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14th October 2025

Deputy O'Flynn
Dáil Éireann,
Leinster House
Dublin 2

PQ 49169/25: To ask the Minister for Health to clarify the medical and legal definition of born alive as applied in termination of pregnancy cases; to confirm the point at which a baby is regarded as a living human being entitled to care; and if she will make a statement on the matter.

PQ 49170/25: To ask the Minister for Health the reporting obligations on medical practitioners when a baby is born alive after a termination of pregnancy; if these cases are reported to the coroner, An Garda Síochána, or Tusla; and if she will make a statement on the matter.

PQ 49171/25: To ask the Minister for Health if each of the 12 cases reported in 2022 in which a baby was born alive after a termination of pregnancy complied fully with the Health (Regulation of Termination of Pregnancy) Act 2018 and with Ireland's obligations under the United Nations Convention on the Rights of the Child; and if she will make a statement on the matter.

PQ 49172/25: To ask the Minister for Health the legal rights and protections afforded under Irish law to a child who survives a termination of pregnancy; if there is a statutory obligation to provide full life-sustaining treatment in such cases; and if she will make a statement on the matter.

PQ 49173/25: To ask the Minister for Health the medical protocols in place for the care of a baby born alive after a termination of pregnancy; if neonatal resuscitation and intensive care are mandatory in such cases where there is a prospect of survival; and if she will make a statement on the matter.

PQ 49174/25: To ask the Minister for Health if hospital ethics committees are required to review and oversee all cases in which a baby is born alive after a termination of pregnancy; and if she will make a statement on the matter.

PQ 49176/25: To ask the Minister for Health if medical practitioners who provide termination services are required to undertake training in neonatal care and resuscitation to ensure the preservation of life in the event of a live birth; and if she will make a statement on the matter.

Dear Deputy O'Flynn,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Questions, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position on the various areas and issues you raised.

PQ 49169/25

The World Health Organisation (WHO) defines as live birth as follows: Live birth refers to the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life - e.g. beating of the heart, pulsation of the umbilical cord or definite movement of voluntary muscles - whether or not the umbilical cord has been cut or the placenta is attached. Each product of such a birth is considered live born. This definition is also applied in the Perinatal Mortality National Clinical Audit in Ireland – Annual Reports, which are publicly available online at: <https://www.ucc.ie/en/npec/clinical-audits/perinatalmortalitynationalclinicalaudit/>

PQ 49170/25, PQ 49174/25

Where a Termination of Pregnancy has been carried out in accordance with the Legislation, the death of the fetus or baby is handled through medical and hospital protocols, not the Gardaí or Tusla. In addition, there is no statutory or other requirement whereby hospital ethics committees must review or oversee all cases in which a baby is born with signs of life after a termination of pregnancy.

PQ 49171/25, PQ 49172/25, PQ 49173/25, and 49176/25:

In instances where a baby is born with signs of life following a termination of pregnancy, care is provided in accordance with best clinical practice, with an emphasis on comfort care. Comfort care focuses on preventing and relieving suffering, including assessment and management of pain and other symptoms, while enabling family contact and dignity, and supporting bereavement.

Where a baby is stillborn or dies in the neonatal period, following a termination of pregnancy for fatal fetal anomaly, HSE guidance stipulates that the cause of death should be stated as that directly leading to the death, and also the antecedent causes or conditions which gave rise to this.

Further information on clinical guidelines can be accessed here: <https://www.rcpi.ie/Faculties-Institutes/Institute-of-Obstetricians-and-Gynaecologists/National-Clinical-Guidelines-in-Obstetrics-and-Gynaecology>.

In accordance with the [Coroner's Amendment Act \(2019\)](#) all stillbirths/infant deaths must be reported to the Coroner, even if an antenatal diagnosis is known.

I trust this clarifies the matter.

Yours sincerely,

Davinia O'Donnell, General Manager, National Women and Infants Health Programme