

Extending Storage Application Form

IMPORTANT INFORMATION

Applications received after the storage date has expired cannot be considered.

Please submit your application for extended storage at least **3 months before** the expiry date. If you are unsure of the expiry date, contact your fertility clinic.

The storage of embryos and gametes (eggs and sperm, including cryopreserved ovarian and testicular tissue) is limited to 10 years initially. If you would like to store material for longer, you need to apply to the Ethics Committee on Assisted Reproductive Technology (ECART) for approval using this application form.

Information on applying

All applications must be received and considered by the ECART before the storage expiry date – there are no exceptions to this. If an extension is not sought by the expiry date, then your fertility services provider is obligated to discard any stored embryos or gametes (sperm, eggs, ovarian tissue, and testicular tissue).

You can apply for more than one extension to the original 10-year storage limit.

An application to extend the storage period of gametes or embryos can be made by an individual or a fertility clinic interested in extending storage for the purposes of a fertility treatment or preservation.

ECART meets every two months to consider applications. When considering applications, ECART may give an approval subject to any conditions it considers fit to impose.

The Human Assisted Reproductive Technology Act 2004 (HART Act) sets out the various conditions for the storage of embryos and gametes.

For more information about The HART Act or ECART, including meeting dates, please see the <u>ECART website</u> or contact the ECART secretariat at <u>ecart@health.govt.nz</u>.

To apply Please email your completed application and supporting documents to the ECART secretariat at ecart@health.govt.nz

Checklist for applying for extended storage

	All sections of the application form are completed
	Application form signed by applicant(s)
	Evidence from a fertility clinic of the storage period(s) given in this application
	Proof of identity for applicant and partner (i.e. copy of a New Zealand driver licence, passport, birth certificate or nationality card)
	Evidence of consent from partner or donor (the gamete providers)

General information

Note

Where an application is made by an individual, verification of storage dates and donor consent (if applicable) from a fertility clinic will be needed.

Applicant information

1. Who is applying to extend the storage of gametes (sperm or eggs) or embryos? If a fertility clinic is applying on behalf of a client, please provide the client's details.					
	Name of applicant:				
	Date of birth:				
	Name of partner (if couple applying):				
	Partner's date of birth:				
	Postal address:				
	Day phone contact:				
	Email address:				
Fe	rtility clinic information				
2.	Which fertility clinic are the gameter	s or embryos stored at?			
Application information					
Αŗ	plication information				
Ap	plication information				
A p 3.	What are you applying to extend	Sperm (please complete section S1)			
		Sperm (please complete section S1) Eggs (please complete section E1)			
	What are you applying to extend the storage of?				
	What are you applying to extend the storage of?	Eggs (please complete section E1)			
	What are you applying to extend the storage of?	Eggs (please complete section E1) Embryos (please complete section EM1)			
3.	What are you applying to extend the storage of?	Eggs (please complete section E1) Embryos (please complete section EM1) Cryopreserved testicular tissue (please complete question S1)			
3.	What are you applying to extend the storage of? Please select all that apply.	Eggs (please complete section E1) Embryos (please complete section EM1) Cryopreserved testicular tissue (please complete question S1) Cryopreserved ovarian tissue (please complete section E1)			
3.	What are you applying to extend the storage of? Please select all that apply. pporting documents se submit the following with your ap	Eggs (please complete section E1) Embryos (please complete section EM1) Cryopreserved testicular tissue (please complete question S1) Cryopreserved ovarian tissue (please complete section E1) Dlication: storage period(s) given in this application (i.e. a copy of the clinic letter			
3.	What are you applying to extend the storage of? Please select all that apply. pporting documents se submit the following with your apply advising you of the need to apply for	Eggs (please complete section E1) Embryos (please complete section EM1) Cryopreserved testicular tissue (please complete question S1) Cryopreserved ovarian tissue (please complete section E1) clication: storage period(s) given in this application (i.e. a copy of the clinic letter extension) rtner (if applying together) (i.e. copy of a New Zealand driver licence,			

Storage history

When considering an application to extend the storage period of gametes (sperm and eggs) or embryos, ECART must determine the following matters about the storage history of the gametes or embryos:

- the length of time that gametes have already been stored, specifically; any time stored both in New Zealand and overseas
- the length of time that embryos have already been stored, specifically; time stored both in New Zealand and overseas, including any time during which gametes used to create embryos have already been stored
- the expiry date of the existing storage period.

