT TO THIS ARTICLE.

43 B. THE DEPARTMENT SHALL REQUIRE A HEALTH CARE PROVIDER, WITHIN  
44 THIRTY DAYS AFTER DISPENSING A PRESCRIPTION FOR MEDICATION PURSUANT TO  
45 THIS ARTICLE, TO FILE A COPY OF THE DISPENSING RECORD WITH THE DEPARTMENT.



1 C. THE DEPARTMENT SHALL ADOPT RULES TO FACILITATE THE COLLECTION OF  
2 INFORMATION REGARDING COMPLIANCE WITH THIS ARTICLE. EXCEPT AS OTHERWISE  
3 REQUIRED BY LAW, THE INFORMATION COLLECTED IS NOT A PUBLIC RECORD AND IS  
4 NOT AVAILABLE FOR INSPECTION BY THE PUBLIC.

5 D. THE DEPARTMENT SHALL GENERATE AND MAKE AVAILABLE TO THE PUBLIC  
6 AN ANNUAL STATISTICAL REPORT OF INFORMATION COLLECTED UNDER THIS SECTION.

7 36-3315. Effect on construction of contracts, wills or  
8 agreements

9 A. A PROVISION IN A CONTRACT, WILL OR OTHER AGREEMENT, WHETHER  
10 WRITTEN OR ORAL, IS INVALID TO THE EXTENT THAT THE PROVISION WOULD AFFECT  
11 WHETHER A QUALIFIED INDIVIDUAL MAY MAKE OR RESCIND A REQUEST FOR A  
12 PRESCRIPTION FOR MEDICATION.

13 B. AN OBLIGATION OWING UNDER ANY CURRENTLY EXISTING CONTRACT MAY  
14 NOT BE CONDITIONED ON OR AFFECTED BY THE MAKING OR RESCINDING OF A REQUEST  
15 BY A QUALIFIED INDIVIDUAL FOR A PRESCRIPTION FOR MEDICATION.

16 36-3316. Insurance or annuity policies

17 THE SALE, PROCUREMENT OR ISSUANCE OR DELIVERY OF BENEFITS UNDER A  
18 LIFE, HEALTH OR ACCIDENT INSURANCE OR ANNUITY POLICY OR THE RATE CHARGED  
19 FOR A POLICY MAY NOT BE CONDITIONED ON OR AFFECTED BY THE AVAILABILITY OF  
20 MEDICATION PURSUANT TO THIS ARTICLE OR ON A QUALIFIED INDIVIDUAL MAKING OR  
21 RESCINDING A REQUEST FOR A PRESCRIPTION FOR MEDICATION. A QUALIFIED  
22 INDIVIDUAL'S ACT OF INGESTING MEDICATION TO END THE INDIVIDUAL'S LIFE IN A  
23 HUMANE AND DIGNIFIED MANNER DOES NOT AFFECT A LIFE, HEALTH OR ACCIDENT  
24 INSURANCE OR ANNUITY POLICY ISSUED OR DELIVERED IN THIS STATE. THE RATING,  
25 SALE, PROCUREMENT OR ISSUANCE OF ANY MEDICAL PROFESSIONAL LIABILITY  
26 INSURANCE POLICY IN THIS STATE MUST BE MADE IN ACCORDANCE WITH TITLE 20.

27 36-3317. Construction of article: standard of care

28 A. THIS ARTICLE DOES NOT AUTHORIZE A HEALTH CARE PROVIDER OR ANY  
29 OTHER PERSON TO END A QUALIFIED INDIVIDUAL'S LIFE BY LETHAL INJECTION OR  
30 SUBCUTANEOUS INFUSIONS, MERCY KILLING OR ACTIVE EUTHANASIA.

31 B. ACTIONS TAKEN IN ACCORDANCE WITH THIS ARTICLE DO NOT, FOR ANY  
32 PURPOSE, CONSTITUTE SUICIDE, ASSISTED SUICIDE, MERCY KILLING, ELDER ABUSE  
33 OR HOMICIDE AS PRESCRIBED IN TITLE 13. STATE REPORTS MAY NOT REFER TO  
34 ACTS COMMITTED UNDER THIS ARTICLE AS SUICIDE OR ASSISTED SUICIDE. STATE  
35 REPORTS MUST REFER TO ACTS COMMITTED UNDER THIS ARTICLE AS OBTAINING AND  
36 SELF-ADMINISTERING LIFE-ENDING MEDICATION.

