INFORMATION PACKET
FOR USE OF
DONOR SPERM
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Donor Sperm Insemination

Use of donor sperm may be indicated when there is absence of sperm or sperm that is unlikely to fertilize eggs. The success of insemination with thawed frozen donor sperm appears to be lower than the chance of conceiving with fresh sperm.

Shady Grove Fertility maintains working relationships with several national sperm banks that recruit and screen donors according to standards established by the American Society for Reproductive Medicine and the American Association of Tissue Banks. The genetic and medical histories of each donor, as reported by the donor, are reviewed and traced back two generations. The donor and his sperm are screened for some, but not all genetic diseases such as sickle cell anemia, Tay-Sachs disease, thalassemia, and for various sexually transmitted diseases, including but not limited to hepatitis, human immunodeficiency virus (HIV), cytomegalovirus, gonorrhea, chlamydia, trichomoniasis, monilia, gardnerella and syphilis. These standards have been established to reduce the risk of transmission of genetic and infectious diseases. However, in spite of these precautions, it is possible for donated sperm to harbor unidentified genetic abnormalities or undetected infections which may be passed on to the resulting child(ren). Infected sperm may also pass on a disease to the woman attempting pregnancy.

Shady Grove Fertility has partnered with Counsyl to offer our patients a genetic disease screening panel that includes over 100 diseases. Many sperm banks test for a much more limited number of diseases. If you elect to do our recommended genetic screening panel, and the results are positive for a disease that your donor has not been screened for, you must set up a consultation with one of the genetic counselors from Counsyl to discuss the implications of the screening results. This phone consultation is free of charge and can be scheduled through Counsyl’s website, www.counsyl.com, for a time/day that is convenient for you.

The risk of major birth defects following use of donor sperm appears to be the same as in the general population. Similarly, there is no apparent increase in the risk of pregnancy complications following donor sperm insemination.

This packet will provide you with information on how to contact a sperm bank and information on how to order donor sperm. **It is your responsibility to contact the sperm bank, select and order the donor sperm of your choice, and ensure its timely delivery to the facilities of Shady Grove Fertility for use in your treatment cycle.**

When use of donor sperm is indicated, it is required that the couple participates in at least one counseling session with one of Shady Grove Fertility’s or other recommended mental health professionals. This may be waived if you have already had counseling with a licensed therapist who specializes in infertility counseling. To use sperm from a known donor, it is required that the designated donor also participates in counseling sessions, both separately and together with the recipient woman/couple. If the designated donor is married or in a significant relationship, his partner must also be involved. The designated donor must be tested according to the standards established by the American Society for Reproductive Medicine and the American Association of Tissue Banks**. His genetic and medical history must be reviewed; he and his sperm must be screened for any relevant genetic diseases as well as for sexually transmissible diseases. These services will be provided and facilitated by the sperm bank. The sperm of the designated donor will only be used for insemination after six months of quarantine if the designated donor again tests negative for the standard panel of sexually transmissible diseases at that time.

By initialing the option for donor sperm and in signing the "Consent To Ovulation Induction, Monitoring And/Or Treatment" or the “Assisted Reproduction: IVF, ICSI, AH, and Embryo Freezing Signature Packet Consent”, you are authorizing Shady Grove Fertility to use donor sperm from a single donor as the sole source of sperm in any one treatment cycle and that, from the moment of insemination, you accept any child(ren) resulting from the procedure of donor sperm insemination as your own. The child(ren) produced as a result of donor sperm insemination is/are considered, in all respects, your child(ren). Financial responsibility for the pregnancy, any pregnancy complications and the child(ren) resulting from donor sperm insemination with Shady Grove Fertility, is your responsibility.