Calculating your storage date

- Storage time outside New Zealand is to be counted when calculating the storage period.
- The storage period for embryos must include any storage time for the eggs and sperm used to create the
- If you had a PESA or TESA where the surgical retrieval was followed by storage, with embryos created some time later, then the storage time for the sperm must be counted as part of the storage period.

Important Please do not give estimates of storage dates. ECART requires that the application includes evidence of storage dates from the clinic storing the gametes or embryos.

Extension to storage of sperm / testicular tissue

Please complete this section if you are applying to extend the storage period of sperm or testicular tissue.

S1 .	When was the sperm or testicular tissue first stored (whether or not they were stored in New Zealand or overseas)? If you don't know, please contact the fertility clinic that stored the sperm or testicular tissue.		DD/MM/YYYY
S2.	When does the storage period expire? To work out the expiry date, add ten years to the date of first storage. If this date is before 22/11/2012 then state your expiry date as 22/11/2022.	5	DD/MM/YYYY
S3.	Who is the provider of the sperm or testicular tissue?		Myself
	If a donor is the provider of the sperm or testicular tissue, please complete the Informed Consent section (question 4).		My partner
			A donor unknown to me
			A donor known to me
			Other, please specify:

Extension to storage of eggs / ovarian tissue

Please complete this section if you are applying to extend the storage period of eggs or ovarian tissue.

E1.	When were the eggs or ovarian tissue first stored (whether not they were stored in New Zealand or overseas)? If you don't know please contact the clinic that stored the eggs or ovariant.		DD/MM/YYYY
E2.	When does the storage period expire? To work out the expiry date, add ten years to the date of first storage. If the date is before 22/11/2012 then state your expiry date as 22/11/2022.	his	DD/MM/YYYY
E3.	Who is the provider of the eggs or ovarian tissue? If a donor is the provider of the eggs or ovarian tissue, please complete the Informed Consent section (question 4).		Myself My partner A donor unknown to me A donor known to me Other, please specify:

Extension to storage of embryos

Please complete this section if you are applying to extend the storage period of your embryos.

EM1.	Who provided the sperm and eggs?				
	Sperm:	Eggs:			
	Myself	Mys	self		
	My male partner	Му	female partı	ner	
	A sperm donor unknown to me	An	egg donor u	nknown to n	ne
	A sperm donor known to me	An	egg donor k	nown to me	
	Other, please specify:	Oth	er, please s	pecify:	
EM2.	How many embryos are stored?				
					_
EM3.	When were the embryos first stored?				
		DD	/MM/YYYY		
EM4.	When does the storage period expire? To work out the expiry date, add ten years to the data of this date is before 22/11/2012 then state your expired 22/11/2022. Please note the storage period for embryos starts frow had a surgical sperm retrieval (PESA or TESA) follow then this storage time must be counted as part of the	y date as om the date ved by store	DI the sperm or t age or used fro	ozen eggs or s	first frozen. For example: if you perm (or donor eggs or sperm),
	and the disrage time must be scanted as pair of the	omery co	o your olorag	o ponou.	
EM5.	Have the embryos been stored elsewhere	at any ti	me?	Yes	No
	If yes, which clinic and for what period?		Cli	inic:	
			Fr	om:	To:
EM6.	Were the eggs stored before the embryos created?	were		Yes	No
	If yes, which clinic and for what period?		Cli	inic:	
			Fre	om:	To:
EM7.	Were the sperm stored before the embryo created?	os were		Yes	No
	If yes, which clinic and for what period?			om:	To:

Informed consent

When considering an application to extend the storage period of gametes or embryos beyond the initial 10-year storage limit or beyond an approved extended storage period, ECART must take the following matters into account:

- whether all gamete providers have given informed consent, including where an embryo has been created from the gametes
- · where an application does not include a gamete providers' informed consent to extending storage:
 - whether there is evidence that all reasonable efforts have been made to contact the gamete provider, and
 - whether the consequences would be unduly harsh for interested parties if ECART declined the application on the grounds that informed consent by all gamete providers was not available,
 - whether there is a written record or other evidence that he or she gave informed consent to extending the storage period of the gametes or embryos created from his or her gametes,
 - whether a fresh consent is needed in cases where a lengthy period has elapsed since the consent was given.

