



Information About Egg Donation for Intended Parents

A Helpful Guide for International and Out-of-State Recipients

At Fertility Physicians of Northern California it is our mission to help people become parents and we take great pride in our experience providing advanced reproductive health care services to people from all over the world. Our total focus is on helping you realize your dream of having a healthy child. We have helped thousands of people become parents and would be honored to help you make your dream of having a healthy baby come true. Please count on us to help you through every step of the process and know that our goal is to make your fertility treatment as comfortable, safe, and successful as possible.

Founded in 1984, Fertility Physicians of Northern California (FPNC) offers the full range of medical solutions patients need to start a family, from simple drug therapy to advanced procedures such as in vitro fertilization and pre-implantation genetic diagnosis. Our physicians are all specialists in reproductive endocrinology, infertility and obstetrics and gynecology, providing the most advanced training and education in the treatment of infertility, endometriosis, miscarriage and other reproductive disorders. Our clinical, nursing and laboratory staff is also composed of highly trained experts.

FPNC understands how complex the process of egg donation can seem. In order to help you, we have a dedicated team of medical professionals to assist you through the donor selection process as well as the legal and medical requirements. We have been facilitating egg donation for our patients since 1990, working extensively with anonymous and known donors. We also have an in-house registry of egg donors who are local to San Jose and surrounding cities in the San Francisco Bay Area. Federal Laws and Medical guidelines are carefully followed at FPNC to ensure privacy and well-being for everyone involved.

Traveling to California for an Egg Donation IVF Cycle

Recipients who do not live in the San Francisco Bay Area will be required to travel to Fertility Physicians of Northern California (FPNC) at two different times in order to complete an IVF cycle with eggs donated by an egg donor:

1. Initial consultation and completion of testing before the cycle is started (1 - 2 days)
2. Lining check and embryo transfer, which will require a prolonged visit (7 -10 days)

There are some evaluations that must be performed by FPNC at your first appointment.

- A. Consultation with an FPNC Physician (Female and Male Partner)
- B. Physical Examination (Female Partner)
- C. Uterine Sounding/Cath Check (Female Partner)
- D. Injection Training (Female Partner)
- E. Semen Analysis (Male Partner)
- F. Cycle Review Consultation (Female and Male Partner)
- G. Psychological Consultation (Female and Male Partner)

Please contact a member of our Egg Donor Program Team to schedule your initial consultation and discuss the logistics of your fertility treatment at FPNC. They will ensure that all necessary evaluations are scheduled consecutively on the same day, to minimize the time you are required to stay in San Jose, CA. The toll-free number is 1 - (800) 597 - 2234.

In the best interest of patient convenience, we will allow recipient patients (female and/or male partner), who do not live near our offices, to have some preliminary testing performed by their own local physician in their home city, state or country, prior to their initial consultation at FPNC. A list of these evaluations may be provided to you or to your physician upon request. It is important that FPNC receives your medical records and any results of testing performed by your local physician one week prior to your initial consultation. At the initial appointment, FPNC will perform or repeat any tests or evaluations, of which results are not available for review at that time. All test results must be current within one year of the embryo transfer. If any test results expire prior to embryo transfer, they will need to be repeated by FPNC.

FPNC works with pharmacies which will ship your cycle medications directly to you, even if you live outside of the country. Alternatively, you may wish to have your local physician transcribe the prescriptions written by FPNC so that you may purchase your medications through your preferred pharmacist. You will be given prescriptions for cycle medications at your initial visit.

If it is anticipated that the male recipient partner may be unable to make a second prolonged trip to FPNC for IVF and Embryo Transfer, a semen sample may be frozen at FPNC during the initial visit. However, the results of the semen evaluations must be acceptable for IVF in order for the frozen specimen to be used, so this option can not be guaranteed until the results become available and are determined favorable after the initial visit. FPNC can not accept frozen semen samples from outside of the Country.

Who becomes parents through egg donation?

