



**Vice President and Chief Executive Officer of the Medical Center**

**MEDICAL CENTER POLICY NO. 0046**

A. SUBJECT: Child Placement for Adoption

B. EFFECTIVE DATE: October 1, 2013 (Rvd)

C. POLICY:

The University of Virginia Medical Center coordinates services to birth parents who are placing infants for adoption.

D. DEFINITIONS

Birth Parents are the biological mother of the infant ("birth mother") and the biological father of the infant ("birth father").

E. PROCEDURE:

1. The Labor and Delivery Manager, or designee, shall determine upon the birth mother's admission, or as soon as possible thereafter:
  - a. whether there is an adoption plan on file in the patient's prenatal chart;
  - b. the intended custody of the child upon release from the Medical Center;
  - c. the birth mother's request for Restriction of Patient Information in the Inpatient Hospital Directory. Any such request shall be communicated to the Bed Center Coordinator (243-9931). (See [Medical Center Policy No. 0150 "Requests for Restriction of Patient Information"](#).)
  - d. notification of the Admissions Manager if the baby is to be registered as "Baby Doe" following birth.
2. The Labor and Delivery Manager, or designee, shall immediately notify the perinatal services social worker (or on-call social worker), the Manager of Admissions, and the birth certificate registrar of any situation in which the birth parent intends to place the infant for adoption.
3. When the birth parent(s) intend to place an infant for adoption, the infant shall be released only to one of the following:
  - a. the birth mother;

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- b. the birth father, if the birth parents are married;
- c. the birth father, if the parents are not married, the birth mother has signed a statement acknowledging the identity of the birth father, and the birth mother has signed an *Authorization to Release Infant* to the birth father;
- d. a licensed child-placing agency that has provided a copy of an entrustment agreement or a court order documents its authority;
- e. the prospective adoptive parent(s), if:
  - i. the birth mother and, if the birth parents are married, the birth father have completed the *Authorization to Release Infant* form;
  - ii. the birth mother and, if the birth parents are married, the birth father have been offered assistance in contacting an attorney;
  - iii. the adoptive parent(s) are represented by an agency or an attorney;
  - iv. a licensed child-placing agency is conducting or has conducted a home study.
- f. the prospective adoptive parents upon presentation of a court order conferring legal guardianship;
- g. other person authorized by law to receive the infant upon proof of such authority.

The Department of Social Work shall determine the appropriateness of the release of the infant to any of the above-listed individuals.

4. Birth parents may reconsider the decision to place an infant for adoption through the time of discharge.
5. Prospective adoptive parent(s) may receive information regarding the infant prior to the date of discharge if a birth parent(s) signs an *Authorization to Release Protected Health Information*.
6. Visitation by the birth father and the prospective adoptive parent(s) shall be permitted in accordance with [Medical Center Policy No. 0050 "Patient Visitation"](#).
7. Medical decision-making for the infant shall be governed by [Medical Center Policy No. 0024 "Informed Decision-making"](#).
8. The Department of Social Work shall be responsible for conducting all necessary verifications of authority and for making appropriate contacts with agencies.
9. Charges for the admission resulting in the birth of an infant who is placed for adoption and for the hospital stay of the infant are the financial responsibility of the birth parent(s) unless documentation of transfer of this responsibility is provided.

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SIGNATURE:

  
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R. Edward Howell, CEO, UVA Medical Center

DATE:

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9/24/13

Medical Center Policy No. 0046 (Rvd)

Approved December 1986

Revised August 1990, September 1993, May 1996, June 1999, September 2001, June 2004, September 2007

Reviewed September 2010, September 2013

Approved by Associate Vice President for Hospital and Clinics Operations

Approved by Medical Center Administration