** HIV I/II, HTLV I/II, Hepatitis B surface antigen, hepatitis C core antibody, syphilis, gonorrhea and chlamydia cultures, CMV IgG and IgM.**
## CRYOBANKS

1. California Cryobank, Los Angeles, CA  
   866-927-9622 (Client Services)  
   [www.cryobank.com](http://www.cryobank.com)

2. Fairfax CryoBank, Fairfax, VA  
   703-698-3976 or 800-338-8407  
   [www.fairfaxcryobank.com](http://www.fairfaxcryobank.com)

3. Xytex Cryo Bank, 
   Augusta and Atlanta, GA  
   800-277-3210  
   [www.xytexinternational.com](http://www.xytexinternational.com)

   Seattle, WA  
   206-588-1484  
   [www.seattlespermbankusa.com](http://www.seattlespermbankusa.com)

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**Note:**

Shady Grove Fertility provides this list for your convenience; we do not endorse any cryobank, and we are not affiliated with any of the cryobanks. There are other cryobanks that might better fit your needs.

**Important:**

If you will have your IUI in one of our Maryland, Virginia, or DC offices, you **must** use a cryobank that has a Maryland Tissue Bank License. When choosing a cryobank, inquire if they have a Maryland Tissue Bank License before ordering your sperm samples. Your nurse can also provide you with a list of approved cryobanks.
QUESTIONS TO ASK WHEN CHOOSING A CRYOBANK

1. How much does each sample (straw or vial) cost?
2. Do you have non-washed (not prepared for IUI) samples?
3. How often is the donor list updated?
4. How are donors screened? How often?
5. What genetic screening is done on the donors?
6. What is the CMV status of my chosen donor?
7. How many samples from one donor are sent to one geographic area?
8. How many samples from one donor are sent out nationwide?
9. How much does it cost to send the sample to the office?
10. How long are the samples guaranteed to stay frozen in the tank?
11. What is the procedure for returning the sample(s), if not used? Is there a fee for storing the returned samples?
12. What is the charge for returning the tank? How is that arrangement made?
13. How many samples from the chosen donor are currently available? If I/we become pregnant using this donor sample, can I/we buy and store more samples for possible future use?
14. Does the cryobank have a Maryland Tissue Bank License (for patients having IUIs in the Maryland, Virginia, or DC offices)?
### CHOOSING A DONOR BLOOD TYPE

#### POSSIBLE ABO BLOOD GROUPS IN COUPLES AND THEIR CHILDREN:

<table>
<thead>
<tr>
<th>If the couple’s blood types are:</th>
<th>The expected blood group for a child would be:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Possible</strong></td>
</tr>
<tr>
<td>O and O</td>
<td>O</td>
</tr>
<tr>
<td>O or A</td>
<td>O and A</td>
</tr>
<tr>
<td>O or B</td>
<td>O and B</td>
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<tr>
<td>O and AB</td>
<td>A or B</td>
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<tr>
<td>A and A</td>
<td>O or A</td>
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<tr>
<td>A and B</td>
<td>O, A, B or AB</td>
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<tr>
<td>A and AB</td>
<td>A, B, or AB</td>
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<tr>
<td>B and B</td>
<td>O or B</td>
</tr>
<tr>
<td>B and AB</td>
<td>A, B, or AB</td>
</tr>
<tr>
<td>AB and AB</td>
<td>A, B, or AB</td>
</tr>
<tr>
<td>Both Rh -</td>
<td><strong>Must be RH -</strong></td>
</tr>
</tbody>
</table>

**There** is a 50% to 100% chance of an Rh + child if an Rh + donor is used.

### IF YOU WISH TO SELECT A DONOR BLOOD TYPE THAT WILL MATCH YOUR PARTNER’S:

<table>
<thead>
<tr>
<th>If the couples blood types are:</th>
<th>The donor’s blood type may be:</th>
</tr>
</thead>
<tbody>
<tr>
<td>A and A</td>
<td>A or O</td>
</tr>
<tr>
<td>A and B</td>
<td>A, B or O</td>
</tr>
<tr>
<td>A and O</td>
<td>A or O</td>
</tr>
<tr>
<td>B and B</td>
<td>B or O</td>
</tr>
<tr>
<td>B and O</td>
<td>B or O</td>
</tr>
<tr>
<td>O and O</td>
<td>Must be O</td>
</tr>
</tbody>
</table>

If the recipient is AB and her partner is:  

