ECART considers applications for embryo donation for reproductive purposes using [guidelines](http://www.ecart.health.govt.nz/moh.nsf/indexcm/ecart-resources-guidelines-embryodonation) issued by [ACART](http://www.acart.health.govt.nz/) under the [HART Act](http://www.legislation.govt.nz/act/public/2004/0092/latest/DLM319241.html).

Section 1: Application Summary

Who is the person responsible for this procedure under section 18(1)(d) of the HART Act?

|  |  |  |
| --- | --- | --- |
|  | Name/role: |  |
|  | Clinic: |  |
|  | Address: |  |
|  | Email/phone number: |  |

Please provide the following details for the donors and recipient(s):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | Donor  woman (DW) | Donor  man (DM) | Recipient woman (RW) | Recipient partner (RP) |
|  | Age: |  |  |  |  |
|  | Nationality: |  |  |  |  |
|  | Country of residence: |  |  |  |  |
|  | Ethnicity: |  |  |  |  |
|  | Iwi (if Māori): |  |  |  |  |
|  | Number of children: |  |  |  |  |
|  | Age of children: |  |  |  |  |

Existing embryos:

|  |  |  |
| --- | --- | --- |
|  | How many embryos do DW/DM have to donate? |  |
|  | Describe why the embryo donors required IVF to create these embryos: | |
|  |  | |
|  | Have DW/DM set any restrictions on the use of these embryos? | Yes/No |
|  | If yes, describe the conditions? | |
|  |  | |
|  | Describe what will happen to any non-viable embryos: | |
|  |  | |

All persons exercising powers or performing functions under the HART Act must be guided by each of the following principles that are relevant to the particular power or function. Please confirm that these principles will be respected during the conduct of this ARP.

|  |  |  |
| --- | --- | --- |
|  | the health and wellbeing of children born as a result of the performance of an ARP […] should be an important consideration in all decisions about that procedure: | Yes/No |
| b) | the human health, safety, and dignity of present and future generations should be preserved and promoted: |
| c) | while all persons are affected by ARPs […] women, more than men, are directly and significantly affected by their application, and the health and wellbeing of women must be protected in the use of these procedures: |
| d) | no ARP should be performed on an individual […] unless the individual has made an informed choice and given informed consent: |
| e) | donor offspring should be made aware of their genetic origins and be able to access information about those origins: |
| f) | the needs, values, and beliefs of Māori should be considered and treated with respect: |
| g) | the different ethical, spiritual, and cultural perspectives in society should be considered and treated with respect: |
|  | If any of the HART Act principles cannot be respected please explain why: | |
|  |  | |

ACART’s [guidelines](http://www.ecart.health.govt.nz/moh.nsf/indexcm/ecart-resources-guidelines-embryodonation) require ECART to determine or take into account the following matters. Please indicate whether you are satisfied that these matters have been addressed, and provide brief comment.

Medical information

|  |  |  |
| --- | --- | --- |
|  | Does the recipient or the recipient’s partner/spouse have either a medical condition affecting his or her reproductive ability; or a medical diagnosis of unexplained infertility that makes embryo donation appropriate? | Yes/No |
|  | Describe RW or RP’s medical condition or explain why embryo donation is appropriate: | |
|  |  | |