One of the most exciting and significant advances in reproductive medicine has been the introduction of egg donation. Egg donation is a type of in vitro fertilization that allows a woman to bear children, even if she is experiencing infertility due to a low number or low quality of eggs. Egg donation was originally developed for women who had experienced menopause (complete depletion of eggs) or for women who were born without functioning ovaries. Today, egg donation is most commonly used by women who are experiencing age-related infertility.



To better understand why egg donation is a successful treatment for age-related infertility, it is helpful to review the natural process of reproductive aging. As you may know, a woman is born with all the eggs she will ever have. Each month, nearly 1000 eggs will die off for every one which will ovulate. As women get older, they will often continue to ovulate regularly, but the quality of the egg that is released will, on average, not be as good as the quality of the egg that is released by a younger woman. An egg which is released by an older woman will be more likely to contain the wrong number of chromosomes. If such an egg is fertilized, it will often become an embryo which does not develop or which miscarries. This is why women may experience significantly reduced fertility even 10-15 years before their menopause, despite regular ovulation. Since this is not a well-known fact, many couples have planned their lives and careers based on the mistaken belief that their fertility will remain high well into their forties. Ultimately, the egg supply reaches zero and menopause occurs.

Although age-related infertility or menopause are the most common reasons for considering egg donation, the treatment may be considered in other circumstances. For example, some women carry a genetic disease which they want to avoid passing on to their offspring. Other people consider using egg donation because of lack of success with other forms of infertility treatment.



It is strongly recommended that the woman who will be the mother of the child (the “recipient” of the eggs) be no older than 50 years of age at the time of embryo transfer. There should also be no medical or other contraindications to pregnancy. A medical clearance letter from the recipient’s primary care physician is required if she has any pre-existing health conditions that could potentially complicate a pregnancy and if she will be 45 years of age or older at the time of embryo transfer.

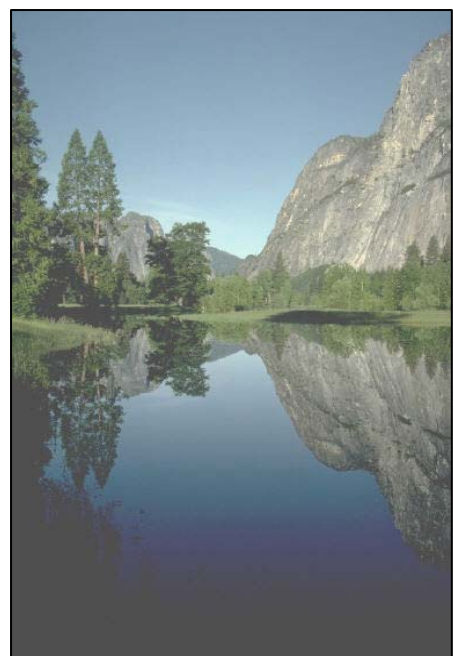
What are the basic medical procedures involved with egg donation?

The chance of success with egg donation is much greater if multiple eggs are retrieved. Therefore, the egg donor undergoes treatment with fertility drug injections (gonadotropins). During this time, the development of the follicles is monitored by ultrasound and blood tests for estradiol. If the donor lives outside of this geographic area, it is often possible to have some of this monitoring done by an experienced physician close to the donor’s home. When the follicles are mature, the donor receives an injection of human chorionic gonadotropin (hCG) and the eggs are retrieved 35 hours later. Most commonly, the eggs are fertilized using the sperm of the recipient’s partner. Donor sperm is used if the recipient does not have a male partner or if her partner does not produce sperm.

It is extremely important to coordinate the development of the eggs and embryos with the development of the uterine lining. The embryos will only implant if transferred during a window of time after appropriate exposure to estrogen and then progesterone. Therefore, the hormones estrogen and progesterone are prescribed in a timeframe that is synchronized with the development of the eggs. While the donor is taking fertility medications, the recipient will take estrogen tablets to prepare her uterine lining for receiving the embryos. Shortly before the embryo transfer, the recipient will begin taking progesterone along with the estrogen in a way that mimics what happens in a natural menstrual cycle.