37 C. THIS ARTICLE DOES NOT LOWER THE APPLICABLE STANDARD OF CARE FOR  
38 ATTENDING PROVIDERS, CONSULTING PROVIDERS, MENTAL HEALTH PROFESSIONALS OR  
39 OTHER HEALTH CARE PROVIDERS WHO PROVIDE SERVICES UNDER THIS ARTICLE.

40 36-3318. Health care facilities; transfer; coordination;  
41 duties

42 IF A QUALIFIED INDIVIDUAL WISHES TO TRANSFER TO A DIFFERENT HEALTH  
43 CARE FACILITY TO RECEIVE MEDICAL AID IN DYING CARE, THE NONPARTICIPATING  
44 HEALTH CARE FACILITY SHALL COORDINATE THE TRANSFER IN A TIMELY MANNER,  
45 INCLUDING THE TRANSFER OF THE QUALIFIED INDIVIDUAL'S MEDICAL RECORDS,

1 INCLUDING A NOTATION OF THE DATE THAT THE INDIVIDUAL FIRST REQUESTED  
2 MEDICAL AID IN DYING. THE NONPARTICIPATING HEALTH CARE FACILITY'S  
3 REFERRAL TO A PARTICIPATING HEALTH CARE FACILITY IS NOT PARTICIPATION IN  
4 MEDICAL AID IN DYING BUT IS DEEMED A MEDICAL STANDARD OF CARE.

5 36-3319. Immunities; prohibiting a health care provider from  
6 participation; permissible sanctions; definitions

7 A. EXCEPT AS PROVIDED IN SECTION 36-3321:

8 1. A HEALTH CARE PROVIDER OR HEALTH CARE FACILITY IS NOT SUBJECT TO  
9 CIVIL OR CRIMINAL LIABILITY OR PROFESSIONAL DISCIPLINARY ACTION, INCLUDING  
10 CENSURE, SUSPENSION, LOSS OF LICENSE, LOSS OF MEDICAL PRIVILEGES, LOSS OF  
11 MEMBERSHIP OR ANY OTHER PENALTY, FOR ENGAGING IN THE PRACTICE OF MEDICAL  
12 AID IN DYING IN ACCORDANCE WITH THE STANDARD OF CARE AND IN GOOD FAITH  
13 COMPLIANCE WITH THIS ARTICLE.

14 2. A HEALTH CARE PROVIDER, HEALTH CARE FACILITY OR PROFESSIONAL  
15 ORGANIZATION OR ASSOCIATION MAY NOT SUBJECT A HEALTH CARE PROVIDER TO  
16 CENSURE, DISCIPLINE, SUSPENSION, LOSS OF LICENSE, LOSS OF PRIVILEGES, LOSS  
17 OF MEMBERSHIP OR ANY OTHER PENALTY FOR PROVIDING MEDICAL AID IN DYING IN  
18 ACCORDANCE WITH THE STANDARD OF CARE AND IN GOOD FAITH PURSUANT TO THIS  
19 ARTICLE OR FOR PROVIDING SCIENTIFIC AND ACCURATE INFORMATION ABOUT MEDICAL  
20 AID IN DYING TO AN INDIVIDUAL WHEN DISCUSSING END-OF-LIFE CARE OPTIONS.

21 3. A HEALTH CARE PROVIDER IS NOT SUBJECT TO CIVIL OR CRIMINAL  
22 LIABILITY OR PROFESSIONAL DISCIPLINE IF, WITH THE CONSENT OF THE QUALIFIED  
23 INDIVIDUAL, THE HEALTH CARE PROVIDER IS PRESENT WHEN THE QUALIFIED  
24 INDIVIDUAL SELF-ADMINISTERS MEDICATION PRESCRIBED PURSUANT TO THIS ARTICLE  
25 OR AT THE TIME OF THE QUALIFIED INDIVIDUAL'S DEATH.

26 4. A REQUEST BY A QUALIFIED INDIVIDUAL FOR OR PROVISION BY AN  
27 ATTENDING PROVIDER OF A PRESCRIPTION FOR MEDICATION IN GOOD FAITH  
28 COMPLIANCE WITH THIS ARTICLE DOES NOT CONSTITUTE NEGLIGENCE FOR ANY PURPOSE  
29 OF LAW OR PROVIDE THE SOLE BASIS FOR THE APPOINTMENT OF A GUARDIAN OR  
30 CONSERVATOR.

