

**§2769. Contact preference and medical history forms**

The State Registrar of Vital Statistics shall provide upon request each birth parent a contact preference form and a medical history form as described in this section. [PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

**1. Definitions.** As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. "Adoptee" means the person who is the subject of a birth certificate. [PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

B. "Birth parent" means the person who is the biological parent of an adoptee and who is named as the parent on the original birth certificate of the adoptee. [PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

C. "Contact preference form" means the form developed by the state registrar pursuant to subsection 3. [PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

D. "Medical history form" means the form developed by the state registrar pursuant to subsection 2. [PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

E. "State registrar" means State Registrar of Vital Statistics. [PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

[PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

**2. Medical history form.** The state registrar shall develop and distribute upon request to birth parents a medical history form. A birth parent may use this form to describe the medical history of the birth parent. A birth parent shall fill out a medical history form if that birth parent fills out a contact preference form.

[PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

**3. Contact preference form.** The state registrar shall develop a contact preference form on which a birth parent may state a preference regarding contact by an adoptee. The form must contain the following statements from which the birth parent may choose only one.

A. "I would like to be contacted. I have completed this contact preference form and a medical history form and am filing them with the State Registrar of Vital Statistics." [PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

B. "I would prefer to be contacted only through an intermediary. I have completed this contact preference form and a medical history form and am filing them with the State Registrar of Vital Statistics." [PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

C. "Do not contact me. I may change this preference by filling out another contact preference form. I have completed this contact preference form and a medical history form and am filing them with the State Registrar of Vital Statistics." [PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

[PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

**4. Attachment of forms to birth certificate; treatment.** Upon receipt of a completed contact preference form or medical history form, the state registrar shall attach the completed form to the original birth certificate of the adoptee. A completed contact preference form and medical history form have the same level of confidentiality as the original birth certificate.

[PL 2007, c. 409, §5 (NEW); PL 2007, c. 409, §6 (AFF).]

**5. Forms; rules.** The state registrar shall develop by rule the data elements required for forms as required by this section and may adopt other rules for the administration of this section. Rules adopted pursuant to this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

[PL 2009, c. 601, §23 (AMD).]

SECTION HISTORY

PL 2007, c. 409, §5 (NEW). PL 2007, c. 409, §6 (AFF). PL 2009, c. 601, §23 (AMD).

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