

Consent Form (14) (Revised in 2012)

Consent to Artificial Insemination by Husband (AIH)

PART I WIFE'S CONSENT

1. I _____, of
(Surname, Given Names) (ID No.)
_____(address),
being lawfully married and desirous of having a child, DO HEREBY AUTHORISE
_____ (name of reproductive
technology centre) (hereinafter called "the Centre") to perform the treatment of
intravaginal/intracervical/intrauterine* insemination on me, using the sperm from my
husband ^{Note}.
2. I acknowledge that the nature, procedures and possible complications of the said treatment
have been explained to me by _____ and I have been
given the opportunity to ask any question I wish. I have also been offered a suitable
opportunity to take part in counselling with _____ about the
implications of the treatment.
3. I fully understand and accept that -
 - (a) the said treatment procedure may not result in a successful pregnancy;
 - (b) I may not be able to carry the pregnancy to term; and
 - (c) any child conceived or born as a result of the procedure, may suffer from defect(s) of
health or mental or physical impairment(s) as a result of congenital, hereditary or
other reasons , similar to the situation of a normal pregnancy.
4. I understand that -
 - (a) this consent cannot be revoked or varied once the insemination has been performed;
and
 - (b) the insemination will not be performed if my husband revokes or varies his consent
prior to insemination.
5. I acknowledge that the Information Sheet at Appendix XI of the Code of Practice on
Reproductive Technology and Embryo Research has been read by me/explained to me*.
I fully understand the contents of the Information Sheet and I agree that my personal data
and information may be used for the purposes as set out in paragraph 1 of the Information
Sheet.

Dated the _____ day of _____
(Month) (Year)

Signed _____
(Wife's Signature)

Name _____
(in Block Letters)

Signed _____
(Signature of Attending Doctor)

Name _____
(in Block Letters)

Signed _____
(Signature of Witness)

Name _____
(in Block Letters)

Position _____

PART II HUSBAND'S CONSENT

(For the first cycle, the husband should sign the consent form in the presence of the attending doctor, while for the subsequent cycles, the signing of the consent form by the husband in the presence of a witness would suffice.)

6. I _____ am the
(Surname, Given Names) (ID No.)
husband of _____ and I consent to the course
of treatment outlined above. I understand that I will be the legal father of any child(ren)
born from the treatment.
7. I understand that this consent cannot be revoked or varied once the insemination has been
performed. Any revocation or variation of this consent will not be effective until actual
receipt by the Centre in writing.
8. I acknowledge that the Information Sheet at Appendix XI of the Code of Practice on
Reproductive Technology and Embryo Research has been read by me/explained to me*.
I fully understand the contents of the Information Sheet and I agree that my personal data
and information may be used for the purposes as set out in paragraph 1 of the Information
Sheet.

Dated the _____ day of _____
(Month) (Year)

Signed _____
(Husband's Signature)

Name _____
(in Block Letters) (in Chinese)

Signed _____
(Signature of Attending Doctor/Witness*)

Name _____
(in Block Letters)

Marriage Certificate No. _____

* Delete whichever is inapplicable.

Note: Intravaginal insemination refers to the placement of sperm into the vagina.
Intracervical insemination refers to the placement of sperm at the cervical os.
Intrauterine insemination refers to the placement of sperm (usually after processing)
into the uterine cavity.