Counselling information

|  |  |  |
| --- | --- | --- |
|  | Have the donors completed their family? | Yes/No |
|  | Has counselling been received in accordance with the NZ Fertility Services Standard? |
|  | Has counselling included implications counselling and joint counselling for all parties? |
|  | Has counselling been culturally appropriate? |
|  | Has counselling provided for whānau/extended family involvement? |
|  | Has counselling provided for the inclusion of any children of the parties? |
|  | Is counselling available to all parties throughout the treatment process? |
|  | Does the residency of the parties safeguard the wellbeing of all parties especially any resulting child? |
|  | Have the donors been subjected to coercion or pressure? | Yes/No |
|  | Has there been discussion, understanding and agreement between the parties on matters relating to the use and storage of embryos and disposal of any unused embryos? | Yes/No |
|  | Have all parties considered and discussed the implications of the following, and in the professional opinion of the counsellors, have understood:   * the rights and needs of any resulting child, including their rights to access information about their genetic origin and contact with the donors? * each other’s needs, wishes, expectations, and plans regarding ongoing contact and information sharing? * any specific issues that may affect the health and wellbeing of any of the parties, and especially any resulting child? * each other’s attitudes to openness about the donation, especially with any resulting child? * the implications of any resulting child being born with disabilities or genetic disorders? * the implications of possible termination of the pregnancy by the recipient(s)? * issues relating to storage, use and disposal of embryos? * the requirements regarding information sharing under the Human Assisted Reproductive Technology Act 2004? * that embryos may not be able to be refrozen if donors decide to withdraw from the donation after embryos have been thawed? * the reasons for wishing to donate or receive embryos? * the implications of the donors feelings now, and feelings they may experience in the future, concerning the donation of embryos? * the impact of the donors donating their embryos on any existing children? |
|  | Does each party understand that donors have the right to vary the agreed terms of  donation or withdraw from the donation until the embryos have been placed in the uterus  of the recipient woman? |
|  | If “no” to any of the counselling questions (other than 1.26) please explain why: | |
|  |  | |

Legal information

|  |  |  |
| --- | --- | --- |
|  | Has each party received independent legal advice? | Yes/No |
|  | Do the legal reports indicate that the parties clearly understand the legal issues associated with embryo donation? |
|  | Comments: | |
|  |  | |

Other information

|  |  |  |
| --- | --- | --- |
|  | Do profile(s) provided by the recipient(s) for the donor(s) include police vetting information? | Yes/No |
|  | Has there been, or will there be written consent to the embryo donation from both donors? | Yes/No |
|  | Will this embryo donation produce full genetic siblings in more than two families? | Yes/No |
|  | Are the embryos being donated existing embryos created as part of the donors’ own IVF treatment? | Yes/No |
|  | Are the embryos being donated created from the donors’ own gametes? | Yes/No |
|  | Are the embryos being donated surplus to the donors’ own reproductive needs? | Yes/No |
|  | Are all parties aware of the storage conditions in section 10 of the HART Act? | Yes/No |
|  | Comments: | |
|  |  | |

Mandatory reports

Have you enclosed all the mandatory reports required for ethical review of this procedure? Please tick all the mandatory reports that you have enclosed with this application:

|  |  |
| --- | --- |
|  | Section 2: Report by medical specialist for the embryo donors |
|  | Section 3: Report by medical specialist for the recipient(s) |
|  | Section 4: Report by counsellor for the embryo donors |
|  | Section 5: Report by counsellor for the recipient(s) |
|  | Section 6: Joint counselling report |
|  | Section 7: Report by the legal advisor for the embryo donors |
|  | Section 8: Report by the legal advisor for the recipient(s) |

Optional reports

Have you enclosed any additional reports for this application? Please tick all the optional reports that you have enclosed with this application:

|  |  |
| --- | --- |
|  | Letter for embryo donor and/or donor partner from another medical specialist |
|  | Letter for recipient woman and/or recipient partner from another medical specialist |
|  | Letter from embryo donors |
|  | Letter from recipient woman |
|  | Letter from recipient partner |
|  | Letter from another person (eg Whānau member, kaumatua, Māori counsellor) |
|  | Other (please specify below) |
|  |  |

|  |  |
| --- | --- |
| Signature of the person responsible: |  |
| Date: |  |

ECART considers applications for embryo donation for reproductive purposes using [guidelines](http://www.ecart.health.govt.nz/moh.nsf/indexcm/ecart-resources-guidelines-embryodonation) issued by [ACART](http://www.acart.health.govt.nz/) under the [HART Act](http://www.legislation.govt.nz/act/public/2004/0092/latest/DLM319241.html).