<table>
<thead>
<tr>
<th>The donor may be:</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
</tr>
<tr>
<td>B</td>
</tr>
<tr>
<td>O</td>
</tr>
<tr>
<td>AB</td>
</tr>
</tbody>
</table>

If her partner is AB and the recipient is:  

<table>
<thead>
<tr>
<th>The donor should be:</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
</tr>
<tr>
<td>B</td>
</tr>
<tr>
<td>O</td>
</tr>
<tr>
<td>AB</td>
</tr>
</tbody>
</table>

* Blood type A or blood type B could be used. However, if both the donor and recipient contribute the gene for the blood type O to the child, the child will have blood type O. This outcome would not be possible with a partner who has blood type AB.
HOW TO ORDER SPERM SAMPLES FROM A CRYOBANK

1. The cryobank that you have chosen will provide you with the information needed to order your specimens. Please let your nurse know which cryobank you have chosen. Once your specimen arrives here, it will be kept frozen in our lab until needed.

2. Call your nurse when menses starts on day 1 or 2 of your cycle.

3. When you know the date that the specimen is needed, call the cryobank and place the order in your name. Patient safety requires that the donor sperm be ordered in the name of the patient having the actual insemination. Give the cryobank our office address, and hours of operation:
   - Sample should be in the SGF office 5-7 days before your projected insemination date.
   - For additional information on shipping your specimen, please contact one of the Andrology Departments below:

<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Towson, Bel Air, &amp; Baltimore Harbor</td>
<td>9601 Blackwell Road Suite 500, Rockville, MD 20850</td>
<td>301-340-1188</td>
</tr>
<tr>
<td>Chesterbrook, Reading, &amp; Bala Cynwyd</td>
<td>901 Dulaney Valley Rd. Suite 100, Towson, MD 21204</td>
<td>410-512-8300</td>
</tr>
<tr>
<td></td>
<td>945 Chesterbrook Blvd. Wayne, PA 19087</td>
<td>610-981-6000</td>
</tr>
</tbody>
</table>

Monday-Friday, 8:30 am – 3:00 pm, excluding holidays

4. The bank will bill you directly for the order; or ask for your credit card number.

5. The cryobank needs to provide Shady Grove Fertility with a return mailing slip so the tank can be returned to them.

6. ICI vs. IUI-Ready?
   “ICI” refers to “intracervical insemination.” For intrauterine insemination using ICI specimens, further processing is recommended, to remove the freezing agents, as well as any non-motile sperm and round cells. A sperm wash is performed at Shady Grove Fertility that morning, prior to the insemination.

   “IUI-ready” donor semen has been prepared by washing the fresh ejaculate specimen to remove seminal plasma contents prior to freezing. The specimens are resuspended and frozen in a buffer solution.

   If you purchase ICI (unwashed) sperm, it is washed by Shady Grove Fertility prior to insemination. However, you may purchase and use IUI-ready sperm and Shady Grove Fertility will thaw, analyze, and use the specimen for your insemination without washing the specimen here. The cost of preparing the IUI-ready specimen remains the same as the cost to prepare the ICI specimen.
Helpful Tips for Ordering Your Specimen

- Your donor specimen should be reserved with your cryo bank before you call with day 1 of your treatment cycle.

- You will need 2 vials for each IUI or IVF cycle. We ask that you ship no more than 2 vials to us at one time.

- Your donor specimen can be stored in the Rockville, Towson, or Chesterbrook office for 90 days with no charge to you. After 90 days there will be a storage fee.

- Once your sample is received in the Rockville, Towson, or Chesterbrook office, your IUI procedure will be done in the Rockville, Towson, or Chesterbrook office as we cannot transport samples between offices.

- When calling your nurse with cycle day 1 to set up your premed appointment, your nurse can calculate the approximate date of the IUI. Once this is determined, if it falls Monday through Friday, you can have your sample delivered to your home office for the IUI (**see Exceptions below**). If your IUI day falls on a Saturday, Sunday, or holiday, then your IUI must be done in either Rockville, Annandale, Towson, or Chesterbrook as the satellite offices do not perform IUIs on weekends or holidays.