31 5. A HEALTH CARE PROVIDER IS NOT UNDER ANY DUTY, WHETHER BY  
32 CONTRACT, STATUTE OR ANY OTHER LEGAL REQUIREMENT, TO PARTICIPATE IN  
33 PROVIDING A QUALIFIED INDIVIDUAL PRESCRIBED MEDICATION TO END THE  
34 QUALIFIED INDIVIDUAL'S LIFE. IF A HEALTH CARE PROVIDER IS UNABLE OR  
35 UNWILLING TO CARRY OUT A QUALIFIED INDIVIDUAL'S REQUEST UNDER THIS ARTICLE  
36 AND THE QUALIFIED INDIVIDUAL TRANSFERS THE QUALIFIED INDIVIDUAL'S CARE TO  
37 A NEW HEALTH CARE PROVIDER, THE PRIOR HEALTH CARE PROVIDER SHALL TRANSFER,  
38 ON REQUEST, A COPY OF THE QUALIFIED INDIVIDUAL'S RELEVANT MEDICAL RECORDS  
39 TO THE NEW HEALTH CARE PROVIDER.

40 6. NOTWITHSTANDING ANY OTHER PROVISION OF LAW, A HEALTH CARE  
41 PROVIDER MAY PROHIBIT ANOTHER HEALTH CARE PROVIDER FROM PARTICIPATING IN  
42 ACTIVITIES COVERED BY THIS ARTICLE ON THE PREMISES OF THE PROHIBITING  
43 PROVIDER IF THE PROHIBITING PROVIDER HAS NOTIFIED THE HEALTH CARE PROVIDER  
44 OF THE PROHIBITING PROVIDER'S POLICY REGARDING PARTICIPATING IN ACTIVITIES  
45 COVERED BY THIS ARTICLE. THIS PARAGRAPH DOES NOT PREVENT A HEALTH CARE

1 PROVIDER FROM PROVIDING A QUALIFIED INDIVIDUAL WITH HEALTH CARE SERVICES  
2 THAT DO NOT CONSTITUTE PARTICIPATION IN ACTIVITIES COVERED BY THIS  
3 ARTICLE.

4 7. NOTWITHSTANDING PARAGRAPHS 1, 2 AND 3 OF THIS SUBSECTION, A  
5 HEALTH CARE PROVIDER MAY SUBJECT ANOTHER HEALTH CARE PROVIDER TO ANY OF  
6 THE FOLLOWING SANCTIONS IF THE SANCTIONING HEALTH CARE PROVIDER HAS  
7 NOTIFIED THE SANCTIONED HEALTH CARE PROVIDER BEFORE PARTICIPATING IN  
8 ACTIVITIES COVERED BY THIS ARTICLE THAT THE ACTIONS ARE PROHIBITED:

9 (a) LOSS OF PRIVILEGES, LOSS OF MEMBERSHIP OR ANY OTHER SANCTION  
10 PROVIDED PURSUANT TO THE MEDICAL STAFF BYLAWS, POLICIES AND PROCEDURES OF  
11 THE SANCTIONING HEALTH CARE PROVIDER IF THE SANCTIONED HEALTH CARE  
12 PROVIDER IS A MEMBER OF THE SANCTIONING HEALTH CARE PROVIDER'S MEDICAL  
13 STAFF AND PARTICIPATES IN ACTIVITIES COVERED BY THIS ARTICLE WHILE ON THE  
14 HEALTH CARE FACILITY PREMISES OF THE SANCTIONING HEALTH CARE PROVIDER, BUT  
15 NOT INCLUDING THE PRIVATE MEDICAL OFFICE OF A PHYSICIAN OR OTHER PROVIDER.