It is usually recommended that one or two embryos be transferred. This number is carefully discussed with your physician because the biggest risk of assisted reproductive technologies is the risk of multiple pregnancy. You may choose to transfer one embryo to reduce the risk of having a multiple pregnancy; success rates decrease if only one embryo is transferred. If additional viable embryos are created during the cycle, these can be frozen for possible transfer at a later time.

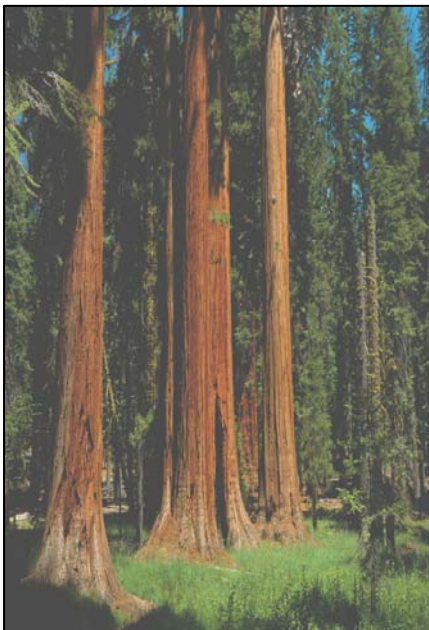
The child is not genetically related to the mother who delivers the child. The child is genetically related to the father, assuming that his sperm was used. Most women who have conceived through egg donation have felt that they have developed a strong maternal bond to the child during the pregnancy. They also appreciate the fact that they have control over pregnancy. Unlike adoption, egg donation allows the birth mother and her partner to be recognized as the legal parents from the beginning.



If a pregnancy develops, it is necessary to take hormone supplementation during the first trimester of the pregnancy. After this time, the pregnancy itself makes sufficient hormones, and no additional hormone supplementation is needed.

How are egg donors and prospective parents matched?

At FPNC, you have the option of selecting a donor from our own registry, finding a donor through an outside agency or asking a friend or a family member to be your donor. Recommendations made by the American Society for Reproductive Medicine (ASRM) are carefully followed to ensure the privacy, safety and well-being of everyone involved. Egg donors must be 21 years of age on the date of oocyte retrieval and must meet the screening requirements for egg donation, which includes a psychological evaluation by a licensed counselor who specializes in third party reproduction. FPNC will work with donors from any agency that has been placed on our list of preferred agencies; this list is available upon request. The agency must adhere to the American Society for Reproductive Medicine Guidelines for Oocyte Donation (available on the web at www.asrm.org) and if FPNC has worked with the agency in the past, the agency must also be in good standing with the practice. We will not work with donors from agencies which are not on our list of preferred agencies or from agencies who are found not to be in compliance with the ASRM guidelines.



Most commonly, couples find an anonymous egg donor with the help of an agency or clinic program that matches prospective parents with donors. For your convenience, Fertility Physicians of Northern California has developed an in-house agency of anonymous egg donors who are local to the Bay Area and have already completed preliminary screening evaluations. We also have donors who live outside of the area and donors who are unscreened. Some couples may also decide to ask a family member (such as a younger sister), niece, cousin, friend or acquaintance to donate eggs as a known donor.

Egg donors are frequently students, young women without children or young mothers who have finished childbearing. Women typically consider donating their eggs for two major reasons: they want to do something that will help another woman or couple and they appreciate the financial compensation that they will receive for their time and effort.

After you have selected a potential donor, the donor will come to FPNC to undergo medical screening. The same screening is done regardless of whether the donor is registered with our internal program, has been recruited by an agency or is a donor known to the recipient. This screening will include a psychological evaluation, review of medical history, physical exam, ultrasound, follicle stimulating hormone (FSH) and estradiol (E2), tests for infectious diseases (HIV, Chlamydia, Gonorrhea, Syphilis, Hepatitis B and C), a toxicology screen (to test for drug use), screening for some genetic diseases, and basic blood tests including a blood count and chemistry panel. Donors who have recently completed a prior cycle may have already had a psychological evaluation, hormone testing, genetic testing and ultrasound, but other screening tests must be repeated by FPNC regardless of when they were last performed. An FPNC physician will determine which testing is necessary at the time of the donor's medical screening appointment. If the results from this medical evaluation are acceptable, the final decision to match the donor with the recipient is made.

