WAKE FOREST UNIVERSITY HEALTH SCIENCES CENTER FOR REPRODUCTIVE MEDICINE

CONSENT TO SERVE AS EGG DONOR

I (donor patient)	, being between the ages of 18-
34, have been recruited by Xytec Corporat	ion and Dr. Gordon Kuttner (hereafter,
referred to as "third party") to serve as an	egg donor for a recipient patient/couple. I
understand that the Wake Forest Universi	ty Health Sciences Center for Reproductive
Medicine, (hereafter referred to as "Center	") has been requested to perform the egg
retrieval and in vitro fertilization procedu	res as part of my participation in the egg
donation process.	- · · · · · · · · · · · · · · · · · · ·

Procedures

I understand that there are three major steps in egg donation. These steps are outlined below:

1. <u>Screening:</u> Before proceeding with egg donation, I attest that I have undergone a comprehensive physical and psychological examination, including the sampling of blood and other body fluids for the purposes of egg donation. I agree that I have been tested for the human immunodeficiency virus ("HIV"), hepatitis, and any other virus or disease which may be transmitted to an egg.

North Carolina law imposes certain requirements and limitations on those who carry the HIV virus. It is understood that the physician ordering the HIV test is required by law to notify agencies of the State of North Carolina if a person is determined to be HIV positive.

- 2. Ovulation Induction: Stimulation and maturation of multiple egg development by medications. Antagon \mathbb{R} /Lupron \mathbb{R} will be used to prevent the premature release of eggs. Medications used to stimulate multiple egg development, include but are not limited to, Bravelle \mathbb{R} , Follistim \mathbb{R} , and Gonal-F \mathbb{R} . Pregnyl \mathbb{R} or other hCG (human chorionic gonadotropin) products will be used to allow the eggs to go through the final maturation process prior to egg retrieval. The medications are primarily in the form of daily injections. The donor is responsible for the administration of medications. Blood samples and ultrasounds will be performed periodically to evaluate the development of the eggs.
 - 3. <u>Egg Retrieval</u>: Removal of egg(s) by an ultrasound guided needle under conscious intravenous (I.V.) sedation.

Risks and Side Effects

I have been advised that there are risks involved in egg donation. These risks are outlined below:

Potential Risks and Side Effects of Ovulation Induction

Side effects of Lupron® include hot flashes and vaginal dryness or spotting. A side effect of Gonal-F®, Repronex @ and hCG includes hyperstimulation of the ovaries. Symptoms of such hyperstimulation include lower abdominal pain, pressure, and weight gain. These side effects are usually relieved by discontinuing the medication.

In severe cases of hyperstimulation there may be the accumulation of fluid in the abdomen or in the lung cavity. Severe hyperstimulation requires hospitalization for bed rest, pain medication, fluid replacement, and monitoring. Rare instances of unusually severe hyperstimulation can be life-threatening.

There is some concern that the use of ovulation induction agents may increase a person's risk of developing ovarian cancer. One in 424 women will develop ovarian cancer before the age of 40. There is, however, no conclusive evidence that the use of the medications cited above increase a women's risk of ovarian cancer. Women with a history of infertility, independent of their use of these medications or other ovulation induction agents, do have a higher incidence of ovarian cancer. Pregnancy and past use of oral contraceptives appear to have a protective effect.

Other side effects of Gonal-F® Repronex®, and hCG include nausea, mood swings, hot flashes, breast tenderness, and fatigue. These do not usually pose a risk to the patient. Lupron®, Repronex®, Gonal-F® is administered by subcutaneous injection, and hCG are administered by intramuscular injection. Local irritation may result from such injections. There may be other risks which are unknown at this time.

Risks of Egg Retrieval

Risks of vaginal ultrasound retrieval include, but are not limited to, the possibility of bleeding, injury to internal organs, or infection that may require antibiotic treatment. Discomfort may be experienced during the retrieval. Bleeding, organ injury and infection may require surgery, although this is rare; however, surgery and anesthesia, if required, pose risks which include potentially life-threatening conditions.

Other Risks

Donor may also experience pressure and anxiety created by the emotional and time demands of the donor program.

Signature Statement

I understand that I am paid by the third party requesting my services for the time required and inconvenience posed by participating in the egg donation process. I also understand that there will be no payments to me by the Center for my services.

Medical records of donor patient, recipient patient/couple are confidential and will not be released except as authorized by the patient or by law. However, I consent to the Center's photographing or videotaping the procedures entailed by the Center as set out in the attached *Authorization of Use or Disclosure of Protected Health Information*. Such photographs or videotapes will be retained as documentation of my care and treatment, and they may also be used for educational purposes by medical doctors, medical students, and non-physician staff employed by or associated with the Center. My identity will not be released with such photographs or videotapes.

The Center for Reproductive Medicine is part of Wake Forest University Baptist Medical Center, which is a medical teaching facility. Accordingly, residents and medical students may observe or participate in the medical procedures.

Donor agrees to take steps to prevent conception while the Donor is actively engaged in the procedures related to egg donation, including ovulation induction and egg retrieval.

In the case of an anonymous donor, the Donor will not attempt to discover the identities of the recipients or any resulting offspring. The identity of the donor will not be revealed to the recipient patient or recipient patient couple by the Center.

Donor, whether known or anonymous to recipient patient or recipient patient couple, hereby waives any rights to any such offspring or resulting embryos that are cryopreserved.

If Donor makes the Center or its officers, employees, or agents a party to any litigation arising from any disagreement as to the rights to the Donor's eggs or any resulting offspring, Donor shall be liable for the reasonable attorney's fees and other costs incurred by the Center in such litigation.

Donor acknowledges that any questions she has about the Center or egg donation procedures have been answered satisfactorily by the Center's staff.

North Carolina law will govern all procedures described above.

An executed copy of this form has been provided to the donor for her records.	
Donor	Date
Witness	

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