Section 2: Report by medical specialist for the embryo donors

Who is the medical specialist for the embryo donors?

|  |  |  |
| --- | --- | --- |
|  | Name of medical specialist: |  |
|  | Email/phone number: |  |
|  | Date(s) of meeting(s): |  |
|  | Meeting attendees: |  |

Guideline 2(a)(iii) requires ECART to determine that the embryos being donated are part of the donors’ own IVF treatment, created from the donors’ own gametes, and surplus to the donors’ own reproductive needs

|  |  |  |
| --- | --- | --- |
|  | Are the embryos being donated existing embryos created as part of the donors’ own IVF treatment? | Yes/No |
|  | Are the embryos being donated created from the donors’ own gametes? | Yes/No |
|  | Are the embryos being donated surplus to the donors’ own reproductive needs? | Yes/No |
|  | Comments | |
|  |  | |

Guideline 2(b) requires ECART to take into account all relevant factors, including, but not limited to the factors listed above.

|  |  |  |
| --- | --- | --- |
|  | Will there be any medical risks to DW/DM as a direct result of this procedure? | Yes/No |
|  | If yes, describe the risks to DW/DM and how they may be minimised/managed: | |
|  |  | |
|  | Are there any other relevant medical factors ECART needs to be aware of with for this ARP? An example of a relevant medical factor may include, but is not limited to, whether either donor is likely to carry a significant genetic disease, and details of that disease | Yes/No |
|  | Describe any other relevant medical factors for DW/DM and how they may be minimised/managed: | |
|  |  | |

|  |  |
| --- | --- |
| Signature of DW/DM’s medical specialist: |  |
| Date: |  |

ECART considers applications for embryo donation for reproductive purposes using [guidelines](http://www.ecart.health.govt.nz/moh.nsf/indexcm/ecart-resources-guidelines-embryodonation) issued by [ACART](http://www.acart.health.govt.nz/) under the [HART Act](http://www.legislation.govt.nz/act/public/2004/0092/latest/DLM319241.html).

Section 3: Report by medical specialist for the recipient(s)

Who is the medical specialist for the recipient(s)?

|  |  |  |
| --- | --- | --- |
|  | Name of medical specialist: |  |
|  | Email/phone number: |  |
|  | Date(s) of meeting(s): |  |
|  | Meeting attendee(s): |  |

Guideline 2(a)(iii) requires ECART to determine that the recipient or recipient’s partner/spouse has a medical condition affecting his or her reproductive ability, or a medical diagnosis of unexplained infertility, that makes embryo donation appropriate.

|  |  |  |
| --- | --- | --- |
|  | Does RW or RP have a medical condition affecting her or his reproductive ability? | Yes/No |
|  | If yes, describe RW or RP’s medical condition: | |
|  |  | |
|  | Do RW and RP have a medical diagnosis of unexplained infertility that makes embryo donation appropriate? | Yes/No |
|  | If yes, describe the other infertility treatments RW/RP have tried, and explain why embryo donation is appropriate: | |
|  |  | |

Guideline 2(b) requires ECART to take into account all relevant factors, including, but not limited to the factors listed above.

|  |  |  |
| --- | --- | --- |
|  | Will there be any medical risks to RW as a direct result of this ARP? | Yes/No |
|  | If yes, describe the medical risks to RW and how they may be minimised/managed? | |
|  |  | |
|  | How many embryos do you intend to transfer to RW in any one cycle? | Yes/No |
|  | Are there any other relevant medical factors ECART needs to be aware of with for this ARP? Examples of relevant medical factors may include, but are not limited to, a current or past heart condition, cancer, diabetes, pre-eclampsia, a high or low BMI? | Yes/No |
|  | Describe any other relevant medical factors for RW/RP and how they may be minimised/managed: | |
|  |  | |

|  |  |
| --- | --- |
| Signature of RW/RP’s medical specialist: |  |
| Date: |  |

ECART considers applications for embryo donation for reproductive purposes using [guidelines](http://www.ecart.health.govt.nz/moh.nsf/indexcm/ecart-resources-guidelines-embryodonation) issued by [ACART](http://www.acart.health.govt.nz/) under the [HART Act](http://www.legislation.govt.nz/act/public/2004/0092/latest/DLM319241.html).

