



# Your consent to the creation of embryos (IVF and ICSI) with your deceased partner's eggs or sperm or to storage of those embryos for up to 55 years (under the 2024 Regulations)

(This form is only to be used in the limited circumstances specified under the Health and Care Act 2022 (Storage of Gametes and Embryos) (Transitional Provision) Regulations 2024 ('the 2024 Regulations'))

## About this form

This form is produced by the Human Fertilisation and Embryology Authority (HFEA), the UK's independent regulator of fertility treatment and human embryo research. For more information about the HFEA, visit [www.hfea.gov.uk](http://www.hfea.gov.uk).

In this form, the terms 'your embryos' or 'embryos' means embryos which have been created outside the body using your eggs or sperm.

When an embryo is created outside the body using your eggs or sperm with eggs or sperm from your partner, then your partner must also have given consent to the posthumous use or storage of the embryo before their death.

This form **must only** be used by the subset of patients creating embryos with gametes that fall under the 2024 Regulations.

If you fall into this subset of patients, you can consent to store **embryos to which this form relates** for up to 55 years without needing to renew consent.

If you are unsure about whether this is the right form for you, you should speak to your clinic.

### Who should fill in this form?

Fill in this form if you are having fertility treatment (this may be in vitro fertilisation (IVF) or intra-cytoplasmic sperm injection (ICSI)) which involves creating embryos outside the body (in vitro) using your eggs or sperm and the eggs or sperm of your deceased partner where your partner's eggs or sperm fall under the 2024 Regulations.

Before their death, your partner must have given consent to use of their eggs or sperm to create embryos posthumously, to use of those embryos in your treatment, and to storage of those embryos for later use for a period of more than 10 years.

If you are unable to complete this form because of physical illness, injury or disability you may direct someone else to complete and sign it for you in your presence and at your direction.

### Why do I have to fill in this form?

By law (the Human Fertilisation and Embryology Act 1990 (as amended)), you need to give your written consent if you want your embryos to be used or stored for later use. If you are storing your embryos, you must state in writing how long you consent to them being stored.

You are also legally required to record what you would like to happen to your embryos if you were to die or lose the ability to decide for yourself (become mentally incapacitated). While this is perhaps not something you have considered, if you do not record your consent on this form, in the event that you die or become mentally incapacitated, your clinic would not be able to store your embryos according to your wishes. If you are unsure of anything in relation to this, please ask your clinic.

This form will record your consent to:

- ▶ Use of your eggs or sperm to create embryos for treatment;
- ▶ Use and storage of your embryos for treatment;
- ▶ Use and storage of your embryos for training purposes; and
- ▶ Storage of your embryos in the event of your mental incapacity.

If you wish to store your eggs or sperm in the course of treatment, your clinic will provide you with the appropriate consent form.

If you already have embryos in storage (created on or after 1 July 2022) and consented using a previous consent form, this form will supersede any previous consent given.

If the embryos will be transferred to a surrogate you will also need to complete the relevant sections of the appropriate surrogacy form but **not** the sections relating to storage as your consent to storage will be recorded on this form. Your deceased partner **must** also have given consent to use of their embryos in treatment with a surrogate and have undergone appropriate screening before their death. Your clinic will provide you with information about how to complete the surrogacy form.

## For clinic use only (optional)

HFEA centre reference

Patient number

### What do I need to know before filling in this form?

Before you fill in this form, you should be certain that your clinic has given you all the relevant information you need to make fully informed decisions. This includes:

- ▶ information about:
  - the different options set out in this form
  - what your partner gave consent to before their death
  - the implications of giving your consent
  - the consequences of withdrawing this consent, and
  - how you can make changes to, or withdraw, your consent.
- ▶ A suitable opportunity to have proper counselling about the implications of treatment and storage.

If you are unsure, or think that you have not been given all of this information, please speak to your clinic. There is a declaration at the end of this form which you must sign to confirm you have received this information. If you do not receive this information before filling in this form, your consent may be invalid.