What factors do I consider in selecting an egg donor?

One of the most important factors to consider in choosing an egg donor is her age. Success rates will be much higher if a donor is young because the eggs will be of better quality. In general, it is recommended that the donor be age 34 or younger. Donors are frequently under 30 years of age. It is reassuring if a donor has had a prior pregnancy, however many good donors will have never tried to become pregnant. A prior history of pregnancy is therefore not a requirement, but the donor should have no history of infertility herself. A good outcome from a prior donor cycle is also reassuring, but should not be a major determining factor because the sperm and uterus used in each prior cycle will be different than those used in your cycle with the donor. Most couples attempt to match some basic physical characteristics (e.g. race) of the donor with the physical appearance of the woman who will be the mother of the child.

It is not recommended that a woman donate her eggs if she has current marital instability, a chaotic lifestyle, a desperate financial situation, current high stress, high risk sexual practices, or if she has a history of substance abuse and/or legal difficulties. It is also important to review the donor's family history as this information may be valuable to the future health of your child.

Many couples decide that they wish to have a mutually anonymous relationship with their donor. Medical and social history will be available about the donor; otherwise all information about the donor will remain permanently confidential to the recipient couple and to their offspring. The donor will not know any identifying information about the couple. Other couples decide that they wish to have some greater degree of contact with the donor, and the couple would need to look for a donor and an agency who would agree with this approach.

Questions to Ask Outside Agencies

Asking egg donor agencies the following questions may help make your search for a donor more effective.

1. How long has the agency been in business? How many donors has the agency matched with recipients in the last year? How many donors are available at any one time? How many pregnancies and live births have resulted in these cycles?
2. What is the agency's fee for their services? What do you have to pay up front and what do you pay once you have selected a donor? Is the fee refundable if you change your mind about a donor or decide not to proceed with any donors in that agency? What exactly do the fees cover?
3. What is the compensation given to the donor herself? Can she set her own compensation?
4. Does the donor undergo psychological screening before being placed on the prospective donor list? Who performs the screening (the agency or another third party)?
5. Does the agency facilitate a meeting between you and the donor if you desire to meet her? Does the agency provide anonymous donors, identified donors, or both?
6. How long are records kept on anonymous donors? Where are these records maintained?
7. Does the agency adhere to the American Society for Reproductive Medicine Guidelines for Oocyte Donation?
8. What is included in the legal contract that the donor signs? What is included in the legal contract that the recipient couple signs?
9. What kind of medical insurance coverage for the donor does the agency provide, and what are the terms?

What steps are necessary to get treatment started?

Financial Consultation: Before scheduling the appointments and travel for your initial visit, you may wish have a telephone consultation with a Patient Financial Advisor, at no charge to you or to your insurance, to discuss the costs associated with an egg donor cycle. This step is required prior to starting an egg donation cycle, and it is usually the best first step for recipients who are coming to FPNC from outside of the San Francisco Bay Area for fertility treatments. The Patient Financial Advisor will review pricing and payment options with you and make sure all of your financial concerns are addressed. This important meeting will be extremely beneficial to you as you consider your options in finding your donor.

Physician Consultation: At your initial visit, you will meet with an FPNC Physician for an Egg Donation Consultation. This consultation should take place prior to starting your search for an egg donor. Multiple issues relevant to your egg donation cycle will be reviewed, such as your medical and fertility history, medical testing, donor selection, donor screening, success rates, number of embryos to transfer, disposition of frozen embryos and other issues unique to your particular health history.



Cycle Review: Your initial visit will also include a Cycle Review meeting with an FPNC Egg Donor Coordinator, who will discuss the tests that are needed, provide orders for testing, and review the logistics of your cycle including potential treatment dates. The plan for the cycle will not be confirmed until you have selected a donor and she has completed her screening.

