

## **Surrogate Birth**

### **Skill Level:**

All disciplines within Maternity Services including RNs, LPNs, social workers, and members of the departments of: Obstetrics & Gynecology, Family Practice Obstetrics Division, Midwifery, and Pediatrics.

### **Need to Know:**

Surrogacy is a method of reproduction whereby a woman agrees to become pregnant and deliver a child for another person or couple. An embryo conceived outside of the surrogate mother's uterus is transferred into the surrogate's uterus and is carried to term.

*Providence Health Care does not provide surrogacy nor any associated assisted reproductive technologies that conflict with the Catholic tradition (Catholic Health Alliance of Canada Health Ethics Guide ed. Article #50). However, PHC is committed to recognizing and supporting all persons from conception to natural death. As such, PHC is committed to providing high quality compassionate care to all in need, including surrogate mothers and their babies at this important and vulnerable time.*

## **PRACTICE GUIDELINES**

### **Planning for Surrogacy Birth**

The surrogate birth mother is the patient

### **Social Worker Role**

When it is known a surrogate birth will take place at St. Paul's Hospital, the Maternity Social Worker will contact the lawyer representing the intended parents and request the portion of the surrogacy contract signed between the surrogate and the intended parents that includes the statement of the intent of the lawyer to obtain a Declaration of Parentage Order to the Supreme Court of B.C.

The documents ([Appendix A](#)) will be placed on the surrogate mother's prenatal record.

The Social Worker will also arrange to have the family(s) discuss financial implications with the Finance Department.

### **Labour and Delivery**

The surrogate birth mother presents for delivery.

Social worker's notes in birth mothers chart may outline details of the surrogate birth mothers wishes about:

- Her supports during the birth process
- Interaction with the intended parents during the birth process and afterward

### **Admission of Newborn (Unit Clerk)**

Admit newborn under birth mother's surname

## **INTERDISCIPLINARY GUIDELINE**

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**B-00-07-10023 – Surrogate Birth**

NOTE: The child's legal name does not get changed prior to the completion of the declaration of parentage process.

### **Surrendering Custody of the Newborn**

The purpose of the surrogate pregnancy is to surrender the custody of the newborn to the intended parent(s). The intended parents shall have custody and all parental rights and duties from the moment of birth of the newborn.

### **Care of the Newborn**

The newborn name remains as the birth mother's surname until discharge or until the declaration of parentage process is complete (Registration of Live Birth by intended parents and court documentation).

Provide care to the newborn as per usual practice standards. The birth mother appoints the intended parents as medical caregivers with permission to make medical decisions for the newborn.

### **Newborn Identification**

Put the surrogate's surname on the baby identification bands

### **Registration of Newborn**

The *Record of Live Birth or Stillbirth* and pertinent maternal delivery record documentation will be completed by the physician or midwife with the surrogate birth mother's information. The intended parents will complete the Registration of Live Birth form.

### **Surrogate mother and intended family in the Post partum Period**

1. Provide care to the surrogate mother as per usual practice standards
2. After delivery, if the intended parent(s) and the surrogate mother wish to share a room, they and the infant(s) will be housed together in a Single-Room Maternity Care (SRMC) room.
3. If the intended parent(s) and the surrogate mother do not wish to share a room, based on availability, the intended parents will be offered a room (If intended parents are Non Residents of BC, hospital per diem charges will apply) in order to provide infant care teaching such as:
  - Feeding
  - Diapering
  - Bathing
  - Common newborn disorders (jaundice, colic etc)
  - Purple crying

### **Contractual arrangements**

Hospital staff will not become involved in any legal or contractual arrangement between the birth mother and the various parties.

## INTERDISCIPLINARY GUIDELINE

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### **Financial responsibilities**

The intended parents assume financial responsibility for all related health care costs for the infant(s) regardless of resident status. Non Resident hospital charges may apply. See current Patient Rate Summary – available from Finance (Resident and non-resident billing information).

### **Discharge**

After delivery, the baby will be discharged to the intended parents when medically ready, as per normal discharge criteria.

### **Persons/Groups Consulted:**

Director and Ethicist, Mission, Ethics & Spirituality Department PHC  
Clinical Ethicist, PHC  
Perinatal Social Worker  
Director Risk Management  
Maternity Quality and Safety Committee  
Perinatal Directions Committee

### **Revised By:**

Operations Leader, Maternity Services and NICU

### **Created**

March 2011

Revised: November 2015

## INTERDISCIPLINARY GUIDELINE

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### Appendix A: Sample Letter

#### VIA FAX

St. Paul's Hospital  
1081 Burrard Street  
Vancouver, BC V6Z 1Y6

Attention: Lana Needer/Maternity Unit

Dear Sirs/Mesdames:

Re: Surrogacy/Parentage  
Intended Parent:  
Surrogate:  
Baby Due:

I have been retained by \_\_\_\_\_ to complete and submit a birth registration application to the Vital Statistics Agency as soon as practicable after the delivery of a baby by \_\_\_\_\_, the surrogate.

To assist you with respect to the arrangements in the hospital and regarding the parentage registration, please be advised as follows:

1. \_\_\_\_\_ entered into a written Surrogacy Agreement with \_\_\_\_\_ on \_\_\_\_\_. In which \_\_\_\_\_ agreed to act as a gestational carrier for \_\_\_\_\_ embryos.
2. The transfer was carried out by \_\_\_\_\_.
3. \_\_\_\_\_ became pregnant as a result of the transfer.
4. The parties have agreed that:
  - a. \_\_\_\_\_ shall have no parental or custodial and social obligations of any child born of the surrogacy;
  - b. \_\_\_\_\_ shall be the custodial parent of any child born as a result of the surrogacy arrangements;
  - c. \_\_\_\_\_ shall assume custody of the child born of the procedure immediately upon birth;
  - d. \_\_\_\_\_ is the child's caregivers and are entitled to provide directions and instructions to the hospital immediately after the birth;
  - e. \_\_\_\_\_ will take whatever legal steps are necessary to be named as the parent of the child on the birth registration.
  - f. When the baby is born:
    - i. The attending physician should complete the usual Notice of Birth form and submit it to Vital Statistics.
    - ii. \_\_\_\_\_ must *not* sign a Registration of Birth.
    - iii. My client will complete a Registration of Birth as if they are the parent of the child.
    - iv. I will send the Registration of Birth completed by my client to the Vital Statistics Agency, together with the supporting Statutory Declarations of \_\_\_\_\_ and \_\_\_\_\_.
    - v. The Vital Statistics Agency will then register the birth in the name of my client as the parent at first instance and issue a birth certificate.

It should be sufficient for your records for the parties to endorse a copy of this letter or sign a form that the hospital has prepared to confirm the particulars set out above. Accordingly St. Paul's Hospital should accept the instructions of my clients in all regards following the birth.

If you have any questions or concerns, please telephone me at your earliest opportunity so that the hospital arrangements following birth are discussed well in advance of the expected due date.

I thank you in advance for your assistance with this matter.

Yours Truly