



Thank you for your interest in the egg donation program at Tennessee Reproductive Medicine. We appreciate your willingness to help a couple achieve pregnancy. Your generosity will enrich the lives of another couple tremendously.

Participation in an egg donation treatment cycle requires extensive screening of an individual's medical and family history and psychological evaluation, followed by physical examination and laboratory testing. ***Egg donors must be 32 years old or younger (exceptions may be made for people donating to a friend or an acquaintance). Donors must also have a body mass index of <30 (non-obese).*** If you meet these and all of the other screening requirements, you will then be accepted into our egg donor program. A waiting period may then begin, during which time we will identify recipient couples who may be a suitable match for your eggs. This process may take several weeks to months.

Once you are matched with a recipient couple, you would then begin a treatment cycle consisting of 2-4 weeks of injections and frequent monitoring visits at our clinic. These visits include laboratory and ultrasound evaluations and occur in the early morning each day. Once the eggs have sufficiently developed, you will then undergo an outpatient surgical procedure to retrieve the eggs. After this procedure, your requirements are completed.

It is critical to understand that the treatment cycles involve detailed instructions that are time sensitive, and that monitoring must occur as directed. If you have personal commitments (family, employment or other) which would limit your ability to give injections at the directed times each day or to return for monitoring as directed, we request that you not apply to the program, as this would decrease the chance of success for our recipient couples and is unfair considering the significant investment they are making in this treatment.

In vitro fertilization/egg donation treatment cycles are generally well tolerated by egg donors but do have some risks. Briefly, donors may experience some skin irritation at the site of injections, pelvic discomfort as the ovaries enlarge, risk of over stimulation of the ovaries (hyperstimulation) which in some cases requires hospitalization, risk of the ovaries twisting (ovarian torsion) which could require surgical treatment, and risks of the egg retrieval procedure including bleeding and infection (both of which are uncommon). These will be discussed further with you during your visit.

All of your medical evaluation and treatment will be paid for by the recipient couple. Additionally, you will be compensated for your participation.

Our program is an anonymous donation program; your identity will never be shared with the recipient couple, unless you specify that you would be open to the possibility of being contacted

by the couple or child at some point in the future. If you prefer to remain anonymous, as many donors do, your identity is never shared with the couple.

Please complete the enclosed history form and return it to our clinic. A member of our staff will review the information and contact you to schedule a visit with our physicians if you meet the screening criteria. Not all individuals will meet the rigorous screening requirements; we will notify you if we are unable to accept you into the program based on your screening information. Furthermore, it is important to note that some individuals may meet initial screening criteria but then later be removed from the program based on later test results, psychological screening or stimulation response during treatment. If you are removed from the program prior to ever starting medications, you will not receive the monetary compensation. If your cycle has to be cancelled prior to the egg retrieval, you will receive a portion of the monetary compensation. Donors must complete the entire treatment cycle to receive the full monetary compensation.

Thank you again for your interest, we look forward to working with you and appreciate your altruism and generosity in helping others conceive.

Sincerely,

Jessica Scotchie, MD

Ringland Murray, MD