For storage of your embryos to continue, your clinic must obtain a Medical Practitioner's Statement (MPS) within every 10 years from the last MPS to confirm you or your deceased partner's premature infertility. This is a requirement of the 2024 Regulations. **Your clinic is responsible for obtaining each MPS within the required timeframes.**

### What other uses are there for my embryos during treatment?

During your treatment, you may have embryos that you do not want to use (for example, because the embryos are not needed, or are not suitable, for treatment). On this form, you can consent to your embryos being used and stored for potential use by designated healthcare professionals to practice the techniques involved in fertility treatment.

Giving your consent to your embryos being used and stored for training purposes means that embryos which are not used, or not suitable for use, in each fresh cycle of treatment can be either used immediately for training or stored for potential future use in training to allow designated healthcare professionals to learn about, and practice, the techniques involved in fertility treatment.

Your embryos can only be stored and used for training purposes if your partner gave consent to this before their death.

**The decision to consent to your embryos being used for training purposes will not affect your treatment in any way.**

### What other uses are there for embryos after I have finished my treatment?

After treatment, you may have stored embryos. If you no longer wish to keep your embryos for your own treatment, you can withdraw your consent to storage, and they will be disposed of. Your clinic will provide you with the necessary form.

Depending on what consent your partner gave and the screening carried out before their death, your other options when withdrawing your consent to use and storage for your own treatment may include giving your consent to:

- ▶ the donation of unused embryos for use in someone else's treatment. Before doing this, there are lots of issues to consider, which your clinic should discuss with you. This would involve further screening tests, counselling and further consent. This will be subject to your deceased partner having the appropriate screening carried out before their death.
- ▶ your unused embryos being used for research purposes, with the aim of helping to increase knowledge about diseases and serious illnesses and potentially develop new treatments. Research projects take place at HFEA licenced research facilities. Your clinic can give you more information about this.
- ▶ your unused embryos being used for training purposes to allow designated healthcare professionals to learn about, and practice, the techniques involved in fertility treatment.

You can only consent for your embryos to be used and stored in line with what your partner gave consent to before their death. Your clinic will provide you with further information regarding these options and it may be necessary to complete further consent forms.

**When filling in this form, make sure you sign the declaration on every page to confirm that you have read the page and fully agree with the information provided and the consent that you are giving. When you have completed the form, you may request a copy of it from your clinic.**

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### For clinic use only (optional)

HFEA centre reference

Patient number

# 1 About you

1.1 **Your first name(s)** Place sticker here

1.2 **Your surname**

1.3 **Your date of birth** 1.4 **Your NHS/CHI/HCN/passport number** (please select)

# 2 About you

2.1 **Your partner's first name(s)** Place sticker here

2.2 **Your partner's surname**

2.3 **Your partner's date of birth** 2.4 **Your partner's NHS/CHI/HCN/passport number** (please select)

# 3 Your treatment

3.1 **Do you consent to your eggs or sperm being used to create embryos outside the body and the embryos being used for your treatment (eg, through IVF or ICSI treatment)?**

In order to create embryos for your treatment you must provide your consent by ticking the 'yes' box below. You should be aware that your partner must have also given consent for embryos to be created.

If a surrogacy arrangement would be required, your clinic will provide you with the appropriate consent form.

Yes  No

Continues on the next page >>

# Page declaration

**Your signature** **Date**

**For clinic use only (optional)**

Patient number

## 4 Storing embryos

### 4.1 Do you consent to your embryos being stored?

You should be aware that embryos can only be stored if your partner gave consent to this.

Yes  No

#### Embryo storage periods

You may wish to store your embryos so they can be used in future treatment. To be stored, embryos are frozen. You should think about how far in the future you might want or be able to use your stored embryos and the potential costs of storing – you should discuss this with your clinic.

Because you are storing embryos created with the eggs or sperm of your partner who died before 1 July 2022 and your partner's eggs or sperm fall under the 2024 Regulations, the law permits you to store those embryos for use in your treatment (including treatment with a surrogate) for any period up to a maximum of 55 years.

