



Recipients of donor sperm information sheet

In this information sheet, you will find specific information on being the recipient of donor sperm at Repromed.



WHO NEEDS HELP

There are many people who would not be able to have children without the generous help of a sperm donor. The decision to use donated sperm involves many considerations, including potential long term psychological, social, health and legal implications. The donor team at Repromed, including the donor coordinators, doctors, counsellors, nurses and scientists are here to support you through the process and answer any questions you may have.

WHO ARE OUR DONORS

Our donors are amazing people who have decided to donate their sperm to help another individual or couple who want to be parents. They could be personally known to you, or a donor found by the clinic. The optimal age to donate sperm is between 20-40 years of age.

Every sperm donor at Repromed undergoes medical and counselling consultations, as well as screening for genetic disorders and infectious diseases.

WHAT IS INVOLVED

1. Meet our Repromed doctor

One of our Repromed doctors will go through the process of treatments we offer using donated sperm. The doctor will go through your medical history (for both partners where applicable) and perform a physical examination, which will most likely include a transvaginal ultrasound scan.

2. Donor coordinator contact

Following the appointment with the doctor, the donor coordinator will guide you through the process and discuss one/both of the following options:

a. Treatment with a clinic donor:

The Donor coordinator will confirm that you have been placed on the clinic sperm donor wait list; you will be advised of the approximate wait list time, please note the waitlist time is likely to fluctuate. If your circumstances change and you no longer wish to remain on the waitlist, it is very important to inform us either via email or phone.

b. Treatment with a known donor:

You will need to provide the donor coordinator with your known donors details in order to organise donor registration (including donors partner where applicable), initial appointments and a semen analysis.

3. First visit with our counsellors

Our counsellors will support you through the process and discuss in detail the Human Assisted Reproductive Technology (HART) Act 2004, which governs fertility treatment in New Zealand. Counselling is mandatory under the HART Act.

The Act and guidelines state counsellors are required to demonstrate that the potential donors and recipients have discussed and understand a range of topics pertinent to the welfare of the potential child, the donor, the recipient and any existing children in families.

If you are in a long term live-in relationship, your partner will also need to be involved in counselling and agreeable to all aspects of the donation. Some donor arrangements require approval from the Ethics Committee on Assisted Reproductive Technology (ECART) and the counsellors will inform and guide you through this process if necessary. Repromed counsellors are ANZICA approved (Australian and New Zealand Infertility Counsellors Association).

4. Complete consent forms and questionnaires

To ensure understanding of the donation process and implications for the future, those embarking on donor sperm treatment must fully understand and sign consent forms relating to the medical procedures and the donation process. There are two types of sperm donor arrangements at Repromed:

- a. Use of a clinic donor, or recruited donor who donates their sperm to a recipient who is not known to either party.
- b. Use of a known or personal donor, where the sperm donor is a friend, relative or acquaintance.

You, and your partner (where applicable) will be required to complete the following consent forms and questionnaires prior to treatment with donor sperm:

- Contract of care.
- Personal health questionnaires.
- Sperm recipient consent with IUI, or Sperm recipient consent with IVF/ICSI.
- Treatment summary (a new one for every treatment cycle).

5. Complete genetic testing

Genetic testing helps reduce the chance of passing on certain inherited conditions to children conceived using donor sperm. Many people are carriers of genetic conditions without knowing it, so this testing is an important part of keeping future donor conceived children as healthy as possible.

The test itself is simple and non-invasive. It's done using a mouth (saliva) swab at the clinic, and results usually take around 4–6 weeks to come back. If you're based outside Auckland, the clinic can provide a treatment request form and arrange for a test kit to be sent directly to you from our genetic testing company called VCGS in Australia.

All required genetic testing must be completed and results received before you can book on for your first treatment cycle. The testing required depends on whether you are using a clinic donor or a known donor, as outlined below.

Using a clinic donor

If you are using a clinic donor, genetic testing is mandatory. This is because you and the donor do not know each other, and testing helps Repromed ensure there is no increased risk of passing on inherited conditions to a donor-conceived child.

Both you and the donor will undergo a saliva swab. The genetic tests are analysed together as a “reproductive couple” and screened for over 1,000 genes covering around 750 genetic conditions.

The results are sent to your doctor and reported as either low risk or high risk. If a high-risk result is identified for any genetic condition, you will be able to choose a different donor and repeat the testing at no additional cost.

Using a known donor

If you are using a known donor, you can choose to have genetic testing or not based on your personal assessment of the risk and cost in consultation with your fertility doctor. Please consult the fee schedule on our website for costs. The clinic offers several testing options, which you can discuss with our donor team or fertility doctor to decide what level of risk feels right for you.

You may choose one of the following three options:

a. Testing for the three most common or serious inherited defects (called Prepair 3)

You will complete this test first, and the result is provided directly to you. If you are found to be a genetic carrier for any of these three conditions, my donor would then be tested as well.

- Spinal Muscular Atrophy (SMA)
- Cystic Fibrosis (CF)
- Fragile X syndrome

b. Testing for an extensive panel of genes and genetic condition (called Prepair 1000)

It is important to know that most people can be carriers for several genetic errors that have no impact on their health, and it is only when they are matched with someone who has exactly the same defect, that we need to be concerned about the health of resulting child. For this reason, we offer one of the most extensive tests available for recipients to consider as additional peace of mind. This is a comprehensive test that screens over 1,000 genes for around 750 conditions, including SMA (Spinal Muscular Atrophy), CF (Cystic Fibrosis) and Fragile X syndrome.

