

# Patient Informed Consent

## Donor Eggs

### INTRODUCTION

We are unable to achieve a successful pregnancy because of the lack of oocytes or eggs, poor quality eggs or the eggs may carry a genetic defect. We desire to attempt to achieve a pregnancy by using eggs donated by another woman for this purpose. We hereby request and authorize the Geisinger Medical Center (“GMC”) and Fertility Center physicians (“Physicians”) and such other assistants as they may designate to perform an in vitro fertilization and embryo transfer procedure (“IVF”) using the eggs of a donor.

In authorizing these procedures we acknowledge that we have had the opportunity to discuss fully with the Physicians the nature and purpose of the procedure, the risks, the alternatives, the risks to the alternatives and that all of our questions have been answered to our satisfaction. Based on our discussions with the Physicians and the written materials explaining the procedure supplied to us, we understand the following concerning IVF using donated eggs.

### NATURE AND PURPOSE OF THE PROCEDURE

1. Preparation and Management -- Hormone treatments will be employed to synchronize the Wife's menstrual cycle with the menstrual cycle of the egg donor and to establish normal endometrial development.
2. Monitoring -- The Wife will be monitored by a combination of physical examinations, blood and urine tests, pelvic ultrasound examinations and endometrial biopsies to observe endometrial development and menstrual cycle synchronization with that of the egg donor.
3. Semen Evaluation -- The Husband will be monitored via the collection of a semen specimen for evaluation and analysis prior to the IVF procedure.
4. Fertilization -- The Husband's sperm will be placed with the donated eggs in culture media to allow for fertilization. If indicated, the egg(s) and sperm may be manipulated under a microscope for purposes of fertilization.
5. Growth and Development -- The fertilized egg(s), if any, will be allowed to grow and develop for 3-5 days prior to transfer to the Wife.
6. Embryo Transfer -- Following fertilization and growth, transferring the fertilized eggs or embryos to the uterus via a small catheter passed through the cervix.

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7. Cryopreservation -- By separate consent, we may choose to freeze (cryopreserve) any extra fertilized eggs or embryos for transfer to the Wife at a later date. A separate consent to this procedure describing the legal, medical and other aspects of this option is required. There is an additional charge for cryopreservation.
8. Monitoring of Implantation -- Multiple blood samples will be drawn to monitor for pregnancy.

### **RISKS OF THE PROCEDURE**

We understand there are no guarantees that the IVF procedure using donated eggs will result in a successful pregnancy or live birth. We have carefully reviewed the risks and complications of the procedure with the Physicians as summarized below:

1. The egg donor will be screened for the purpose of detecting certain conditions or birth defects which may affect the child or children born as a result of the procedure. Not all types of birth defects or medical conditions can be detected by such screening and some defects that are screened for may not be detected. No guarantees have been given to us concerning the certainty of the diagnosis or results of such screening. Between two percent (2%) and four percent (4%) of all births are associated with some birth defects. We accept the risks that using donated eggs may result in the pregnancy and/or birth of a child or children affected with genetic defects or other adverse conditions.
2. The egg donor may not produce any eggs. In addition, some or all of the donated eggs may not fertilize and any donated eggs that may fertilize may not continue to grow and develop. No guarantees have been given to us as to the availability or quality of any donated eggs.
3. The egg donor may not complete or may fail the ovarian stimulation procedures for medical or other reasons. In addition, the donor may withdraw her consent to donate eggs for any reason at any time prior to the time the eggs are used to treat our infertility.
4. The Husband's semen may be unobtainable or inadequate for fertilization of the donated eggs.
5. Operative or laboratory accidents may result in lost or damaged embryos or eggs.
6. Implantation of the fertilized donor eggs following embryo transfer may not occur.

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7. No guarantees have been given to us concerning the effects of the procedure on the Wife's or the Husband's health or on the lives or health of any child conceived or born as a result of the procedure. We accept the risks and consequences of the possibility of infection or transmission of disease which may arise from the use of donated eggs, pregnancy and/or childbirth.
8. If a pregnancy is achieved, all obstetrical and gynecological risks and complications can occur. These include maternal complications of pregnancy, miscarriage, ectopic pregnancy, abnormalities in placental development, stillbirth or birth defects.
9. If pregnancy occurs, there is also the risk of multiple gestation and birth. We understand that of the pregnancies achieved through IVF, approximately 40 percent involve multiple pregnancies. Multiple gestation may present significant risks to the life and health of the mother and the fetuses including pre-term labor and pre-eclampsia.
10. As yet undefined psychological effects may exist for the Wife, the Husband or any child or children born as the result of the procedure or the egg donor.
11. While there is widespread use of donor sperm, there is limited experience in the use of donated eggs to treat infertility. There may be risks and complications to the Wife or fetus or any child born as a result of the procedure which are currently not known.

### **ALTERNATIVES**

The Physicians have reviewed the alternatives to this procedure with us, including the risks and benefits of these alternatives.

### **CONFIDENTIALITY**

We understand that GMC and the Physicians are actively involved in medical education and research. We agree that information concerning our treatment may be used in medical publications provided that our identities or identifying information is not revealed. All procedures carried out under this program will remain confidential between the involved couple and professional personnel.

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