16 (b) TERMINATION OF LEASE OR OTHER PROPERTY CONTRACT OR OTHER  
17 NONMONETARY REMEDIES PROVIDED BY A LEASE CONTRACT, NOT INCLUDING LOSS OR  
18 RESTRICTION OF MEDICAL STAFF PRIVILEGES OR EXCLUSION FROM A PROVIDER  
19 PANEL, IF THE SANCTIONED HEALTH CARE PROVIDER PARTICIPATES IN ACTIVITIES  
20 COVERED BY THIS ARTICLE WHILE ON THE PREMISES OF THE SANCTIONING HEALTH  
21 CARE PROVIDER OR ON PROPERTY THAT IS OWNED BY OR UNDER THE DIRECT CONTROL  
22 OF THE SANCTIONING HEALTH CARE PROVIDER.

23 (c) TERMINATION OF CONTRACT OR OTHER NONMONETARY REMEDIES PROVIDED  
24 BY CONTRACT IF THE SANCTIONED HEALTH CARE PROVIDER PARTICIPATES IN  
25 ACTIVITIES COVERED BY THIS ARTICLE WHILE ACTING IN THE COURSE AND SCOPE OF  
26 THE SANCTIONED HEALTH CARE PROVIDER'S CAPACITY AS AN EMPLOYEE OR  
27 INDEPENDENT CONTRACTOR OF THE SANCTIONING HEALTH CARE PROVIDER. THIS  
28 SUBDIVISION DOES NOT PREVENT EITHER OF THE FOLLOWING:

29 (i) A HEALTH CARE PROVIDER FROM PARTICIPATING IN ACTIVITIES COVERED  
30 BY THIS ARTICLE WHILE ACTING OUTSIDE THE COURSE AND SCOPE OF THE HEALTH  
31 CARE PROVIDER'S CAPACITY AS AN EMPLOYEE OR INDEPENDENT CONTRACTOR.

32 (ii) A QUALIFIED INDIVIDUAL FROM CONTRACTING WITH THE QUALIFIED  
33 INDIVIDUAL'S ATTENDING PROVIDER AND CONSULTING PROVIDER TO ACT OUTSIDE THE  
34 COURSE AND SCOPE OF THE HEALTH CARE PROVIDER'S CAPACITY AS AN EMPLOYEE OR  
35 INDEPENDENT CONTRACTOR OF THE SANCTIONING HEALTH CARE PROVIDER.

36 8. A HEALTH CARE PROVIDER THAT IMPOSES SANCTIONS PURSUANT TO  
37 PARAGRAPH 7 OF THIS SUBSECTION MUST FOLLOW ALL DUE PROCESS AND OTHER  
38 PROCEDURES THE SANCTIONING HEALTH CARE PROVIDER MAY HAVE THAT ARE RELATED  
39 TO IMPOSING SANCTIONS ON ANOTHER HEALTH CARE PROVIDER.

40 9. ACTION TAKEN PURSUANT TO SECTION 36-3303, 36-3304, 36-3305 OR  
41 36-3306 MAY NOT BE THE SOLE BASIS FOR A REPORT OF UNPROFESSIONAL CONDUCT  
42 UNDER TITLE 32, CHAPTER 13, 15, 17 OR 25.

43 B. FOR THE PURPOSES OF THIS SECTION:

44 1. "NOTIFY" MEANS THAT A SANCTIONING HEALTH CARE PROVIDER  
45 SPECIFICALLY INFORMS A HEALTH CARE PROVIDER IN A SEPARATE STATEMENT IN

1 WRITING OF THE SANCTIONING HEALTH CARE PROVIDER'S POLICY ABOUT  
2 PARTICIPATING IN ACTIVITIES COVERED BY THIS ARTICLE.

3 2. "PARTICIPATE IN ACTIVITIES COVERED BY THIS ARTICLE":

4 (a) MEANS ANY OF THE FOLLOWING:

5 (i) TO PERFORM THE DUTIES OF AN ATTENDING PROVIDER PURSUANT TO  
6 SECTION 36-3304 OR A CONSULTING PROVIDER PURSUANT TO SECTION 36-3305 OR  
7 THE COUNSELING FUNCTION PURSUANT TO SECTION 36-3306.

8 (ii) TO PERFORM THE DUTIES OF A STATE-LICENSED PSYCHIATRIST OR  
9 STATE-LICENSED PSYCHOLOGIST IF A REFERRAL TO ONE IS MADE.

10 (iii) TO DELIVER THE PRESCRIPTION FOR MEDICATION, TO DISPENSE THE  
11 PRESCRIBED MEDICATION OR TO DELIVER THE DISPENSED MEDICATION PURSUANT TO  
12 THIS ARTICLE.