Section 4: Report by counsellor for the embryo donors

Who is the counsellor for the embryo donors?

|  |  |  |
| --- | --- | --- |
|  | Name of counsellor: |  |
|  | Email/phone number: |  |
|  | Dates of counselling: |  |
|  | Counselling attendees: |  |
|  | Comments: | |
|  |  | |

Guideline 2(a)(ix) requires ECART to determine that each party has received counselling in accordance with the New Zealand Fertility Services Standard.

|  |  |  |
| --- | --- | --- |
|  | Have DW/DM received counselling in accordance with the NZ Fertility Services Standard? | Yes/No |

Guideline 2(b)(i) requires ECART to take into account whether the donors have completed their family.

|  |  |  |
| --- | --- | --- |
|  | Have the donors completed their family? | Yes/No |
|  | If not, describe the reasons why the donors are donating their existing embryos: | |
|  |  | |

Guideline 2(b)(iii)(•) requires ECART to take into account whether counselling has included implications counselling for all parties.

|  |  |  |
| --- | --- | --- |
|  | Has counselling included implications counselling for DW/DM? | Yes/No |
|  | Describe how counselling has included the implications of this ARP for DW/DM: | |
|  |  | |

Guideline 2(b)(iii)(•••) requires ECART to take into account whether counselling has been culturally appropriate.

|  |  |  |
| --- | --- | --- |
|  | Has counselling been culturally appropriate for DW/DM? | Yes/No |
|  | Describe how counselling has been culturally appropriate for DW/DM: | |
|  |  | |

Guideline 2(b)(iii)(••••) requires ECART to take into account whether counselling has provided for whānau/extended family involvement.

|  |  |  |
| --- | --- | --- |
|  | Has counselling provided for whānau/extended family involvement? | Yes/No |
|  | Describe how counselling has provided for DW/DM’s whānau/extended family: | |
|  |  | |

Guideline 2(b)(iii)(•••••) requires ECART to take into account whether counselling has provided for the inclusion of any children of the parties.

|  |  |  |
| --- | --- | --- |
|  | Has counselling provided for DW/DM’s existing children (if applicable)? | Yes/No |
|  | Describe how counselling has provided for DW/DM’s existing children: | |
|  |  | |

Guideline 2(b)(iii) requires ECART to take into account whether counselling will be accessible to all parties throughout the donation process.

|  |  |  |
| --- | --- | --- |
|  | Is counselling available to DW/DM before, during and after pregnancy? | Yes/No |
|  | Comments: | |
|  |  | |

Guideline 2(b)(ii) requires ECART to take into account whether the residency of the parties safeguards the wellbeing of all parties and especially any resulting child.

|  |  |  |
| --- | --- | --- |
|  | Does the residency of DW/DM safeguard the wellbeing of all parties especially any resulting child? | Yes/No |
|  | Describe the residency status of DW/DM and how it safeguards the wellbeing of all parties: | |
|  |  | |

Guideline 2(b)(vi) requires ECART to take into account whether the donors have been subjected to coercion or pressure.

|  |  |  |
| --- | --- | --- |
|  | In your professional opinion, do you think the donors have been subjected to coercion or pressure? | Yes/No |
|  | If yes, describe how DW/DM have been subjected to coercion: | |
|  |  | |

Guideline 2(b) requires ECART to take into account all relevant factors, including, but not limited to the factors listed above.

|  |  |  |
| --- | --- | --- |
|  | Are there any other relevant counselling factors for DW/DM that ECART needs to be aware of with this ARP?Examples of relevant factors may include, but are not limited to, the donors future feelings about donating their embryos to the recipient(s) | Yes/No |
|  | Describe any other relevant counselling factors and how they may be minimised/managed: | |
|  |  | |

|  |  |
| --- | --- |
| Signature of DW/DM’s counsellor: |  |
| Date: |  |

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Section 5: Report by counsellor for the recipient(s)

Who is the counsellor for the recipient(s)?

|  |  |  |
| --- | --- | --- |
|  | Name of counsellor: |  |
|  | Email/phone number: |  |
|  | Dates of counselling: |  |
|  | Counselling attendees: |  |
|  | Comments: | |
|  |  | |