Consent of gamete provider

where the gamete provider is a donor, a letter from the fertility clinic

with the donor's consent is included with this application.

Please complete this section if you are extending the storage of gametes (eggs or sperm) that are not yours or you are extending the storage of embryos.

	Note	bryos, consent from both parties who embryos is required, with the exception of or.	
4.	extending st the extensio	oviders of the gametes given consent to orage for the reasons expressed, and for n period sought, in this application? e gamete provider(s) have signed the application or	Yes No (please continue to question 5 below)

Consent not obtained

Please complete this section if your application does not include the consent of the gamete provider(s) of the sperm, eggs or embryos.

5.	What is the reason the application does not include the consent of a gamete (sperm or eggs) provider?				
	Please select one of the tick boxes below and provide a reason				
	The gamete provider(s) died after storage of his or her sperm, eggs, or embryos When did they die and what was the cause? Please provide a copy of the death certificate with your application.				
	OR; The gamete provider(s) refused to give consent What was the reason provided for refusing consent? Please go to question 5B after providing the reason. OR; The gamete provider(s) could not be located What efforts were made to locate them? OR; Other, please describe:				
5A.	What evidence is there that the gamete provider(s) gave informed consent to extend storage?				
	Examples include written consent (e.g. a will, fertility clinic consent form) or verbal consent. Please provide copies of any supporting documents with your application.				
5B.	Why is it important to extend without the gamete provider(s) consent and what would be the impact if your application was declined on the grounds that informed consent by the gamete provider(s) was not available?				

Extended storage period and reason

When considering an application to extend the storage period of gametes or embryos, ECART will take into account:

- any previous periods of extended storage and the total time elapsed since the gametes or embryos were stored
- any intergenerational effects on children where extending storage is for the purposes of fertility treatment or fertility preservation. For example;
 - the potential for siblings to be born one or more generations apart
 - the possibility that genetic parents may no longer be alive following the birth of a child born from the stored gametes or embryos
 - the potential loss of access to family history
 - the potential loss of access to whakapapa.
- whether extending the storage period is consistent with one of the purposes of the HART Act (section 3) which is
 'to secure the benefits of assisted reproductive procedures, established procedures, and human reproductive
 research for individuals and society in general by taking appropriate measures for the protection and promotion of
 the health, safety, dignity, and rights of all individuals, but particularly those of women and children, in the use of
 these procedures and research'. For example;
 - where gametes or embryos were originally stored because of family medical history (e.g., a family medical history of early menopause)
 - where gametes or embryos were originally stored before medical treatment that may impair an individual's fertility
 - where gametes or embryos have been stored to provide a future opportunity to have a child
 - human reproductive research with gametes or non-viable embryos.

Exte	nsion requested	
	ow long do you want to extend the storage period?	
th	lease explain the reasons why you want to extend ne storage period of the gametes or embryos and that you plan to use them for.	
	lease make clear whether you have any children already and how ld they are.	
Fo	or example, 'My wife and I would like to extend the storage period four embryos to provide an opportunity to have another child. We ave two children, a 10-year-old boy and an 8-year-old girl'.	

Declaration

By signing this form:

- I / we declare that the information provided in this application form is true and correct.
- I agree that any decision made by ECART in relation to this application **must** be made available to a fertility clinic or laboratory that is storing or has been asked to store the gametes or embryos that are the subject of this application.
- Inote that if ECART approves this application, such approval does not require a fertility clinic or laboratory to store the gametes or embryos. Services provided by fertility clinics (including storage of gametes and embryos) are to be agreed between a fertility clinic and relevant parties.
- I / we agree to provide any additional information requested by ECART or the ECART Secretariat to support this
 application.
- I / we consent to ECART contacting the fertility clinic or any other provider or person to check the accuracy of any information on this form.

To sign this form:

- Please use the 'Fill and Sign' function in the toolbar.
- Mobile phone users, please tap and hold in the signature box to draw your signature.

Applicant's signature:		Date:	DD/MM/YYYY
Partner's signature:		Date:	DD/MM/YYYY
Partner consent to the application for exte Obtained' (question 5) has been complete	ended storage of embryos. If consent has not ed.	ı t been obtained, pı	lease ensure 'Consent not