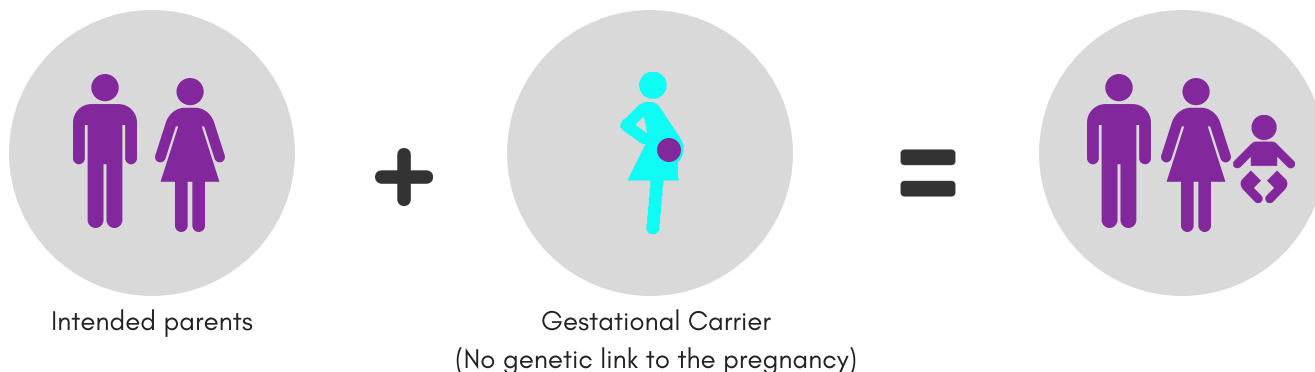


WHAT IS GESTATIONAL CARRIER SURROGACY

GESTATIONAL CARRIER SURROGACY ARRANGEMENT

The woman carrying the pregnancy is not genetically linked to the offspring.
Today, the vast majority of surrogacy arrangements are gestational carrier arrangements.



In traditional surrogacy, the woman carrying the pregnancy is genetically linked to the offspring – it was her own egg that created the pregnancy.

WHY INTENDED PARENTS TURN TO GESTATIONAL CARRIER SURROGACY TO BUILD THEIR FAMILY

- Medical conditions that prevent carrying a pregnancy (heart disease, cancer, lupus, type 1 diabetes)
- No uterus/uterine issues (born with MRKH syndrome, ruptured uterus from previous delivery, hysterectomy)
- Reproductive health disorders (recurrent miscarriages, complications from previous pregnancies or deliveries)
- Single men/same-sex male couples who want to have a genetic child

STEPS TAKEN TO ENSURE FAIR TREATMENT OF GESTATIONAL CARRIERS



Mental Health Professional

- Evaluates gestational carrier and partner to ensure compensation is not primary motivation
- Does psychological testing
- Educates about risks
- Supportive of gestational carrier during treatment, pregnancy, and after delivery
- Can reject surrogate



Attorney

- Evaluates/creates contract
- Educates re legal issues and parentage
- Must be separate counsel from intended parents
- Advocates for and protects rights/interest of surrogate



Reproductive Endocrinologist

- Screens via ASRM guidelines (21+, has one child, financially stable, etc.)
- Requires separate legal counsel
- Complete medical evaluation
- Educates about risks of surrogacy process and pregnancy
- Checks for mental health screen, independent OB health approval, health insurance
- Can reject surrogate



Agency

- Enforces all other screening
- Educates
- OB review
- Insurance and financial consulting and management
- Mediation between gestational carrier and intended parents
- Can reject surrogate