History and Physical Examination: You will undergo a complete physical exam to identify any important health concerns at your initial visit, before becoming pregnant. If you are 45 years of age or older, you will also need a medical clearance letter for pregnancy from your local primary health care provider, who may perform their own examination.

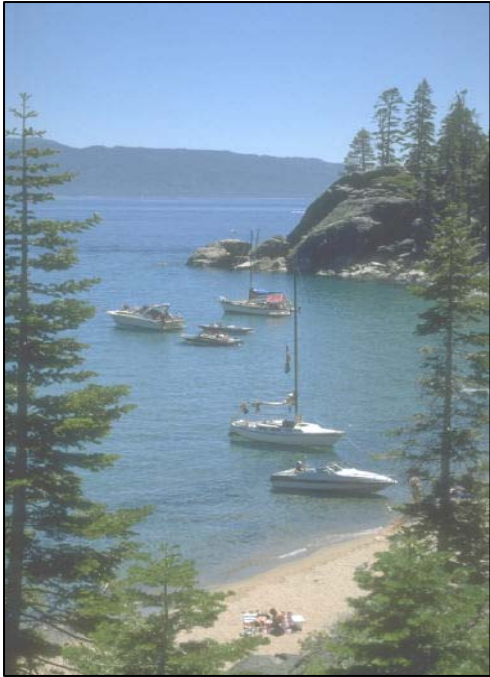
Blood Tests and Cultures: All blood tests and cultures must be current within one year of the anticipated embryo transfer for your egg donation cycle. Necessary updates to these evaluations will be ordered by your Egg Donor Coordinator at your Cycle Review to be performed at you initial visit. Some of these tests may be performed by your local physician.

Uterine Evaluation: If no uterine screening has been done recently, your FPNC Physician require a sonohysterograpghy (SHG). An SHG is an ultrasound procedure performed to determine if the shape of the uterine cavity is normal. It takes less than half an hour to perform, and the results are interpreted upon completion of the examination. A uterine sounding or catheter check will also be performed at the initial visit to ensure the proper placement of the embryos into your uterus during the embryo transfer.

Injection Training: The cycle medications and possible side effects will be discussed with you and your partner. We will teach you how to mix and administer the various medications. You may also wish to arrange an appointment for injection training with your local physician.

Semen Analysis: Semen is always assessed by the Fertility and Reproductive Health Institute (FRHI) laboratory prior to starting a treatment cycle. A fresh semen sample must be collected at the initial visit. The FRHI laboratory will assess sperm count, sperm motility, and sperm morphology to determine the best way to fertilize the eggs. Bacterial cultures will also be performed on the semen specimen. If a bacterial infection is detected, you will be treated with antibiotics to ensure that the eggs and embryos are not exposed to any bacteria during IVF.

Psychologist Consultation: A consultation with a licensed counselor who specializes in egg donation is critically important before beginning your egg donation cycle. You will have an opportunity to address the psychological and emotional issues related to the egg donation process. Your egg donor will also be required to complete a psychological evaluation prior to starting the cycle. FPNC has worked with several counselors in the San Francisco Bay Area who have extensive experience working with couples who are considering egg donation. A meeting with one of these counselors will be arranged by FPNC during your initial visit.



Choosing a Donor: Upon completing your initial visit and required evaluations, you will be able to reserve an FPNC donor for an upcoming cycle or move forward with selecting a donor from an outside agency. FPNC is happy to email you the written profiles of any of our available donors in advance of your initial visit, but pictures of our donors may not be posted on the internet, sent by email, facsimile or mailed to you. You will have the opportunity to meet with a Donor Agency Coordinator and view the pictures of any donors at your initial visit. Once you have selected a donor, you can generally expect the egg retrieval to happen about 4 to 6 months from the time you select your donor. The process can sometimes take longer if it is necessary to work around recipient or donor personal schedules, or if there are any unanticipated issues such as recipient or donor illness, abnormal screening tests, ovarian cysts, uterine polyps, legal disagreements or if the recipient or donor have not completed the required tests and evaluations on time.