  - If you require 2 IUIs on consecutive days and your 1st IUI is on a Friday at your home satellite office, you will need to pick up your tank with the donor specimen for your Saturday IUI and deliver it to the office where you will have your Saturday IUI (Rockville, Annandale, Towson, or Chesterbrook).

  - **Exceptions**
    - All IUIs using donor sperm for Bel Air or Baltimore Harbor patients will be done at the Towson office.
    - All IUIs using donor sperm for the Bala Cynwyd or Reading patients will be done in the Chesterbrook office.
TYPICAL CYCLE TIMELINE

1. Discuss your cycle protocol with your nurse.

2. Call your nurse with day 1 of your period. Depending on your protocol you may need to come in for day 3 bloodwork and/or ultrasound.

3. Decide on delivery date for semen sample(s); patient to order sample(s).

4. If using the ovulation predictor kit, start LH testing on date determined by nurse; test between 12 noon & 3 pm.

5. Repeat ultrasound and bloodwork may be ordered by the physician.

6. Call the nurse when you have a positive LH surge, to schedule IUI(s).

7. IUI (1 or 2), as recommended by your physician.

8. Start Prometrium, one capsule (200 mg) vaginally twice a day the day after your IUI(s).

9. Blood pregnancy test two weeks after the IUI(s).

(1 or 2 IUIs may be recommended. Discuss with your physician how many IUIs are recommended prior to purchasing your donor sperm vials. You will need 1 vial of donor sperm for 1 IUI or two vials of donor sperm for 2 IUIs)
Donor Oocyte, Sperm, and Gestational Surrogacy Program

Psychosocial Evaluation and Counseling

Patient Information

We believe psychosocial assessment and counseling are a beneficial part of medical treatment at the Shady Grove Fertility Centers and are required of all participants when a third party is involved in the reproductive process (e.g., donor sperm, donor egg, and host-gestational surrogacy). This is in keeping with the recommendations and guidelines for third-party reproduction of the American Society of Reproductive Medicine and its Mental Health Professional Group.

The goals of psychosocial assessment and psychoeducational counseling are:

- **To address issues related to the impact of treatment and the psychosocial implications of third party reproduction.**
- **To establish a working relationship in which any anticipated or unanticipated problems can be addressed or resolved.**
- **To identify any conflicts or issues among any of the participants.**
- **To evaluate unresolved conflicts or major psychological issues that could be a significant impediment to a positive outcome.**
- **To be available to provide ongoing support and counseling, if desired.**

The evaluation involves clinical interviews with a member from our team of highly trained infertility mental health professionals who serve as staff consultants. In addition, psychological testing is required of all ovum donors, known or identified gamete donors, and host-surrogates in the gestational carrier program. In other clinical situations, psychological testing or additional counseling sessions may be recommended by the mental health professional when additional assessment information is deemed necessary.

The psychosocial assessment is the first step to be undertaken after the initial consultation with your physician. The process must be completed before the commencement of medical procedures and the medical team will make all decisions regarding participation in any of the Programs. Every attempt will be made on our part to make the process as efficient and accommodating as possible, and we ask your cooperation to assist us. Thus, if you need to cancel or make any changes to your scheduled appointment, please contact your counselor directly as soon as possible.

*There is a separate Psychosocial Evaluation Fee Information sheet. If you have not received one with this packet, please ask your primary nurse for this important information sheet.*

2-08
Cytomegalovirus (CMV)

CMV, or cytomegalovirus, is a common virus that infects people of all ages. Once CMV is in a person’s body, it stays there for life. Most infections with CMV are “silent”, meaning most people who are infected with CMV have no signs or symptoms. However, CMV can cause disease in unborn babies and in people with a weakened immune system. If a woman who has never had CMV becomes infected with the virus during pregnancy, the child is at risk for developing severe medical problems, such as mental retardation, deafness, and seizures. CMV is a member of the herpes virus family, which includes the herpes simplex viruses and the viruses that cause chickenpox (varicella-zoster virus) and infectious mononucleosis (Epstein-Barr virus).

