



Donor Information, Risks and Facts

Choices, LLC

Why ovum donors are needed?

There are a number of reasons to bring an Intended Parent to our agency in their journey for finding an egg donor, most reasons are;

- Premature ovarian failure
- Pre menopausal women with diminished ovarian reserve
- Women of advanced reproductive age who might have already experienced natural menopause
- To avoid transmitting a significant genetic illness for which the woman is known to be a carrier

How to become an Ovum Donor for our agency

- Complete our in-depth questionnaire
- All donors must be between the age of 21 and 32
- Provide recent photo / id
- Pass agency one to one interview

The Questionnaire : The donor will be required to complete an in depth questionnaire which asks about your personal and physical characteristics, educational back ground, social history, obstetrical and gynecologic history, medical and surgical history. This will also include details of their family's history.

9 Important Steps for Egg Donation Cycle

1. Selecting an egg donor
2. Screening the egg donor
3. Sign consents from both the recipient(s) and the egg donor
4. Synchronizing the egg donor and recipient
5. Prescribing hormone replacement for the donor and recipient
6. Stimulating the ovaries of the egg donor
7. Retrieving the eggs from the egg donor non-surgically
8. Inseminating the eggs
9. Transferring of the embryos into the recipient

The Donor

Stimulation

To stimulate the ovaries, Gonadotropins* are injected daily by the donor, so that multiple eggs may be retrieved. * These injections may cause mild bruising and soreness. Allergic reactions are rare.

Monitoring

During stimulation the ovaries are monitored by a combination of transvaginal ultrasound examinations to follow follicular development (number and size) and blood tests for evaluation of hormonal response; this will test your estradiol level.

As the follicles mature these tests may be required daily during the final 4 to 6 days of stimulation. Monitoring is important at this time to be sure that the ovaries are not hyperstimulating.

The Chances of Ovarian Hyperstimulation (OHSS) happening are **5 to 10 %** for mild and about **1 %** for severe OHSS. With mild OHSS this means there may be some discomfort but it almost always resolves without complications. Severe OHSS may result in blood clots, kidney damage, twisting of the ovaries and fluid build up in the abdominal and chest cavity. Severe cases can require up to two weeks of hospitalization for monitoring.

(Please note: The couple that you are matched is required to have Insurance on for the selected donor during the donor cycle. Should hospitalization be required due to OHSS the donor will be compensated for their time during any medical down time.)

Retrieval

Once the doctor is able to determine there are a good number of follicles and they are the right size he will provide the donor with “ what kind of injection?? “ injection. This will trigger the follicles for egg retrieval. **It is vital that the injection is administered at the instructed time.** Once this injection is done, the donor will go to egg retrieval 36 to 38 hours later.

The retrieval of the donor’s eggs is usually performed under general sedation or local anesthesia. It is done transvaginally; where an ultrasound guided needle is passed through the vagina into the ovary**. A follow up visit is required seven to fourteen days following the egg retrieval. Once the follow up appointment made done, then the egg donor cycle is complete.

**This procedure can cause mild to moderate discomfort. Injuries during this procedure are extremely rare. Areas near the ovaries, such as the bowel, blood vessels or bladder, could possibly be injured and require further surgery. There could be some bleeding from the ovaries. Infection is a possibility, but rare. The doctor in charge of the donor cycle will prescribe antibiotics to help decrease the risk of infection.

At the completion of the donor cycle, donors are provided will receive a gift of \$5,000.00.

The Recipient

During the stimulation, monitoring and retrieval process, the recipient is preparing her uterus to accept the potential embryo(s),

Once the eggs are retrieved they are inseminated with the spouses/partners semen in the laboratory, 24 hours later, fertilization is documented. The doctor then determines which 2 embryos are the best grade and transfers them into the recipient's uterus. The embryo transfer is a non-surgical procedure, using a small catheter placed transcervically into the upper uterine cavity. The couple then waits 10 to 14 days for the pregnancy test to find out if the procedure worked.

If you are interested in receiving a donor registration packet please contact us.

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