13 (iv) TO BE PRESENT WHEN THE QUALIFIED INDIVIDUAL TAKES THE  
14 MEDICATION PRESCRIBED PURSUANT TO THIS ARTICLE.

15 (b) DOES NOT INCLUDE MAKING AN INITIAL DETERMINATION THAT AN  
16 INDIVIDUAL HAS A TERMINAL DISEASE AND INFORMING THE INDIVIDUAL OF THE  
17 MEDICAL PROGNOSIS, PROVIDING INFORMATION ABOUT THIS ARTICLE TO AN  
18 INDIVIDUAL ON THE INDIVIDUAL'S REQUEST OR PROVIDING AN INDIVIDUAL, ON THE  
19 INDIVIDUAL'S REQUEST, WITH A REFERRAL TO ANOTHER PROVIDER FOR THE PURPOSE  
20 OF ASSESSING MEDICAL AID IN DYING OR AN INDIVIDUAL CONTRACTING WITH THE  
21 INDIVIDUAL'S ATTENDING PROVIDER AND CONSULTING PROVIDER TO ACT OUTSIDE OF  
22 THE COURSE AND SCOPE OF THE HEALTH CARE PROVIDER'S CAPACITY AS AN EMPLOYEE  
23 OR INDEPENDENT CONTRACTOR OF THE SANCTIONING HEALTH CARE PROVIDER.

24 36-3320. Death certificates

25 A. UNLESS OTHERWISE PROHIBITED BY LAW, THE ATTENDING PROVIDER OR  
26 THE DIRECTOR OF THE HEALTH CARE FACILITY WHERE A QUALIFIED INDIVIDUAL  
27 TERMINATED THE QUALIFIED INDIVIDUAL'S LIFE PURSUANT TO THIS ARTICLE SHALL  
28 SIGN THE DEATH CERTIFICATE OF A QUALIFIED INDIVIDUAL WHO OBTAINED AND  
29 SELF-ADMINISTERED A PRESCRIPTION FOR MEDICATION PURSUANT TO THIS ARTICLE.

30 B. WHEN A DEATH HAS OCCURRED IN ACCORDANCE WITH THIS ARTICLE, THE  
31 CAUSE OF DEATH MUST BE LISTED AS THE UNDERLYING TERMINAL ILLNESS. A  
32 QUALIFIED INDIVIDUAL'S ACT OF SELF-ADMINISTERING MEDICATION PRESCRIBED  
33 PURSUANT TO THIS ARTICLE MAY NOT BE INCLUDED ON THE DEATH CERTIFICATE.

34 36-3321. Violations; classification; liability

35 A. A PERSON IS GUILTY OF A CLASS 2 FELONY WHO, WITHOUT THE  
36 QUALIFIED INDIVIDUAL'S AUTHORIZATION, WILFULLY ALTERS OR FORGES A REQUEST  
37 FOR A PRESCRIPTION FOR MEDICATION OR CONCEALS OR DESTROYS A RESCISSION OF  
38 THAT REQUEST WITH THE INTENT OR EFFECT OF CAUSING THE QUALIFIED  
39 INDIVIDUAL'S DEATH.

40 B. A PERSON IS GUILTY OF A CLASS 2 FELONY WHO COERCES OR EXERTS  
41 UNDUE INFLUENCE ON A QUALIFIED INDIVIDUAL WITH A TERMINAL ILLNESS TO  
42 REQUEST A PRESCRIPTION FOR MEDICATION PURSUANT TO THIS ARTICLE WITH THE  
43 INTENT OR EFFECT OF CAUSING THE QUALIFIED INDIVIDUAL'S DEATH.

44 C. A PERSON IS GUILTY OF A CLASS 2 FELONY WHO, WITHOUT  
45 AUTHORIZATION OF THE QUALIFIED INDIVIDUAL, WILFULLY ALTERS, FORGES,

1 CONCEALS OR DESTROYS AN INSTRUMENT, THE REINSTATEMENT OR REVOCATION OF AN  
2 INSTRUMENT OR ANY OTHER EVIDENCE OR DOCUMENT REFLECTING THE QUALIFIED  
3 INDIVIDUAL'S DESIRES AND INTERESTS, WITH THE INTENT AND EFFECT OF CAUSING  
4 A WITHHOLDING OR WITHDRAWAL OF LIFE-SUSTAINING PROCEDURES OR ARTIFICIALLY  
5 ADMINISTERED NUTRITION AND HYDRATION THAT HASTENS THE DEATH OF THE  
6 QUALIFIED INDIVIDUAL.