Legal Agreement: A legal agreement will need to be signed by you and your donor. It is recommended that you and your donor have separate attorneys to advise you during this process. Egg donor agencies may either provide you with a legal agreement, or refer you to an attorney who can develop one for you. If you are using a donor from FPNC, a legal contract will be provided for you and your donor. It will be recommended, but not required, that you each seek the independent advice of an attorney.

Financial Arrangements: Before your donor can be scheduled for screening in our office, a screening deposit as discussed at your financial consultation must be received by our accounting department. If you will be working with ARC, your donor will be scheduled for her screening appointments after FPNC has received confirmation from ARC that your arrangements have been finalized.

Final Consultation: After your donor is screened by FPNC, the Last Step before beginning the cycle will be to have a telephone consultation with an FPNC physician to discuss all of the screening test results for you and for your donor. You will be asked to submit the remaining balance for the estimated cost of the cycle to our accounting department, if you have not already arranged this with FPNC or with ARC. Finally an Egg Donor Coordinator will confirm the plan for the cycle with you and get your cycle with your donor started.

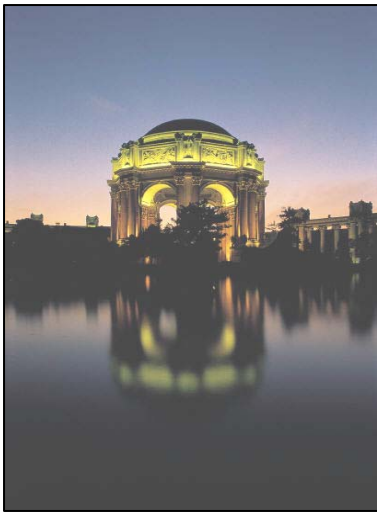


How much does egg donation cost and how can I pay for it?

FPNC and embryology laboratory costs for an egg donation cycle will vary depending on what specifically is needed in your particular case. Fees will usually be in the range of \$12,000-\$15,000. Additional costs include medications, facility fees, program fees, anesthesia, compensation to the donor, agency fees, screening tests, legal fees and donor or recipient travel costs. These fees can vary greatly between different programs and agencies. The total cost of an egg donation cycle can therefore range from \$25,000 to \$50,000.

Each couple meets with a financial counselor at FPNC before beginning treatment. A detailed description of all FPNC and embryology laboratory charges relevant to your particular case is reviewed. Estimates are provided for medical expenses incurred outside of FPNC (such as medications, legal fees and compensation to the donor). The counselor will also help you to determine which parts of your care might be covered by insurance.

Some people wonder if they will be able to afford egg donation. Certainly, the costs are not inconsequential. FPNC is pleased to be part of a new solution for making effective infertility treatment more accessible to more people who want to have a baby.



FPNC is a member of Advanced Reproductive Care (ARC), a national network of reproductive medical specialists. FPNC is pleased to offer our patients a unique and convenient program for infertility care, the ARC Fertility Program™. This program includes individualized package pricing, financing and refund guarantee programs to help our patients more easily manage the financial aspects of fertility treatment.

Through The ARC Fertility Program, you can secure competitive financing for medical services covering any or all aspects of your fertility treatment, from the initial consultation and diagnosis to the assisted reproductive technologies, such as egg donation. For selected treatment plans, you may purchase The ARC Refund Guarantee Plan™, a money back guarantee program on all treatment options if fertility treatment does not result in a live birth.

Learning more about The ARC Fertility Program is easy. Simply contact the ARC toll free at 888-990-2727 or via email at info@ARCfertility.com. You can also visit or call our office for more information about your treatment options and The ARC Fertility Program.

The physicians and staff at FPNC are dedicated to bringing you the most advanced and effective fertility treatment available. We are committed to giving personalized attention to your medical care, working with you to fulfill your dream of parenthood.



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