This 55-year period is calculated from the date that the eggs or sperm (whichever were placed into storage first) used to create the embryos were first placed in storage. **However**, it will not be possible to store embryos for longer than your partner gave consent to, and your partner may have given consent to storage for a period of less than 55 years. If this is the case, the embryos must be removed from storage once their consent expires.

If you consent to store your embryos, your clinic should have given you information about:

- ▶ the period of storage your partner gave consent to and therefore how long your embryos can be stored for, **and**
- ▶ the date that the storage period you are giving consent to is calculated from and (based on that) when the consent you give below will expire.

You can give your consent to storage on this form. If you consent to less than the legal maximum period of storage and if it is within the storage period your deceased partner gave consent to, you will be contacted by your clinic at the appropriate time so you can give consent to a longer period of storage if you wish.

**Because your clinic may need to contact you about your consent to storage, you should always inform your clinic if your contact details or your circumstances change. If your clinic is unable to contact you, then your embryos will be removed from storage and disposed of when they can no longer be lawfully stored.**

You should be aware that any arrangements you need to make regarding the practicalities of storage with your clinic or funding body are separate from this consent. For example, your clinic may only continue to store embryos for the period you have specified in this form if you, or your funding provider, continue to pay the storage fees.

Your clinic must obtain a Medical Practitioner's Statement (MPS) within every 10 years from the last MPS to certify in writing that you or your deceased partner has met the medical criteria for premature infertility for storage to continue.

### 4.2 For how long do you consent to store your embryos?

For 55 years from the date that the eggs or sperm (whichever were placed into storage first) used to create the embryos were first placed in storage.

For a shorter period - specify the number of years (not exceeding 55 years):

You can change your storage period or withdraw your consent to storage at any time by contacting your clinic.

Continues on the next page >>

## Page declaration

Your signature

Date

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For clinic use only (optional)

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## 5 Using embryos for training

During your treatment, you may have embryos that you do not want to use (for example, because the embryos are not needed, or are not suitable, for treatment). On this form, you can consent to your embryos being used and stored to allow designated healthcare staff to practice the techniques involved in fertility treatment. Your partner must have given consent for embryos to be stored and used for training purposes. If you are not sure about this speak to your clinic.

Giving your consent to embryos being used and stored for training purposes means that embryos which are not used, or are not suitable for use, in each fresh cycle of treatment can be either used immediately for training or stored for potential future use in training.

**The decision to consent to your embryos being used for training purposes will not affect your treatment in any way.**

### 5.1 Do you consent to your unused embryos being used for training purposes?

You should be aware that embryos can only be used for training purposes if your partner gave consent to this.

Yes  No

If you give your consent to storing your embryos for training purposes, your clinic may store your embryos for these purposes for a maximum of **10 years** from the date that you give consent on this form. This period cannot be extended.

### 5.2 If you consent to your embryos being used for training purposes, how long do you consent to storage?

For 10 years, or

For a shorter period - specify the number of years (not exceeding 10 years):

## 6 In the event of your death

As part of your consent, you also need to decide what you want to happen to your embryos if you die.

**On this form**, you may be able to consent to your embryos being used and stored after your death for potential use by designated healthcare professionals to practice the techniques involved in fertility treatment, as long as your partner also gave consent to this. Also, your embryos cannot be stored for longer than your partner gave consent to before their death.

### 6.1 In the event of your death, do you consent to your embryos being stored and used for training purposes?

You should be aware that embryos can only be stored and used for training purposes if your partner gave consent to this.

Yes  No

**Please indicate how long you consent to storage of your embryos for training purposes after your death:**

For 10 years from the date you sign this form, or

For a shorter period - specify the number of years (not exceeding 10 years from the date you sign this form):

## Page declaration

Your signature

Date

For clinic use only (optional)

Patient number

## 7 In the event of your mental incapacity

As part of your consent, you also need to decide what you would like to happen to your embryos if you lose the ability to decide for yourself (become mentally incapacitated).