7 D. EXCEPT AS PROVIDED IN SUBSECTION C OF THIS SECTION, A PERSON IS  
8 GUILTY OF A CLASS 1 MISDEMEANOR WHO, WITHOUT AUTHORIZATION OF THE  
9 QUALIFIED INDIVIDUAL, WILFULLY ALTERS, FORGES OR DESTROYS AN INSTRUMENT,  
10 OR ANY OTHER EVIDENCE OR DOCUMENT REFLECTING THE QUALIFIED INDIVIDUAL'S  
11 DESIRES AND INTERESTS WITH THE INTENT OR EFFECT OF AFFECTING A HEALTH CARE  
12 DECISION OF THE QUALIFIED INDIVIDUAL.

13 E. THIS ARTICLE DOES NOT LIMIT FURTHER LIABILITY FOR CIVIL DAMAGES  
14 RESULTING FROM OTHER NEGLIGENT CONDUCT OR INTENTIONAL MISCONDUCT BY ANY  
15 PERSON.

16 F. THE PENALTIES IN THIS ARTICLE DO NOT PRECLUDE CRIMINAL PENALTIES  
17 APPLICABLE UNDER OTHER LAW FOR CONDUCT THAT IS INCONSISTENT WITH THIS  
18 ARTICLE.

19 36-3322. Claims by governmental entity; costs

20 A GOVERNMENTAL ENTITY THAT INCURS COSTS RESULTING FROM A QUALIFIED  
21 INDIVIDUAL TERMINATING THE QUALIFIED INDIVIDUAL'S LIFE PURSUANT TO THIS  
22 ARTICLE IN A PUBLIC PLACE HAS A CLAIM AGAINST THE ESTATE OF THE QUALIFIED  
23 INDIVIDUAL TO RECOVER THE COSTS AND REASONABLE ATTORNEY FEES RELATED TO  
24 ENFORCING THE CLAIM.

25 36-3323. Prescription for medication; form of request

26 A REQUEST FOR MEDICATION AS AUTHORIZED BY THIS ARTICLE SHALL BE IN  
27 SUBSTANTIALLY THE FOLLOWING FORM:

28 REQUEST FOR MEDICATION TO END MY LIFE  
29 IN A HUMANE AND DIGNIFIED MANNER

30 I, (NAME OF INDIVIDUAL), AM AN ADULT OF SOUND MIND.

31 I AM SUFFERING FROM (DESCRIPTION OF ILLNESS), WHICH MY  
32 ATTENDING PROVIDER HAS DETERMINED IS A TERMINAL ILLNESS.

33 I HAVE BEEN FULLY INFORMED OF MY DIAGNOSIS, MY  
34 PROGNOSIS, THE POTENTIAL RISKS ASSOCIATED WITH TAKING THE  
35 MEDICATION TO BE PRESCRIBED AND THE PROBABLE RESULT OF TAKING  
36 THE MEDICATION. I HAVE BEEN INFORMED OF THE FEASIBLE  
37 ALTERNATIVES AND CONCURRENT OR ADDITIONAL TREATMENT  
38 OPPORTUNITIES, INCLUDING COMFORT CARE, PALLIATIVE CARE,  
39 HOSPICE CARE, PAIN CONTROL AND DISEASE-DIRECTED TREATMENT  
40 OPTIONS, AS WELL AS THE RISKS AND BENEFITS OF EACH  
41 ALTERNATIVE.

42 I REQUEST THAT MY ATTENDING PROVIDER PRESCRIBE  
43 MEDICATION THAT WILL END MY LIFE IN A HUMANE AND DIGNIFIED  
44 MANNER, SHOULD I CHOOSE TO SELF-ADMINISTER IT.

