



# Gestational Carrier Applicant Recommended Medical Criteria

Effective April 2022

## In order to qualify to be a gestational carrier, applicant should meet the following criteria:

- Required Age: 21-45
- Required BMI: 18.5-34.9 (Agency to be responsible to verify weight. If BMI is over 35 at one-day visit to ORM, it may cause delay or cancellation of match.)
- OB/GYN provider clearance to be pregnant within 1 year of review. ORM's OB clearance form is strongly recommended but not required.
- If last pregnancy was more than 3 years ago, the GC will need Annual Exam and OB/GYN clearance to be considered for review.
- At least one uncomplicated term delivery with full medical records from the most recent 2 pregnancies and deliveries if possible (and any complicated past pregnancies)
- Ideally, <4 previous cesarean sections and <6 total previous deliveries
- >12 months from delivery to transfer for twins or cesarean section
- >9 months from delivery to transfer for normal singleton vaginal birth
- >3 months from last tobacco, vaping, or marijuana to transfer (*ORM will test for this*)
- If significant past Mental Health issue (e.g. *suicide attempt, eating disorder...*) or active issue (e.g. *takes situational anxiety medicine...*), written clearance from OBGYN provider
- Past failed fertility treatments (or endometrium <7mm, etc.) requires full IVF records for RE approval

### Significant past complication in pregnancy requires RE or possible MFM approval. May include:

- Hypertensive (*Severe Preeclampsia, Eclampsia, H.E.L.L.P. syndrome, DIC, fetal death, etc.*)
- Fetal problem (*IUGR, abruption, vasa or placenta previa, preterm delivery in last pregnancy, etc.*)
- Metabolic: Gestational Diabetes requiring medication, platelets <150, Hyperemesis requiring hospitalization, cholestasis, etc.
- Recurrent pregnancy loss (*3 or more SABs or biochemical pregnancies*)
- Mullerian anomaly/ history of major uterine surgery
- Known abnormal antibody screen known to have significant risk to baby
- Developmental disorder or birth defect in previous own child - Agency must share with IP our legal statement written by our genetics counselors about small increased risk

### Medical history of the following requires RE or possible MFM approval:

- History of significant Cardiac, Liver, Kidney, Neuro, Neuromuscular, Endocrine, Hematological, Respiratory or Immunological disease
- h/o Deep vein thrombosis or Pulmonary embolus
- h/o Seizures or Stroke
- Chronic Hypertension
- Unmanaged/untreated CIN II/III (*cervical dysplasia*)
- Active Chronic Pain requiring narcotics
- Bariatric surgery or Urethral Bladder Sling
- Two or more excisional cervical procedures (*Two LEEPs, one LEEP + one cone biopsy*)
- Cancer diagnosis
- History of IV drug or alcohol abuse
- Own child or children with autism

### At the required one day visit at ORM Fertility, ORM staff will:

- Test uterine anatomy with saline sonogram (SIS), perform mock embryo transfer, counsel regarding risks (*PARQ discussion*), draw standard blood tests including prenatal panel and infectious disease testing. If GC is on birth control pills the SIS can be scheduled anytime during the cycle as long as she is not actively bleeding, we are moving away from scheduling only days 6-11

**The psychological evaluation must follow ASRM guidelines and be performed by an appropriately credentialed professional who has experience with gestational surrogacy.**