Guideline 2(a)(ix) requires ECART to determine that each party has received counselling in accordance with the New Zealand Fertility Services Standard.

|  |  |  |
| --- | --- | --- |
|  | Have DW/DM received counselling in accordance with the NZ Fertility Services Standard? | Yes/No |

Guideline 2(b)(iii)(•) requires ECART to take into account whether counselling has included implications counselling for all parties.

|  |  |  |
| --- | --- | --- |
|  | Has counselling included implications counselling for RW/RP? | Yes/No |
|  | Describe how counselling has included the implications of this ARP for RW/RP: | |
|  |  | |

Guideline 2(b)(iii)(•••) requires ECART to take into account whether counselling has been culturally appropriate.

|  |  |  |
| --- | --- | --- |
|  | Has counselling been culturally appropriate for RW/RP? | Yes/No |
|  | Describe how counselling has been culturally appropriate for RW/RP: | |
|  |  | |

Guideline 2(b)(iii)(••••) requires ECART to take into account whether counselling has provided for whānau/extended family involvement.

|  |  |  |
| --- | --- | --- |
|  | Has counselling provided for whānau/extended family involvement? | Yes/No |
|  | Describe how counselling has provided for RW/RP’s whānau/extended family: | |
|  |  | |

Guideline 2(b)(iii)(•••••) requires ECART to take into account whether counselling has provided for the inclusion of any children of the parties.

|  |  |  |
| --- | --- | --- |
|  | Has counselling provided for RW/RP’s existing children (if applicable)? | Yes/No |
|  | Describe how counselling has provided for RW/RP’s existing children: | |
|  |  | |

Guideline 2(b)(iii) requires ECART to take into account whether counselling will be accessible to all parties throughout the donation process.

|  |  |  |
| --- | --- | --- |
|  | Is counselling available to RW/RP before, during and after pregnancy? | Yes/No |
|  | Comments: | |
|  |  | |

Guideline 2(b)(v) requires ECART to take into account whether the residency of the parties safeguards the wellbeing of all parties and especially any resulting child.

|  |  |  |
| --- | --- | --- |
|  | Does the residency of RW/RP safeguard the wellbeing of all parties especially any resulting child? | Yes/No |
|  | Describe the residency status of RW/RP and how it safeguards the wellbeing of all parties: | |
|  |  | |

Guideline 2(b) requires ECART to take into account all relevant factors, including, but not limited to the factors listed above.

|  |  |  |
| --- | --- | --- |
|  | Are there any other relevant counselling factors for RW/RP that ECART needs to be aware of with this ARP?Examples of relevant factors may include, but are not limited to, psychological issues, criminal history, and lifestyle factors such as drug or alcohol addiction | Yes/No |
|  | Describe any other relevant counselling factors and how they may be minimised/managed: | |
|  |  | |

|  |  |
| --- | --- |
| Signature of RW/RP’s counsellor: |  |
| Date: |  |

ECART considers applications for embryo donation for reproductive purposes using [guidelines](http://www.ecart.health.govt.nz/moh.nsf/indexcm/ecart-resources-guidelines-embryodonation) issued by [ACART](http://www.acart.health.govt.nz/) under the [HART Act](http://www.legislation.govt.nz/act/public/2004/0092/latest/DLM319241.html).

Section 6: Joint counselling report

Who are the joint counselors for this application?

|  |  |  |
| --- | --- | --- |
|  | Name of counsellors: |  |
|  | Dates of counselling: |  |
|  | Counselling attendees: |  |
|  | Comments: | |
|  |  | |

Guideline 2(b)(iii)(••) requires ECART to take into account whether counselling has included joint counselling for all parties.

|  |  |  |
| --- | --- | --- |
|  | Have all parties received joint counselling? | Yes/No |
|  | Comments: | |
|  |  | |

Guideline 2(a)(viii) requires ECART to determine that the parties understand that donors have the right to vary the agreed terms of donation or withdraw from the donation until the embryos have been placed in the uterus of the recipient woman.