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29  
30  
31  
32  
33  
34  
35  
36  
37  
38  
39  
40  
41  
42  
43  
44  
45

I UNDERSTAND THE FULL IMPORT OF THIS REQUEST AND I EXPECT TO DIE WHEN I TAKE THE MEDICATION TO BE PRESCRIBED. I FURTHER UNDERSTAND THAT ALTHOUGH MOST DEATHS OCCUR WITHIN THREE HOURS, MY DEATH MAY TAKE LONGER AND MY ATTENDING PROVIDER HAS COUNSELED ME ABOUT THIS POSSIBILITY.

I MAKE THIS REQUEST VOLUNTARILY AND WITHOUT RESERVATION.  
QUALIFIED INDIVIDUAL'S SIGNATURE: \_\_\_\_\_  
DATED: \_\_\_\_\_

DECLARATION OF WITNESSES

WE DECLARE THAT THE PERSON SIGNING THIS REQUEST:

1. IS PERSONALLY KNOWN TO US OR HAS PROVIDED PROOF OF IDENTITY.
2. SIGNED THIS REQUEST IN OUR PRESENCE.
3. APPEARS TO BE OF SOUND MIND AND TO NOT BE UNDER DURESS, FRAUD OR UNDUE INFLUENCE.
4. IS NOT A PATIENT FOR WHOM EITHER OF US IS THE ATTENDING PROVIDER.

WITNESS 1 SIGNATURE: \_\_\_\_\_ DATED: \_\_\_\_\_

WITNESS 2 SIGNATURE: \_\_\_\_\_ DATED: \_\_\_\_\_

NOTE: ONE WITNESS CANNOT BE AN INTERPRETER OR A RELATIVE (BY BLOOD, MARRIAGE, REGISTERED DOMESTIC PARTNERSHIP OR ADOPTION) OF THE QUALIFIED INDIVIDUAL SIGNING THIS REQUEST AND CANNOT BE ENTITLED TO ANY PORTION OF THE QUALIFIED INDIVIDUAL'S ESTATE ON DEATH. ONE WITNESS CANNOT OWN, OPERATE OR BE EMPLOYED AT A HEALTH CARE FACILITY WHERE THE QUALIFIED INDIVIDUAL IS RECEIVING MEDICAL TREATMENT OR RESIDES. THE QUALIFIED INDIVIDUAL'S ATTENDING PROVIDER, CONSULTING PROVIDER, MENTAL HEALTH PROFESSIONAL AND INTERPRETER CANNOT BE A WITNESS.

36-3324. Form of interpreter attachment

THE FORM OF AN ATTACHMENT FOR THE PURPOSES OF PROVIDING INTERPRETER SERVICES MUST BE IN SUBSTANTIALLY THE FOLLOWING FORM:

I, (NAME OF INTERPRETER), AM FLUENT IN ENGLISH AND (LANGUAGE OF QUALIFIED INDIVIDUAL). ON (DATE) AT APPROXIMATELY (TIME), I READ THE "REQUEST FOR MEDICATION TO END MY LIFE IN A HUMANE AND DIGNIFIED MANNER" TO (NAME OF QUALIFIED INDIVIDUAL) IN (LANGUAGE OF QUALIFIED INDIVIDUAL) WHO AFFIRMED TO ME THAT HE/SHE UNDERSTANDS THE CONTENT OF THIS FORM, THAT HE/SHE DESIRES TO SIGN THIS FORM UNDER HIS/HER OWN POWER AND VOLITION AND THAT HE/SHE REQUESTED TO SIGN THIS FORM AFTER CONSULTING WITH AN ATTENDING PROVIDER AND A CONSULTING PROVIDER.

UNDER PENALTY OF PERJURY, I DECLARE THAT I AM FLUENT IN ENGLISH AND (LANGUAGE OF QUALIFIED INDIVIDUAL) AND THAT THE CONTENTS OF THIS FORM, TO THE BEST OF MY KNOWLEDGE, ARE TRUE AND CORRECT.

1 EXECUTED AT (NAME OF CITY, COUNTY AND STATE) ON (DATE)  
2 INTERPRETER'S SIGNATURE: \_\_\_\_\_  
3 INTERPRETER'S PRINTED NAME: \_\_\_\_\_  
4 INTERPRETER'S ADDRESS: \_\_\_\_\_

5 Sec. 2. Severability  
6 If a provision of this act or its application to any person or  
7 circumstance is held invalid, the invalidity does not affect other  
8 provisions or applications of the act that can be given effect without the  
9 invalid provision or application, and to this end the provisions of this  
10 act are severable.