

LIST OF FETAL REMAINS FOR COMMUNAL CREMATION

	Fetal remains of / Case number	Name of medical practitioner / midwife
1		
2		
3		
4		
5		
6		
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10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

Name

Signature

The medical practitioner or midwife involved in the delivery of each fetus identified above must have completed a Medical certificate in respect of fetal remains less than 24 weeks' gestation for each case. The person authorised by the hospital to make an application for cremation should sign above and attach the medical certificates. Fetal remains may be identified by the name of the woman concerned or the hospital case number in cases subject to confidentiality under the Abortion Act 1967.