For this test, both you and your donor will need to supply a saliva swab, and results are reported together



as a couple. The report shows whether a future child would be at low or high risk of inheriting a particular condition. If a high-risk result is identified, your doctor will talk this through with you and explain the next steps.

c. Testing for the minimum requirement only - Cystic Fibrosis (CF)

The final option and minimum requirement for your donor only, is a blood test for Cystic Fibrosis.

6. Choosing a clinic donor (if not using a known donor)

When you reach the top of the clinic donor waiting list, the donor coordinator will contact you to arrange viewing of the available donor profiles. While donor sperm is a relatively scarce resource for some ethnicities, Repromed aims to provide recipients with 2-4 choices if possible.

Each donor is identified as a unique number and this is referred to during selection and throughout your treatment including consent forms. The profiles have been written by the donors themselves and include non-identifying information about their appearance, family, education, occupation and interests.

Viewing of non-identifying profiles is undertaken at Repromed with our counsellors. The profiles stay on the premises without replication. You may take up to seven days to make your decision about which donor you wish to proceed with. The donor coordinator will then send you a letter confirming your choice of donor. If for any reason you are not ready to choose a clinic sperm donor profile after reaching the top of the waiting list, you can be placed 'on hold' for up to 6 months. If you indicate within that 6 month period that you are ready, we will be able to show available clinic donor profiles within 3-6 months of this date. If you have not made contact in 6 months, you will return to the bottom of the waiting list.

7. Start treatment

Donor Insemination (DI) involves carefully timed insemination with donor sperm. Alternatively treatment may involve using In Vitro Fertilisation (IVF) to collect your eggs. The donor sperm will be thawed on the day of egg collection and used to fertilise the eggs. Suitable embryos will either be transferred into your uterus fresh during the same cycle or frozen to transfer at another time. The Journey Planner will explain how your menstrual cycle is monitored by our Repromed staff to ensure that the appropriate time is scheduled for your insemination/embryo transfer. Please refer to the journey planner for a full explanation of these processes.

WHAT THE LAW SAYS

The Human Assisted Reproductive Technology (HART) Act 2004 provides a framework for regulating assisted reproductive procedures. The relevant details about donor egg is provided below:

- Donors must be a minimum age of 18 years.
- The intended parent/s are the legal parent/s, and therefore the donor has no rights or responsibilities (including child support) to the child/children born as a result of their donation.
- The status of Children Amendment Act 2004 covers the legal issues associated with donor treatment.
- In New Zealand, a child born from the use of donated eggs is, on reaching the age of 18 years, entitled to full identifying information on the donor.
- Once a child is born as a result of sperm donation, the donor coordinator contacts the intended parent/s for information related to the child's birth. The recording of the birth is governed by the HART Act 2004 (Human Assisted Reproductive Technology), where details about the birth, the parents of the child, and the donor must be recorded on a central register which is maintained by the Department of Internal Affairs, Births, Deaths and Marriages



CLINIC VERSES KNOWN DONORS

Both types of donor arrangements require a similar amount of planning and minimum of two counselling sessions for the recipient.

Known donor arrangements require a counselling session between the donor and the recipients to ensure that all parties have given adequate consideration to their future relationships with the potential child and one another.

Clinic donor's identifying information is protected and confidential. If however, both the donor and recipient express interest in information sharing and/or meeting, this can be facilitated through our clinic counsellors.

Overall, it is essential that all sperm donors agree to be identifiable to any resulting children seeking contact when they reach 18 years.

Three months after the donor's last banking appointment, they will be required to have one more blood test for HIV, Hepatitis B, Hepatitis C and Syphilis to release the samples from quarantine. The quarantine period covers the small risk that viruses may be undetectable in the first test if the donor had been in the early stages of exposure to these viruses at that time.

MANAGEMENT OF FROZEN SPERM FOR INTENDED PARENT/S OF CLINIC DONORS

Repromed has a policy of allowing up to 5 families and a maximum of 10 children for each clinic sperm donor. To achieve this, we ask donors to complete at least 6 sperm bankings. Note: Intended parent/s of clinic donors are not required to pay annual storage of sperm.

MANAGEMENT OF FROZEN EMBRYO/S FOR INTENDED PARENT/S OF KNOWN DONOR SPERM

Once created, the embryo/s belong to you as the intended parent/s. The ongoing storage, use or disposal of the frozen sperm from known donors, is the responsibility of you as the intended parent/s, therefore it is essential that Repromed is kept informed of any changes in your contact details. You will receive an annual Repromed invoice for storage of embryos (please refer to the costs sheet on our website for details).

COSTS

The fee schedule for appointments and treatments is available on the Repromed website and provided as part of your journey planner pack of information at your first clinic visit. When the appropriate treatment has been decided, our staff are available to discuss the costs in detail with you. You may choose to do this before you make your decision, when raising questions regarding your treatment, or at any later date. Note that the treatment fee schedule is updated annually on the 31st March and subject to change.

Please read this information in conjunction with your Repromed journey planner. The consent forms that you will be signing refer to this information sheet and the journey planner and you will be asked to sign that you have read and understood this information when signing the consents forms.

GOOD TO KNOW

The donor non-identifying information is provided in hard copy to the intended parent/s at 21 weeks gestation.

DONOR SCREENING REQUIRED

There are a number of tests that donors undergo to ensure you have the highest possible chance of having a healthy child that is not at risk of any illness or disease. Below are the tests that sperm donors will have carried out:

Blood test for:

- HIV
- Hepatitis B and Hepatitis C
- VDRL (Syphilis)
- CMV IgG/IgM (cytomegalovirus)
- Karyotyping
- Blood Group and Rh Factor
- Full blood count
- HTLV I and II

One urine test for:

- Chlamydia
- Gonorrhoea