|  |  |  |
| --- | --- | --- |
|  | Do RW/RP understand that DW/DM have the right to vary the agreed terms of donation or withdraw from the donation until the embryos have been placed in RW’s uterus? | Yes/No |
|  | Comments: | |
|  |  | |

Guideline 2(a)(vii) requires ECART to determine that there has been discussion, understanding, and agreement between the parties on matters relating to the use and storage of embryos and the disposal of any unused embryos.

|  |  |  |
| --- | --- | --- |
|  | Has there been discussion, understanding, and agreement between the parties on matters relating to the use and storage of embryos and the disposal of any unused embryos? | Yes/No |
|  | Describe DW/DM’s understanding on matters relating to the use and storage of embryos, and the disposal of any unused embryos: | |
|  |  | |

Guideline 2(b)(vii)(•) requires ECART to take into account whether all parties have considered and discussed the implications, and in the professional opinion of the counsellors, understood the needs of any resulting child, including:

|  |  |  |
| --- | --- | --- |
|  | (•) their rights to access information about their genetic origin and contact with the donors? | Yes/No |
|  | Describe the discussion between all parties: | |
|  |  | |
|  | (••) each other’s needs, wishes, expectations, and plans regarding ongoing contact and information sharing? | Yes/No |
|  | Describe the discussion between all parties: | |
|  |  | |
|  | (•••) any specific issues that may affect the health and wellbeing of any of the parties, and especially any resulting child? | Yes/No |
|  | Describe the discussion between all parties: | |
|  |  | |

|  |  |  |
| --- | --- | --- |
|  | (••••) each other’s attitudes to openness about the donation, especially with any resulting child? | Yes/No |
|  | Describe the discussion between all parties: | |
|  |  | |
|  | (•••••) the implications of any resulting child being born with disabilities or genetic disorders? | Yes/No |
|  | Describe the discussion between all parties: | |
|  |  | |
|  | (••••••) the implications of possible termination of the pregnancy by the recipient(s)? | Yes/No |
|  | Describe the discussion between all parties: | |
|  |  | |
|  | (•••••••) issues relating to storage, use and disposal of embryos? | Yes/No |
|  | Describe the discussion between all parties: | |
|  |  | |
|  | (••••••••) the requirements regarding information sharing under the Human Assisted Reproductive Technology Act 2004? | Yes/No |
|  | Describe the discussion between all parties: | |
|  |  | |
|  | (•••••••••) that embryos may not be able to be refrozen if donors decide to withdraw from the donation after embryos have been thawed? | Yes/No |
|  | Describe the discussion between all parties: | |
|  |  | |
|  | (••••••••••) their reasons for wishing to donate and receive embryos? | Yes/No |
|  | Describe the discussion between all parties: | |
|  |  | |
|  | (•••••••••••) the implications of their feelings now, and feelings they may experience in the future, concerning the donation of embryos? | Yes/No |
|  | Describe the discussion between all parties: | |
|  |  | |
|  | (••••••••••••) the impact of donating their embryos on their existing children? | Yes/No |
|  | Describe the discussion between all parties: | |
|  |  | |

|  |  |
| --- | --- |
| Signature of DW/DM’s counsellor: |  |
| Date: |  |

|  |  |
| --- | --- |
| Signature of RW/RP’s counsellor: |  |
| Date: |  |

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Section 7: Report by legal advisor for embryo donors

Who is the legal advisor for the embryo donors?

|  |  |  |
| --- | --- | --- |
|  | Name of legal advisor: |  |
|  | Legal firm: |  |
|  | Address: |  |
|  | Email/phone number: |  |
|  | Date(s) of meeting(s): |  |
|  | Meeting attendees: |  |

Guideline 2(a)(v) requires ECART to determine that the donors have received independent legal advice.

|  |  |  |
| --- | --- | --- |
|  | Have DW/DM received independent legal advice? | Yes/No |
|  | Comments: | |
|  |  | |

