Feedback form

Please provide your contact details below.

Name:	[redacted]
If this feedback is on behalf of an organisation, please name the organisation:	
Please provide a brief description of the organisation if applicable:	
Address/email:	[redacted]
Interest in this topic (eg, user of fertility services, health professional, researcher, member of the public):	Dr – fertility specialist

We will place all feedback on ACART's website, except where we are asked that feedback be withheld in full or part for reasons of confidentiality. We will remove contact information from all feedback.

☐ I **request** that my feedback be withheld in full or part from publication on ACART's website. (If you wish a part to be withheld, please clearly indicate which part.)

Please note that all feedback may be requested by any member of the public under the Official Information Act 1982 (the Act). If there is any part of your feedback that you consider should be properly withheld under the Act, please make this clear in your feedback, noting the reasons.

If information from your feedback is requested under the Act, the Ministry of Health (the Ministry) will release your feedback to the person who requested it. The Ministry will remove your name and/or contact details from the feedback if you check one or both of the following boxes. Where feedback is on behalf of an organisation, the Ministry will not remove the name of the organisation.

☒ **I do not** give permission for my name to be released to any person under the Official Information Act 1982.

☒ I **do not** give permission for my contact details to be released to any person under the Official Information Act 1982.

We will acknowledge all feedback.

Questions for response

Question 1: Access to information that must be disclosed to patients and donors prior to consent

(a) Do you agree there is a need for better access to the information that must be disclosed to patients and donors prior to consent?

Yes [x] No [ ]

(b) Is there other information that should be given to patients and donors as part of the informed consent process?

Yes [ ] No [x]

Please give reasons for your views.

Providers already work hard to fully inform patients and donors – there is always room for improvement though. A clear guide to all including patients and donors of what information they should be given is sensible.

Question 2: Form of consent

(a) Do you agree that consent to all assisted reproductive processes, where consent is required, must be in writing?

Yes [x] No [ ]

(b) Do you have any other comments?

Yes [ ] No [x]

This already occurs and is important.

Question 3: Donor consent to use gametes or embryos for training purposes

(a) Do you agree that the consent of gamete and embryo donors should be obtained if their gametes, or embryos created from their gametes, may be used for training purposes?

Yes [x] No [ ]

(b) Do you have any other comments?

Yes [ ] No [x]

Please give reasons for your views.

Question 4: Placing conditions on donor consent

(a) Do you agree that donors should continue to be able to place conditions on their consent?

Yes [x] No [ ]

(b) If so, should there be any limits on the conditions placed?

Yes [x] No [ ]

(c) Do you have any other comments?

Yes [x] No [ ]

Please give reasons for your views.

Donors are already allowed to place conditions on their consent form. A clinic should have the right to refuse the conditions if they are unworkable in practice (andthen the donor would have the right to withdraw their donations).

Question 5: Ongoing information for donors on the use of their gametes

(a) Do you agree that gamete donors should be given the option of receiving ongoing information on the use of their gametes for the following situations:

(i) if the gamete is about to be used?

Yes [ ] No [x]

(ii) on the outcome(s) of the donation?

Yes [x] No [ ]

(b) Is there any other information that you think should be offered to gamete donors after consent has been given?

Yes [ ] No [x]

Please give reasons for your views.

Donors are already informed about the outcomes of their donations and should continue to be so. It is impractical for a sperm donor to be contactedevery time sperm is to be used for a donation (the donor's sperm could be being used by up to 5 women or couples at any time). It would creat a lot of extra work, and be very unsettling for the recipients, leaving them with the question of whether or not they were going to be able to go ahead with treatment or not each cycle. It could also mean the possibility of them having to cancle a very expensive ivf cycle part way through because the donor couldn't be contacted. Donors are made aware of how their material will be used and if they change their mind can still let us know and stop their donation from proceeding any further. I don't think constantly rechecking with them will help anyone.

Question 6: Withdrawal or variation of consent by donors

(a) Do you agree that gamete donors should be able to withdraw or vary consent to the use of their gametes up to the point of fertilisation?

Yes [x] No [ ]

(b) If not, when do you consider the 'point of no return' should be?

Yes [ ] No [ ]

Please give reasons for your views.

As far as I am concerned this is already the case in practice.

Question 7: Consent of a partner, family or whānau to donation or use of donor gametes

(a) Do you agree that the consent of **partners** to the donation or use of a donor's gametes should not be required?

Yes [x] No [ ]

(b) Do you agree that the consent of **family or whānau** to the donation or use of a donor's gametes should not be required?

Yes [x] No [ ]

Please give reasons for your views.

Important to encourage their involvement but I don't think their consent is necessary.

Question 8: Couple disputes about the future use of embryos

(a) Do you agree that where one party in a couple disputes the future use of embryos that have been created for them, there should be a 'cooling-off' period of 12 months – and if not, why not?

Yes [x] No [ ]

(b) Do you agree that, if the couple cannot agree about the use of the embryos within that period, the embryos should be disposed of – and if not, why not?

Yes [ ] No [x]

Please give reasons for your views.

The 10 year storage laws are already in place. If one party wants to dispose and the other doesn't, or there is a dispute, I feel strongly that the embryos should be left in storage until the 10 years is reachec. They would then have to be disposed of unless both parties agreed to, and applied for an extension to the storage period. People reconcile after prolonged periods at times and if they are disposed of after 12 months I think there will be cases of later regret that could have been avoided.

Question 9: Form of requirements for informed consent

(a) Do you agree that requirements for informed consent should be set out in regulations?

Yes [ ] No [x]

(b) Do you have any other comments?

Yes [x] No [ ]

Please give reasons for your views.

I don't think that there needs to be further regulation. The NZ Fertility Standards already provide a lot of regulation.

Medical professionals also have high standards expected of them for informed consent.

Question 10: Comments or suggestions

(a) Do you have any general comments or suggestions about the requirements for informed consent?

(b) Do you have any other comments or suggestions about the issues discussed in this consultation document?

I would prefer my name not to be published on the website but am happy for my submission to be published anonomously or with "Dr" next to it.