The Food and Drug Administration (FDA) mandates that all anonymous and known directed semen donors be screened for clinical evidence of infectious diseases, and tested serologically for chronic viral infections including CMV. Anonymous and known directed semen donors are ineligible if they test positive in any of the donor screening tests with the exception of CMV. Because the prevalence of CMV infection in the general population is high, and the associated risks are extremely low, it is permissible to inseminate CMV-seropositive women with sperm obtained from CMV-seropositive anonymous donors.

Laboratory testing for antibodies to CMV is performed on all semen donors at an FDA approved cryo bank and repeated at 90 day intervals. Negative results are consistent with no previous infection. If the antibody test is positive, additional testing is performed to determine if the positive antibody test represents a recent or old infection. If there is evidence that the donor has a current infection, the donor is not eligible to donate his sperm. If through periodic testing, it is determined that a donor has become infected, he will be disqualified and any retained vials since his last negative result will be discarded. You should discuss CMV testing and the cryo bank’s specific procedures with the cryo bank you choose for donor sperm.

The American Society of Reproductive Medicine (ASRM) recommends viral screening for CMV for all women receiving treatments involving the use of donor sperm. After review of the FDA and ASRM mandates and recommendations, it is now the policy of SGF to test all women using donor sperm for CMV. Because CMV is so common, insemination with semen from a CMV positive man is permissible when the female is also CMV seropositive. However, SGF does not recommend that a CMV negative female patient use donor sperm from a CMV positive donor.

If you will be using donor sperm and refuse CMV testing, you must read and sign the Request For Treatment Waiving CMV Testing. Please ask your primary nurse for this waiver.

If your test results show you are negative for CMV, and you want to use donor sperm from a donor who has tested positive, you must read and sign the Waiver to Utilize CMV Positive Sperm. Please ask your primary nurse for this waiver.

Please discuss any questions with your physician or primary nurse.
Known Sperm Donor Screening Requirements

For acceptance of known donor sperm by Shady Grove Fertility, the designated donor must be/have been tested in accordance to the standards established by the American Society for Reproductive Medicine, the American Association of Tissue Banks, in adherence to state and federal guidelines established for the use of donor derived human cells and tissue, under the same guidelines as anonymous sperm donors as outlined by the FDA Guidance 21 CFR Part 1271(c).

The chosen accredited cryobank with a valid Maryland State Tissue Bank License will perform the following for the designated known donor:

- Obtain Medical and Genetic History
- Donor Physical Exam
- Donor Risk Factor Questionnaire
- Initial Donor Infectious Disease Blood/Urine Screen for Sexually Transmitted Diseases:
  - HIV I/II, HTLV I/II, Hepatitis B surface antigen, Hepatitis C core antibody, Syphilis, Gonorrhea and Chlamydia cultures, CMV IgG/IgM
- Genetic Blood Screen
- Repeat Donor Infectious Disease Blood/Urine Screen for Sexually Transmitted Diseases, following initial negative screening, medical reassessment and 180 Day quarantine
- Review of all records will be required prior to acceptance of the specimen by Shady Grove Fertility Andrology
Information on Consents and Embryo Options

Consents

Your primary nurse will provide you with the needed waivers and consents as applicable for your review and signature prior to starting your treatment cycle. Please refer to the Instructions for Completing Consents information sheet on completing the consents via eSignature on EngagedMD or in paper form.

Depending on your treatment plan, you will be required to complete one or more of the applicable consents or waivers listed below:

- Waiver for Use of Cryopreserved Sperm Brought from Other Centers
- Receipt of Cryopreserved Sperm from Another Institution
- Consent to Accept Donated Sperm from Anonymous Donor
- Consent to Accept Donated Sperm from Directed or Known Donor
- Request for Treatment Waiving CMV Testing
- Waiver to Utilize CMV Positive Sperm

Embryo Options

Prior to starting your IUI or IVF cycle, you will be required to pre-enroll in Embryo Options which will allow you to pay the annual cryopreservation storage fees on line as applicable. Please refer to the Embryo Options & Cryopreservation Patient Information sheet for more information or log onto the website at www.shadygrovefertility.com/eoenroll.