Guideline 2(a)(vi) requires ECART to take into account whether legal reports indicate that the parties understand the legal issues associated with embryo donation.

|  |  |  |
| --- | --- | --- |
|  | Do DW/DM understand the legal issues associated with embryo donation? | Yes/No |
|  | Do DW/DM understand that information about them is obtained by providers and forwarded to the Registrar-General under s47 of the HART Act 2004? | Yes/No |
|  | Do DW/DM understand that information about them can be obtained under s50 of the HART Act, from the provider or Registrar-General? | Yes/No |
|  | Do DW/DM understand that any resulting child will legally be the child of the recipients? | Yes/No |
|  | Do DW/DM understand that they have the right to withdraw consent to use of any embryo at any time until the embryo is placed in the recipient’s uterus? | Yes/No |
|  | Do DW/DM clearly understand that receipt of embryo donation costs must comply with section 13 of the HART Act 2004? | Yes/No |
|  | Do DW/DM clearly understand that any legal disputes may have to be resolved by the Family Court? | Yes/No |
|  | Comments: | |
|  |  | |

Guideline 2(b) requires ECART to take into account all relevant factors, including, but not limited to the factors listed above.

|  |  |  |
| --- | --- | --- |
|  | Are there any other relevant legal factors for DW/DM that ECART needs to be aware of with this ARP? | Yes/No |
|  | Describe any other relevant legal factors for DW/DM and how they may be minimised/managed: | |
|  |  | |

|  |  |
| --- | --- |
| Signature of DW/DM’s legal advisor: |  |
| Date: |  |

ECART considers applications for embryo donation for reproductive purposes using [guidelines](http://www.ecart.health.govt.nz/moh.nsf/indexcm/ecart-resources-guidelines-embryodonation) issued by [ACART](http://www.acart.health.govt.nz/) under the [HART Act](http://www.legislation.govt.nz/act/public/2004/0092/latest/DLM319241.html).

Section 8: Report by legal advisor for recipient(s)

Who is the legal advisor for the recipient(s)?

|  |  |  |
| --- | --- | --- |
|  | Name of legal advisor: |  |
|  | Legal firm: |  |
|  | Address: |  |
|  | Email/phone number: |  |
|  | Date(s) of meeting(s): |  |
|  | Meeting attendees: |  |

Guideline 2(a)(v) requires ECART to determine that the recipient(s) have received independent legal advice.

|  |  |  |
| --- | --- | --- |
|  | Have RW/RP received independent legal advice? | Yes/No |
|  | Comments: | |
|  |  | |

Guideline 2(a)(vi) requires ECART to take into account whether legal reports indicate that the parties understand the legal issues associated with embryo donation.

|  |  |  |
| --- | --- | --- |
|  | Do RW/RP understand the legal issues associated with embryo donation? | Yes/No |
|  | Do RW/RP understand that information about the donors is obtained by providers and forwarded to the Registrar-General under s47 of the HART Act 2004? | Yes/No |
|  | Do RW/RP understand that information about the donors can be obtained under s50 of the HART Act, from the provider or Registrar-General? | Yes/No |
|  | Do RW/RP understand that any resulting child will legally be their child? | Yes/No |
|  | Do RW/RP understand that DW/DM have the right to withdraw consent to use of any embryo at any time until the embryo is placed in the recipient’s uterus? | Yes/No |
|  | Do RW/RP clearly understand that receipt of embryo donation costs must comply with section 13 of the HART Act 2004? | Yes/No |
|  | Do RW/RP clearly understand that any legal disputes may have to be resolved by the Family Court: | Yes/No |
|  | Comments: | |
|  |  | |

Guideline 2(b) requires ECART to take into account all relevant factors, including, but not limited to the factors listed above.

|  |  |  |
| --- | --- | --- |
|  | Are there any other relevant legal factors for RW/RP that ECART needs to be aware of with this ARP? | Yes/No |
|  | Describe any other relevant legal factors for RW/RP and how they may be minimised/managed: | |
|  |  | |

|  |  |
| --- | --- |
| Signature of RW/RP’s legal advisor: |  |
| Date: |  |