**On this form, you may be able to consent to either:**

- ▶ **the continued storage of your embryos if you were to lose capacity.** Then, in the event that you regain capacity, embryos may be available for use in your treatment (including your treatment with a surrogate).

**OR**

- ▶ **your embryos being used and stored for potential use by designated healthcare professionals to practice the techniques involved in fertility treatment if you were to lose capacity.** This will only be possible if your partner gave consent to this.

Your embryos may be stored for up to the period of time for which you consented in section 4 of this form (or whatever period of time your partner gave consent to, if shorter).

### 7.1 In the event of your mental incapacity, do you consent to the continued storage of your embryos for potential use in future treatment should you regain capacity OR do you instead consent to your embryos being stored and used for training purposes?

You can only select 'yes' to **one** of the options below (at **either A or B**).

#### **A In the event of my mental incapacity, I consent to the continued storage of my embryos for potential use in future treatment should I regain capacity.**

You should be aware that embryos can only be stored for treatment purposes if your partner gave consent to this.

Yes  No

#### **B In the event of my mental incapacity, I consent to my embryos being stored and used for training purposes.**

You should be aware that embryos can only be stored and used for training purposes if your partner gave consent to this.

If you give consent to your embryos being stored and used for training purposes in the event of your mental incapacity, they will not be available for treatment if you regain capacity.

Yes  No

#### **Other uses for your embryos if you die or become mentally incapacitated**

It may be possible for your embryos to be kept in storage in the event of your death or mental incapacity for the purposes outlined below:

- ▶ **In the treatment of others by donation.** If you wish for your embryos to be used for this purpose, you will need to provide written consent. Please discuss this with your clinic who will provide you with the appropriate forms. This will be subject to your deceased partner having the appropriate screening carried out before their death.
- ▶ **For research purposes,** with the aim of helping to increase knowledge about diseases and serious illnesses and potentially develop new treatments. Research projects take place at HFEA licensed research facilities. Your clinic can give you more information about this.

**Your options for your embryos depend on what your partner gave consent to and the screening that was carried out before their death. Your clinic will be able to give you more information about this.**

## Page declaration

Your signature

Date

     

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Please sign and date the declaration

## Your declaration

- ▶ I declare that I am the person named in section one of this form.
- ▶ I declare that:
  - before I completed this form, I was given information about the different options set out in this form, and I was given an opportunity to have counselling.
  - the implications of giving my consent, and the consequences of withdrawing this consent, have been fully explained to me.
  - I understand that I can make changes to, or withdraw, my consent to storage at any time until the embryos have been used or disposed of.
  - I understand that before the end of the storage period that I have indicated at section 4 above, I will be contacted by my clinic.
  - I understand that my consent will be taken as withdrawn and my embryos will be removed from storage and disposed of at the end of the period to which I have consented at section 4.
- ▶ I understand that I must notify my clinic if my contact details change. I understand it is my responsibility to keep contact details up to date.
- ▶ I declare that the information I have given on this form is correct and complete.
- ▶ I consent to the clinic (or any subsequent HFEA-licensed clinic that may become involved in my treatment, donation or storage, or a data controller in line with the Data Protection Act 2018 and UK General Data Protection Regulation) using the information on this form in the process of providing licensed activities (in accordance with the provisions of the Human Fertilisation and Embryology Act 1990, (as amended)), or for record storage and archiving purposes.

Your signature

Date

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### If signing at the direction of the person consenting

If you have completed this form at the direction of the person consenting (because they are unable to sign for themselves due to physical illness, injury or disability), you must sign and date below. There must also be a witness confirming that the person consenting is present when you sign the form.

### Representative's declaration

I declare that the person named in section one of this form is present at the time of signing this form and I am signing it in accordance with their direction.

Representative's name

Representative's signature

Relationship to the person consenting

Date

D	D	M	M	Y	Y
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Witness's name

Witness's signature

Date

D	D	M	M	Y	Y
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